A For the 2020 calendar year, or tax year beginning 07/01/2020, and ending 06/30/2021

C Name of organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

D Employer identification number
23-2888152

E Telephone number
(888) 383-4483

F Name and address of principal officer
REBECCA MOFFETT
P.O. BOX 3075, SOUTHEASTERN, PA 19398

I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527

J Website: WWW.VANGUARDCHARITABLE.ORG

K Form of organization: X Corporation Trust Association Other

L Year of formation: 1997 M State of legal domicile: PA

Part I Summary

1 BRIEFLY DESCRIBE THE ORGANIZATION’S MISSION OR MOST SIGNIFICANT ACTIVITIES:
TO INCREASE PHILANTHROPY AND MAXIMIZE ITS IMPACT OVER TIME.

2 Check this box □ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) ............. 3

4 Number of independent voting members of the governing body (Part VI, line 1b) ............. 4

5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) ............. 5

6 Total number of volunteers (estimate if necessary) ............. 6

7a Total unrelated business revenue from Part VIII, column (C), line 12 ............. 7a

7b Net unrelated business taxable income from Form 990-T, Part I, line 11 ............. 7b

Part II Revenue

8 Contributions and grants (Part VIII, line 1h) ........................................... 8

9 Program service revenue (Part VIII, line 2g) ........................................... 9

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) .................. 10

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ........ 11

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) ............. 13

14 Benefits paid to or for members (Part IX, column (A), line 4) ............. 14

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ............. 15

16 Professional fundraising fees (Part IX, column (A), line 11e) .................. 16

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ............. 17

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ............. 18

19 Revenue less expenses. Subtract line 18 from line 12 ............. 19

Net Assets or Fund Balances

20 Total assets (Part X, line 16) ........................................... 20

21 Total liabilities (Part X, line 26) ........................................... 21

22 Net assets or fund balances. Subtract line 21 from line 20 ............. 22

Part III Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Date 5/14/2022

Type or print name and title
MARK FROEHlich TREASURER & CFO

Print/Type preparer’s name
ERIC M. MCNEIL

Preparer’s signature

Date 05/12/2022

Check self-employed □

PTIN P00460263

Firm’s name ❯ PRICEROWHOUSECOOPS LLP

Firm’s EIN 13-4008324

Firm’s address ❯ 2001 MARKET ST, SUITE 1800 PHILADELPHIA, PA 19103

Phone no. 267-330-3000

May the IRS discuss this return with the preparer shown above? (see instructions) □ Yes □ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2020)
Part III  Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? □ Yes □ No
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? □ Yes □ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $1,864,529,350 including grants of $1,845,626,381) (Revenue $0)
SEE SCHEDULE O

4b (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses ➤ $1,864,529,350.
## Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If &quot;Yes,&quot; complete Schedule A.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part II.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part III</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part II.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If &quot;Yes,&quot; complete Schedule D, Part IV.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If &quot;Yes,&quot; complete Schedule D, Part V.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11 If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VII.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VIII.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IX.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>e Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>f 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 &quot;Yes,&quot; complete Schedule D, Part X.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12a Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? If &quot;Yes,&quot; complete Schedule F, Parts I and IV.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts II and IV.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts III and IV.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part I. See instructions.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>18 Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>19 Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20a Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and II.</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td>22</td>
<td>X</td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule J.</td>
<td>23</td>
<td>X</td>
</tr>
<tr>
<td>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td>24a</td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
<td></td>
</tr>
<tr>
<td>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>24c</td>
<td></td>
</tr>
<tr>
<td>d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
<td></td>
</tr>
<tr>
<td>25a 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 &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td>25a</td>
<td>X</td>
</tr>
<tr>
<td>b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td>25b</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part II.</td>
<td>26</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td>27</td>
<td>X</td>
</tr>
<tr>
<td>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):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28a</td>
<td>X</td>
</tr>
<tr>
<td>b A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28b</td>
<td>X</td>
</tr>
<tr>
<td>c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28c</td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td>29</td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td>30</td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I.</td>
<td>31</td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II.</td>
<td>32</td>
<td>X</td>
</tr>
<tr>
<td>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If &quot;Yes,&quot; complete Schedule R, Part I.</td>
<td>33</td>
<td>X</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1.</td>
<td>34</td>
<td>X</td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>35a</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td>35b</td>
<td>X</td>
</tr>
<tr>
<td>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td>36</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI.</td>
<td>37</td>
<td>X</td>
</tr>
<tr>
<td>38 Did the organization provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.</td>
<td>38</td>
<td></td>
</tr>
</tbody>
</table>

### Part V Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.</td>
<td>1a</td>
<td>15</td>
</tr>
<tr>
<td>b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.</td>
<td>1b</td>
<td>0</td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>1c</td>
<td>X</td>
</tr>
</tbody>
</table>
## Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.</td>
<td>2a  106</td>
<td></td>
</tr>
<tr>
<td>b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>2b X</td>
<td></td>
</tr>
<tr>
<td>Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).</td>
<td>3a X</td>
<td></td>
</tr>
<tr>
<td>3a. Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>3a X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No&quot; to line 3b, provide an explanation on Schedule O</td>
<td>3b X</td>
<td></td>
</tr>
<tr>
<td>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)?</td>
<td>4a X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; enter the name of the foreign country ▶</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>5a X</td>
<td></td>
</tr>
<tr>
<td>b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>5b X</td>
<td></td>
</tr>
<tr>
<td>c. If &quot;Yes&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
<td>5c</td>
<td></td>
</tr>
<tr>
<td>6a. 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?</td>
<td>6a X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>6b</td>
<td></td>
</tr>
<tr>
<td>7a. Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>7a X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td>7b</td>
<td></td>
</tr>
<tr>
<td>c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>7c X</td>
<td></td>
</tr>
<tr>
<td>d. If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td>7d</td>
<td></td>
</tr>
<tr>
<td>8a. Did the organization receive or pay premiums, directly or indirectly, to or for a personal benefit contract?</td>
<td>8a</td>
<td></td>
</tr>
<tr>
<td>b. Did the organization receive or pay premiums, directly or indirectly, to or for a personal benefit contract?</td>
<td>8b</td>
<td></td>
</tr>
<tr>
<td>9a. Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td>9a X</td>
<td></td>
</tr>
<tr>
<td>b. Did the sponsoring organization make a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td>9b</td>
<td></td>
</tr>
<tr>
<td>10a. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>11a. Gross income from members or shareholders.</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>11b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>12a. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td>12a</td>
<td></td>
</tr>
<tr>
<td>13a. Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>13a</td>
<td></td>
</tr>
<tr>
<td>Note: See the instructions for additional information the organization must report on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a. Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>14a X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation on Schedule O</td>
<td>14b</td>
<td></td>
</tr>
<tr>
<td>15. Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?</td>
<td>15 X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; see instructions and file Form 4720, Schedule N.</td>
<td>16</td>
<td>X</td>
</tr>
</tbody>
</table>
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year.

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.

1b Enter the number of voting members included on line 1a, above, who are independent.

2a Did any officer, director, trustee, or key employee have a family relationship or a business relationship with another officer, director, trustee, or key employee?

3a Did the organization delegate control over management duties customarily performed by or under the direct supervision of directors, trustees, or key employees to a management company or other person?

4a Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5a Did the organization become aware during the year of a significant diversion of the organization’s assets?

6a Did the organization have members or stockholders?

7a 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?

8a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

9a Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address?

Section B. Policies

10a Did the organization have local chapters, branches, or affiliates?

10b 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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11b 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.

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

15 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?

15a The organization’s CEO, Executive Director, or top management official

15b Other officers or key employees of the organization

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?

16b 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?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3) is only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website  X Another’s website  X Upon request  □ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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.

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and title</td>
<td>Average hours per week</td>
<td>Position</td>
<td>Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>Estimated amount of other compensation from the organization and related organizations</td>
</tr>
<tr>
<td></td>
<td>(do not check more than one box, unless person is both an officer and a director/trustee)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| (1) | ANN L. GILL | 40.00 | CHIEF PHILANTHROPIC OFFICER | 0. | X | 0. | 302,554. | 0. | 55,398. |
| (2) | MARK FROEHLLICH | 40.00 | CHIEF FINANCIAL OFFICER | 0. | X | 0. | 221,047. | 0. | 43,665. |
| (3) | REBECCA MOFFETT | 40.00 | CHIEF STRATEGIC PLANNING OFF | 0. | X | 0. | 188,456. | 0. | 56,305. |
| (4) | CARLA RIES | 40.00 | DIRECTOR OF OPERATIONS | 0. | X | 0. | 140,897. | 0. | 48,078. |
| (5) | JODI ROSEN | 40.00 | DIRECTOR OF STRATEGIC SERVICES | 0. | X | 0. | 151,447. | 0. | 24,789. |
| (6) | MARY JANE EMERY | 40.00 | DIRECTOR OF FINANCE/CONTROLLER | 0. | X | 0. | 141,982. | 0. | 32,418. |
| (7) | CINDY VANAMBURGH | 40.00 | SR. BUSINESS DEV. EXEC. | 0. | X | 0. | 113,397. | 0. | 27,861. |
| (8) | ELAINE KENIG | 40.00 | DIRECTOR OF PHILANTHROPIC SERV | 0. | X | 0. | 110,692. | 0. | 16,186. |
| (9) | JOHN J. BRENNAN | 1.00 | TRUSTEE & CHAIRMAN | 0. | X | X | 0. | 0. | 0. |
| (10) | PAMELA DIPPEL CHONEY | 1.00 | TRUSTEE | 0. | X | 0. | 0. | 0. | 0. |
| (11) | VIKRAM DEWAN | 1.00 | TRUSTEE | 0. | X | 0. | 0. | 0. | 0. |
| (12) | MICHAEL F. HOLLAND | 1.00 | TRUSTEE | 0. | X | 0. | 0. | 0. | 0. |
| (13) | THOMAS LANCTOT | 1.00 | TRUSTEE | 0. | X | 0. | 0. | 0. | 0. |
| (14) | KARIN RISI | 1.00 | TRUSTEE (UNTIL 1/15/21) | 0. | X | 0. | 0. | 0. | 0. |
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15) MICHAEL S. MILLER</td>
<td>1.00</td>
<td>TRUSTEE (AS OF 2/22/21)</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(16) RENEE B. BOOTH</td>
<td>1.00</td>
<td>TRUSTEE (AS OF 2/22/21)</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(17) BETH MORALES SINGH</td>
<td>1.00</td>
<td>SECRETARY (UNTIL 3/1/21)</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(18) JANE G. GREENFIELD</td>
<td>40.00</td>
<td>PRESIDENT</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(19) CAROL DOW</td>
<td>40.00</td>
<td>CHIEF INFORMATION OFFICER</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(20) CAROLINE COSBY</td>
<td>1.00</td>
<td>ASST. SECRETARY (UNTIL 3/1/21)</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(21) CELIA ROADY</td>
<td>1.00</td>
<td>SECRETARY (AS OF 3/1/21)</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
</tbody>
</table>

1b Sub-total 1,370,472. 0. 304,700.

c Total from continuation sheets to Part VII, Section A 0. 0. 0.

d Total (add lines 1b and 1c) 1,370,472. 0. 304,700.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 9

<table>
<thead>
<tr>
<th>Yes No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATTACHMENT 2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization 18
## Part VIII

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f 4,254,463,026.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f</td>
<td>1g $2,620,043,952.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td>4,254,463,026.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th>(A) Business Code</th>
<th>(B) Total revenue</th>
<th>(C) Related or exempt function revenue</th>
<th>(D) Unrelated business revenue</th>
<th>(E) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Other Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts).</td>
<td>218,194,338.</td>
<td>1,475,767.</td>
<td>216,718,571.</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Investment Income

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Related Expenses

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross Income from Fundraising Events

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross Income from Gaming Activities

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a Gross income from gaming activities, See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross Sales of Inventory

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Total Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Total. See instructions</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>1,844,928,854</td>
<td>1,844,928,854</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>697,527</td>
<td>697,527</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>1,675,173</td>
<td>1,030,424</td>
<td>365,147</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>5,206,790</td>
<td>3,202,775</td>
<td>1,134,954</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>650,376</td>
<td>400,056</td>
<td>141,766</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>1,049,834</td>
<td>645,769</td>
<td>228,838</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>513,709</td>
<td>315,990</td>
<td>111,976</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td>1,221,806</td>
<td>879,494</td>
<td>50,665</td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>401,612</td>
<td>131,909</td>
<td>243,863</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>175,980</td>
<td>175,980</td>
<td>0</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td>235,000</td>
<td>235,000</td>
<td>0</td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>411,960</td>
<td>411,960</td>
<td>0</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>259,291</td>
<td>103,716</td>
<td>25,929</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>219,537</td>
<td>197,432</td>
<td>21,758</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>11,120,486</td>
<td>9,816,764</td>
<td>953,332</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>1,604,090</td>
<td>1,214,810</td>
<td>248,340</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>6,015</td>
<td>4,746</td>
<td>1,051</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>6,315</td>
<td>618</td>
<td>1,047</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>72,723</td>
<td>72,723</td>
<td>0</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td>188,888</td>
<td>188,888</td>
<td>0</td>
</tr>
<tr>
<td>a</td>
<td>TAXES</td>
<td>188,888</td>
<td>188,888</td>
<td>0</td>
</tr>
<tr>
<td>b</td>
<td>TEMPORARY HELP</td>
<td>632,013</td>
<td>478,723</td>
<td>81,452</td>
</tr>
<tr>
<td>c</td>
<td>BANK, PAYROLL, STATE FILING FE</td>
<td>169,117</td>
<td>169,117</td>
<td>0</td>
</tr>
<tr>
<td>d</td>
<td>BOARD OF TRUSTEES COSTS</td>
<td>83,271</td>
<td>83,271</td>
<td>0</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>111,287</td>
<td>67,783</td>
<td>32,590</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>1,871,641,654</td>
<td>1,864,529,350</td>
<td>4,567,687</td>
</tr>
</tbody>
</table>

**26 Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here □ if following SOP 98-2 (ASC 958-720).
### Balance Sheet

#### Assets

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>0.1</td>
<td>0.</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments.</td>
<td>26,363,829.</td>
<td>38,905,812.</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3.0</td>
<td>0.</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>4.0</td>
<td>0.</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director,</td>
<td>5.0</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>trustee, key employee, creator or founder, substantial contributor, or 35%</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined</td>
<td>6.0</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>7.0</td>
<td>0.</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8.0</td>
<td>0.</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>9.2,883,943.</td>
<td>4,302,551.</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other</td>
<td>10a 4,932,410.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>basis. Complete Part VI of Schedule D</td>
<td>10b 4,932,410.</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>11.10721844243.</td>
<td>14166559106.</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td>12.64,195,205.</td>
<td>1,367,926,841.</td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>13.0</td>
<td>10</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>14.0</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>15.22,157,030.</td>
<td>538,375,283.</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 33)</td>
<td>16.10837444250.</td>
<td>16116069593.</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses.</td>
<td>17.15,409,837.</td>
<td>22,426,886.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18.0</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19.0</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20.0</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21.0</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee,</td>
<td>22.0</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>key employee, creator or founder, substantial contributor, or 35% controlled</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23.0</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24.0</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third</td>
<td>25.19,015,841.</td>
<td>48,135,448.</td>
</tr>
<tr>
<td></td>
<td>parties, and other liabilities not included on lines 17-24). Complete Part X</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25</td>
<td>26.34,425,678.</td>
<td>70,562,334.</td>
</tr>
</tbody>
</table>

#### Liabilities

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Organizations that follow FASB ASC 958, check here ➤ and complete lines 27, 28,</td>
<td>27.10803018572.</td>
<td>16045507259.</td>
</tr>
<tr>
<td></td>
<td>32, and 33.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Net assets without donor restrictions</td>
<td>28.0</td>
<td>28</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td>29.0</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>30.0</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds.</td>
<td>31.0</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>32.10803018572.</td>
<td>16045507259.</td>
</tr>
<tr>
<td>33</td>
<td><strong>Total liabilities and net assets/fund balances.</strong></td>
<td>33.10837444250.</td>
<td>16116069593.</td>
</tr>
</tbody>
</table>
### Part XI: Reconciliation of Net Assets

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>4,942,778,815</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>1,871,641,654</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3,071,137,161</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>10,803,018,572</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>2,171,351,526</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>16,045,507,259</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part I: Reason for Public Charity Status

(All organizations must complete this part. See instructions.)

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- An organization that normally receives more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- An organization organized and operated exclusively for the benefit of a governmental unit described in section 509(a)(4). See section 509(a)(4).
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- An organization organized and operated exclusively for the benefit of a governmental unit described in 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. Type I
- A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

### b. Type II
- A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

### c. Type III functionally integrated
- A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

### d. Type III non-functionally integrated
- A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

### e. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

### f. Enter the number of supported organizations.

### g. Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described in section 170(b)(1)(A)(ii))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support</th>
<th>(vi) Amount of other support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part II** Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>1,546,748,309.</td>
<td>1,762,454,882.</td>
<td>1,901,890,599.</td>
<td>2,088,348,628.</td>
<td>4,254,463,026.</td>
<td>11,553,905,444.</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>1,546,748,309.</td>
<td>1,762,454,882.</td>
<td>1,901,890,599.</td>
<td>2,088,348,628.</td>
<td>4,254,463,026.</td>
<td>11,553,905,444.</td>
</tr>
<tr>
<td>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)</td>
<td>932,518,187.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td>10,621,387,257.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>1,546,748,309.</td>
<td>1,762,454,882.</td>
<td>1,901,890,599.</td>
<td>2,088,348,628.</td>
<td>4,254,463,026.</td>
<td>11,553,905,444.</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>139,510,586.</td>
<td>182,571,391.</td>
<td>221,956,341.</td>
<td>228,999,680.</td>
<td>216,718,571.</td>
<td>989,756,569.</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td>106,428.</td>
<td>5,349,950.</td>
<td>606,780.</td>
<td>1,284,325.</td>
<td>7,347,483.</td>
<td>9,770,043.</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td>2,551,029,496.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td>12</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>84.63%</td>
</tr>
<tr>
<td>15 Public support percentage from 2019 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90.49%</td>
</tr>
<tr>
<td>16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>16b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>17b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
**Part III**  
Support Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) | 15% |
16 Public support percentage from 2019 Schedule A, Part III, line 15 | 16% |

### Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) | 17% |
18 Investment income percentage from 2019 Schedule A, Part III, line 17 | 18% |
19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. |
19b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. |
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. |
Part IV

Supporting Organizations

(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.)

Section A. All Supporting Organizations

1. Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in PART VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in PART VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.

b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in PART VI when and how the organization made the determination.

c. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in PART VI what controls the organization put in place to ensure such use.

4. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.

b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in PART VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.

c. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in PART VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in PART VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).

b. Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?

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

6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in PART VI.

7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

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).

9a. Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in PART VI.

b. Did one or more disqualified persons (as defined 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.

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 PART VI.

10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.

b. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)
**Part IV Supporting Organizations (continued)**

**Section B. Type I Supporting Organizations**

1. Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? **Yes** **No**

2. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? **Yes** **No**

**Section C. Type II Supporting Organizations**

1. Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? **Yes** **No**

**Section D. All Type III Supporting Organizations**

1. Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? **Yes** **No**

2. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? **Yes** **No**

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? **Yes** **No**

**Section E. Type III Functionally Integrated Supporting Organizations**

1. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   a. The organization satisfied the Activities Test. Complete line 2 below. **Yes** **No**
   b. The organization is the parent of each of its supported organizations. Complete line 3 below. **Yes** **No**
   c. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). **Yes** **No**

2. Activities Test. Answer lines 2a and 2b below.
   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? **Yes** **No**
   b. Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? **Yes** **No**

3. Parent of Supported Organizations. Answer lines 3a and 3b below.
   a. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? **Yes** **No**
   b. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? **Yes** **No**
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<table>
<thead>
<tr>
<th>Section A - Adjusted Net Income</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section B - Minimum Asset Amount</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td>1e</td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Multiply line 5 by 0.035.</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Recoveries of prior-year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section C - Distributable Amount</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 0.85 of line 1.</td>
<td>2</td>
</tr>
<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, column A)</td>
<td>3</td>
</tr>
<tr>
<td>4 Enter greater of line 2 or line 3.</td>
<td>4</td>
</tr>
<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td>6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td>6</td>
</tr>
<tr>
<td>7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).</td>
<td></td>
</tr>
</tbody>
</table>
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>Excess Distributions</th>
<th>Underdistributions Pre-2020</th>
<th>Distributable Amount for 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2020 from Section D, line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2021. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Distributions for 2020 from Section D, line 7:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Schedule A (Form 990 or 990-EZ) 2020

JSA

0E1232 1.000

18674H 1467  V 20-7.21
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
**Schedule B**

(Form 990, 990-EZ, or 990-PF)

**Department of the Treasury**

**Internal Revenue Service**

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

**Organization type (check one):**

**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**

- 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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, contributions 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).
<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>N/A</td>
<td>$775,000,000.</td>
<td>Person (\times)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td>N/A</td>
<td>$525,000,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll (\times)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td>N/A</td>
<td>$90,412,491.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash (\times)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>
### Part II  Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>CONTRIBUTION OF PRIVATE COMPANY STOCK</td>
<td>$525,000,000.</td>
<td>11/06/2020</td>
</tr>
<tr>
<td>3</td>
<td>CONTRIBUTION OF PRIVATE COMPANY STOCK</td>
<td>$90,412,491.</td>
<td>10/16/2020</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Part III  *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of *$1,000 or less* for the year. (Enter this information once. See instructions.)

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
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<td></td>
</tr>
</tbody>
</table>

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
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</tr>
</tbody>
</table>

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
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<td></td>
</tr>
</tbody>
</table>

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
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</tr>
</tbody>
</table>
**Part I-A** Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (See instructions for definition of "political campaign activities")
   - $\$\$

2. Political campaign activity expenditures (See instructions).
   - $\$\$

3. Volunteer hours for political campaign activities (See instructions).
   - $\$\$

**Part I-B** Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955.
   - $\$\$

2. Enter the amount of any excise tax incurred by organization managers under section 4955.
   - $\$\$

3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
   - [Yes] [No]

4. a. Was a correction made?
   - [Yes] [No]
   - b. If "Yes," describe in Part IV.

**Part I-C** Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities.
   - $\$\$

2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities.
   - $\$\$

3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.
   - $\$\$

4. Did the filing organization file Form 1120-POL for this year?
   - [Yes] [No]

5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization's funds. If none, enter -0-</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Part II-A

Check □ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member’s name, address, EIN, expenses, and share of excess lobbying expenditures).

Check □ if the filing organization checked box A and “limited control” provisions apply.

<table>
<thead>
<tr>
<th>Limits on Lobbying Expenditures</th>
<th>(a) Filing organization’s totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>275,964.</td>
<td>1,868,821,073.</td>
</tr>
<tr>
<td>1b Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>275,964.</td>
<td>1,869,097,037.</td>
</tr>
<tr>
<td>1c Total lobbying expenditures (add lines 1a and 1b)</td>
<td>1,868,821,073.</td>
<td>1,869,097,037.</td>
</tr>
<tr>
<td>1d Other exempt purpose expenditures (add lines 1c and 1d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Total exempt purpose expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td>1,000,000.</td>
<td></td>
</tr>
</tbody>
</table>

If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:

- Not over $500,000: 20% of the amount on line 1e.
- Over $500,000 but not over $1,000,000: $100,000 plus 15% of the excess over $500,000.
- Over $1,000,000 but not over $1,500,000: $175,000 plus 10% of the excess over $1,000,000.
- Over $1,500,000 but not over $17,000,000: $225,000 plus 5% of the excess over $1,500,000.
- Over $17,000,000: $1,000,000.

20% of the amount on line 1e.

Grassroots nontaxable amount (enter 25% of line 1f) | 250,000. | 0. |

Subtract line 1g from line 1a. If zero or less, enter -0-. | 0. | 0. |

Subtract line 1f from line 1c. If zero or less, enter -0-. | 0. | 0. |

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes □ No □

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<table>
<thead>
<tr>
<th>Lobbying Expenditures During 4-Year Averaging Period</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Lobbying nontaxable amount</td>
<td>1,000,000.</td>
<td>1,000,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b Lobbying ceiling amount (150% of line 2a, column (e))</td>
<td></td>
<td></td>
<td></td>
<td>1,500,000.</td>
<td></td>
</tr>
<tr>
<td>2c Total lobbying expenditures</td>
<td>275,964.</td>
<td>275,964.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td>250,000.</td>
<td>250,000.</td>
</tr>
<tr>
<td>2e Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td></td>
<td></td>
<td></td>
<td>375,000.</td>
<td></td>
</tr>
<tr>
<td>2f Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part II-B**  Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td>Yes</td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Other activities?</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i</td>
<td></td>
</tr>
</tbody>
</table>

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

2b If "Yes," enter the amount of any tax incurred under section 4912

2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912

2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

**Part III-A**  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</td>
<td>3</td>
</tr>
</tbody>
</table>

**Part III-B**  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dues, assessments and similar amounts from members</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Current year</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Carryover from last year</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total</td>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Taxable amount of lobbying and political expenditures (See instructions)</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

**Part IV**  Supplemental information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.
Supplemental Information (continued)
**Part I**

**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th></th>
<th>Donor advised funds</th>
<th>Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td>24,034</td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td>4,254,349,930</td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td>1,845,575,881</td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td>16,001,606,503</td>
</tr>
</tbody>
</table>

5. 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 legal control?  
   - Yes [X]  
   - No [ ]

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?  
   - [X] Yes  
   - No [ ]

**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 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 open space

2. 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.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4. Number of states 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 enforcement of the conservation easements it holds?
   - Yes [ ]  
   - No [X]

6. Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7. Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8. 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)?
   - [X] Yes  
   - No [ ]

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.

1b. 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 VIII, line 1

   b. Assets included in Form 990, Part X
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a   Public exhibition
   b   Scholarly research
   c   Preservation for future generations
   d   Loan or exchange program
   e   Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Yes    No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Yes    No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning balance</td>
<td></td>
</tr>
<tr>
<td>Additions during the year</td>
<td></td>
</tr>
<tr>
<td>Distributions during the year</td>
<td></td>
</tr>
<tr>
<td>Ending balance</td>
<td></td>
</tr>
</tbody>
</table>

1c Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?    Yes    No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

<table>
<thead>
<tr>
<th></th>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning of year balance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net investment earnings, gains, and losses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants or scholarships</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other expenditures for facilities and programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>End of year balance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment %

b Permanent endowment %

c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations                      Yes    No

(ii) Related organizations                      Yes    No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?                      Yes    No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th></th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>4,932,410. 4,932,410.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)                      |
## Part VII  Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) GLOBAL EQUITY PARTNERSHIP</td>
<td>886,124,447</td>
<td>FMV</td>
</tr>
<tr>
<td>(B) MULTI ASSET FUND</td>
<td>67,033,201</td>
<td>FMV</td>
</tr>
<tr>
<td>(C) PRIVATELY HELD STOCK</td>
<td>414,769,193</td>
<td>FMV</td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
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<tr>
<td>(F)</td>
<td></td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ➤ 1,367,926,841.

## Part VIII  Investments - Program Related.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
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<tr>
<td>(4)</td>
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<td>(7)</td>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ➤  

## Part IX  Other Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ➤  

## Part X  Other Liabilities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) PAYABLE FOR SECURITIES PURCHASED</td>
<td>48,135,448.</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
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<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ➤ 48,135,448.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. [X]
### Part XI  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>7115399419.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains (losses) on investments</td>
<td>2171351526.</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>1,269,078.</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e 2172620604.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>4942778815.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>4942778815.</td>
</tr>
</tbody>
</table>

### Part XII  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>1872910732.</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td>1,269,078.</td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Other losses.</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e 1,269,078.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>1871641654.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>1871641654.</td>
</tr>
</tbody>
</table>

### Part XIII  Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**FIN 48 DISCLOSURE**

**SCHEDULE D, PART X, LINE 2**

MANAGEMENT HAS NOTED NO UNCERTAIN TAX POSITIONS AND HAS CONCLUDED NO PROVISION IS REQUIRED.
**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SOUTH ASIA</td>
<td>0.</td>
<td>1. PROGRAM SERVICES TECH ADMIN SVCS</td>
<td>3,035,838.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) EUROPE</td>
<td>0.</td>
<td>0. GRANTMAKING</td>
<td>440,424.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) NORTH AMERICA</td>
<td>0.</td>
<td>0. GRANTMAKING</td>
<td>198,853.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) MIDDLE EAST AND NORTH AFRICA</td>
<td>0.</td>
<td>0. GRANTMAKING</td>
<td>7,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>(6)</td>
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<td>(16)</td>
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<tr>
<td>(17)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**3a Subtotal** 3,682,115.

**b Total from continuation sheets to Part I**

**c Totals (add lines 3a and 3b)** 3,682,115.
## Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>NORTH AMERICA</td>
<td>UNRESTRICTED</td>
<td>10,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>NORTH AMERICA</td>
<td>GRANT IN SUP</td>
<td>84,383.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>NORTH AMERICA</td>
<td>GRANT TO SUP</td>
<td>20,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td>EUROPE/ICELAND/GREENLAND</td>
<td>GRANT TO PRO</td>
<td>400,000.</td>
<td>WIRE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td>NORTH AMERICA</td>
<td>GRANT TO SUP</td>
<td>50,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td>EUROPE/ICELAND/GREENLAND</td>
<td>UNRESTRICTED</td>
<td>10,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td>EUROPE/ICELAND/GREENLAND</td>
<td>UNRESTRICTED</td>
<td>28,174.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td>NORTH AMERICA</td>
<td>UNRESTRICTED</td>
<td>10,500.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td>MIDDLE EAST/NORTH AFRICA</td>
<td>UNRESTRICTED</td>
<td>7,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
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<td></td>
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<td>11</td>
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</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
### Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
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<td>Question</td>
<td>Yes</td>
<td>No</td>
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</tr>
<tr>
<td>1</td>
<td>Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If &quot;Yes,&quot; the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</td>
<td>☑</td>
<td>☑</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>Did the organization have an interest in a foreign trust during the tax year? If &quot;Yes,&quot; the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)</td>
<td>☑</td>
<td>☑</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>Did the organization have an ownership interest in a foreign corporation during the tax year? If &quot;Yes,&quot; the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</td>
<td>☑</td>
<td>☑</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If &quot;Yes,&quot; the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</td>
<td>☑</td>
<td>☑</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization have an ownership interest in a foreign partnership during the tax year? If &quot;Yes,&quot; the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</td>
<td>☑</td>
<td>☑</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6</td>
<td>Did the organization have any operations in or related to any boycotting countries during the tax year? If &quot;Yes,&quot; the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</td>
<td>☑</td>
<td>☑</td>
<td></td>
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</tbody>
</table>
Part V  Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Scheduler F, Part I, Line 2

Vanguard Charitable's Board of Trustees has final authority over grant distributions. With respect to foreign grants, Vanguard Charitable conducts either an "equivalency determination" (a good faith determination that the grantee is the equivalent of a U.S. public charity) or performs "expenditure responsibility" in accordance with Section 4945(h). Vanguard Charitable typically requires prospective grant recipients to (i) provide information about their charitable activities and a proposal for the use of grant funds before approving a grant recommendation and (ii) provide Vanguard Charitable with reports demonstrating how funds were used for the stated charitable purposes.

Following the September 11, 2001 terrorist attacks, Vanguard Charitable developed anti-terrorism financing compliance guidelines in order to comply with federal standards developed by the Office of Foreign Assets Control and other relevant federal laws. These guidelines ensure appropriate steps are followed to reduce the likelihood that its grants could be diverted to terrorist organizations.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 WOMEN IN FINANCE FOUNDATION</td>
<td>888C 8TH AVE # 453 NEW YORK, NY 10019</td>
<td>57-1174548</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>1000 FRIENDS OF FLORIDA INC</td>
<td>PO BOX 5948 TALLAHASSEE, FL 32314</td>
<td>59-2761163</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>1000 FRIENDS OF OREGON</td>
<td>133 SW 2ND AVE STE 201 PORTLAND, OR 97204</td>
<td>93-0642086</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>1000 DEGREES</td>
<td>1401 LOS GAMOS DR STE 205 SAN RAFAEL, CA 94</td>
<td>95-3667812</td>
<td>501 (C) 3</td>
<td>81,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>101 INC</td>
<td>151 MOORE ST PRINCETON, NJ 8540</td>
<td>23-7057664</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12STONE CHURCH INC</td>
<td>1322 BUFORD DR LAWRENCEVILLE, GA 30043</td>
<td>58-1744164</td>
<td>501 (C) 3</td>
<td>26,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1616 LATIMER FUND</td>
<td>1616 LATIMER ST PHILADELPHIA, PA 19103</td>
<td>85-2592534</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>18 CORP</td>
<td>650 S ORANGE AVE LIVINGSTON, NJ 7039</td>
<td>22-3764133</td>
<td>501 (C) 3</td>
<td>86,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>19TH NEWS</td>
<td>3267 BEE CAVES RD STE 107 # 353 AUSTIN, TX</td>
<td>84-2627202</td>
<td>501 (C) 3</td>
<td>108,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1DAY SOONER INC</td>
<td>1027 PRESIDENT ST APT 2A BROOKLYN, NY 11225</td>
<td>85-1103820</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>1LOVE4ANIMALS INC</td>
<td>PO BOX 1414 SOUTHEASTERN, PA 19399</td>
<td>82-2314784</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>21ST CENTURY PARKS INC</td>
<td>471 WEST MAIN STREET LOUISVILLE, KY 40202</td>
<td>20-1780317</td>
<td>501 (C) 3</td>
<td>52,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1. 24 7 GATEWAY LLC 275 PRYOR ST SW ATLANTA, GA 30303</td>
<td>26-1193832</td>
<td>501 (C) 3</td>
<td>21,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2. 26 WEST CHURCH PO BOX 3846 HILLSBORO, OR 97123</td>
<td>81-1993024</td>
<td>501 (C) 3</td>
<td>99,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. 2 REMAIN1 MINISTRIES 9393 N 90TH ST STE 102 # 262 SCOTTSDALE, AZ</td>
<td>81-2827245</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. 3 MARIFOSAS MONTESSORI FOUNDATION INC 133 N VILLAMERE DR DOWAGIAC, MI 49047</td>
<td>46-0641130</td>
<td>501 (C) 3</td>
<td>55,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. 30 DAY FUND INC 1314 RUGBY RD CHARLOTTESVILLE, VA 22903</td>
<td>85-0602776</td>
<td>501 (C) 3</td>
<td>620,000</td>
<td>FMV</td>
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<tr>
<td>6. 350 ORG 20 JAY ST STE 732 BROOKLYN, NY 11201</td>
<td>26-1150699</td>
<td>501 (C) 3</td>
<td>227,350</td>
<td>FMV</td>
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<tr>
<td>7. 3CIRCLE CHURCH 10274 STATE HIGHWAY 104 FAIRHOPE, AL 36532</td>
<td>63-1256311</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
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<tr>
<td>8. 4 13 INC 3146 WHITNEY RD AURORA, IL 60502</td>
<td>45-2649958</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
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<tr>
<td>9. 4 PAWS FOR ABILITY INC 253 DAYTON AVE XENIA, OH 45385</td>
<td>31-1625484</td>
<td>501 (C) 3</td>
<td>14,750</td>
<td>FMV</td>
<td>N/A</td>
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<td>10. 40 DAYS FOR LIFE 4112 E 29TH ST BRYAN, TX 77802</td>
<td>26-0308665</td>
<td>501 (C) 3</td>
<td>112,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>11. 412 FOOD RESCUE INC 6140 STATION ST PITTSBURGH, PA 15206</td>
<td>47-3476140</td>
<td>501 (C) 3</td>
<td>43,696</td>
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<td>12. 4-CT CORP 50 CHARLES ST WESTPORT, CT 6880</td>
<td>85-0535172</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1 (a)</td>
<td>4MONTGOMERY'S KIDS INC</td>
<td>46-4222466</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>50CAN INC</td>
<td>27-3095920</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>564 PARK AVENUE PRESERVATION FOUNDATION</td>
<td>20-3717314</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5TH AVENUE THEATRE ASSOCIATION</td>
<td>91-1087612</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>80-20 EDUCATIONAL FOUNDATION</td>
<td>20-2391770</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>826 BOSTON INC</td>
<td>20-8065915</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>826 MSP</td>
<td>27-1372442</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>826LA</td>
<td>38-3722092</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>A &amp; M SPORTS ACADEMY INC</td>
<td>46-2693682</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>A BETTER CHANCE OF WILTON INC</td>
<td>06-1414597</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>A BETTER CHICAGO</td>
<td>27-4499625</td>
<td>501 (C) 3</td>
<td>260,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
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<td>56-2389949</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A BREATHE OF HOPE LUNG FOUNDATION</td>
<td>30-0475578</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>A CHILDS PLACE OF CHARLOTTE INC</td>
<td>58-1911741</td>
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<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>A CONTEMPORARY THEATRE INC</td>
<td>61-0787792</td>
<td>501 (C) 3</td>
<td>6,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>A DOOR OF HOPE PREGNANCY CENTER INC</td>
<td>51-0263402</td>
<td>501 (C) 3</td>
<td>6,700.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>A FAR CRY INC</td>
<td>30-0456355</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>6</td>
<td>A FUND INC</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>7</td>
<td>A GIFT FOR TEACHING INC</td>
<td>59-3515162</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>8</td>
<td>A HOME WITHIN INC</td>
<td>94-3402610</td>
<td>501 (C) 3</td>
<td>50,000.</td>
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<td>9</td>
<td>A JEWISH VOICE FOR PEACE INC</td>
<td>90-0018359</td>
<td>501 (C) 3</td>
<td>62,850.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>A KID AGAIN INC</td>
<td>31-1440073</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>11</td>
<td>A LIGHT OF HOPE</td>
<td>81-4235976</td>
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<td>12</td>
<td>A NEW DAY INC</td>
<td>85-0245782</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<thead>
<tr>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>A PARTNERS</td>
<td>26-2888198</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>47-2959935</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>A PLACE TO BE</td>
<td>45-3081114</td>
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<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>A PLACE TO TURN INC</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>A PROMISE TO HELP</td>
<td>47-1137244</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>A SILVER LINING FOUNDATION CHICAGOLAND CANC</td>
<td>90-0097495</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>A TIME 4 PAWS</td>
<td>94-3476812</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>A WELL-FED WORLD</td>
<td>27-0865905</td>
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<td>FMV</td>
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<tr>
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<td>FMV</td>
<td>N/A</td>
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<td>A WOMANS PLACE</td>
<td>23-2034180</td>
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<td>9,400.</td>
<td>FMV</td>
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<td>AARONS PRESENTS INC</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>AAJ FOUNDATION</td>
<td>46-4010444</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**SCHEDULE I**

(Form 990)

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

Employer identification number

**23-2888152**

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes** [x]  
   - **No**  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tr>
<td>AARP FOUNDATION</td>
<td>52-0794300</td>
<td>501 (C) 3</td>
<td>57,140.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AAVI INC</td>
<td>65-0406418</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABARI COLLECTIVE</td>
<td>27-1289314</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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<td>FMV</td>
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<tr>
<td>ABBEY THEATRE FOUNDATION INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ABBOTT NORTHWESTERN HOSPITAL FOUNDATION</td>
<td>04-3643816</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABBY KELLEY FOSTER HOUSE INC</td>
<td>04-2648411</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABC IN DARIEN INC</td>
<td>06-1030004</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABC OF THE CENTRAL PACIFIC COAST</td>
<td>93-0396925</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABDORRANMAN BOROUGHAND CENTER FOR HUMAN RIGH</td>
<td>52-2302849</td>
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<tr>
<td>ABDUL SATTAR EDHI INTERNATIONAL FOUNDATION</td>
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<td>10,000.</td>
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<td>ABIDING PEACE ACADEMY</td>
<td>75-0706010</td>
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<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ABILENE BOYS RANCH INC PO BOX 6839 ABILENE, TX 79608 75-0948921 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) ABILENE CHRISTIAN UNIVERSITY ACU BOX 29120 ABILENE, TX 79699 75-0851900 501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) ABILENE ZOOLOGICAL SOCIETY PO BOX 60 ABILENE, TX 79604 75-1226706 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) ABILIS INC 50 GLENVILLE ST GREENWICH, CT 6831 06-6009327 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) ABILITYFIRST 1300 E GREEN ST PASADENA, CA 91106 95-1690983 501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) ABILITYPATH 350 TWIN DOLPHIN DR STE 123 REDWOOD CITY, CA 94-1156502 501 (C) 3</td>
<td>16,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ABILITYPATH HOUSING 350 TWIN DOLPHIN DR STE 123 REDWOOD CITY, CA 94-1546643 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) ABINGTON ART CENTER INC 515 MEETINGHOUSE RD JENKINTOWN, PA 19046 23-1633530 501 (C) 3</td>
<td>7,389.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) ABINGTON MEMORIAL HOSPITAL 1200 OLD YORK RD ABINGTON, PA 19001 23-1352152 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) ABINGTON MEMORIAL HOSPITAL FOUNDATION 1200 OLD YORK RD ABINGTON, PA 19001 23-2188052 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11) ABLE WORKS PO BOX 257 PALO ALTO, CA 94302 20-2175098 501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(12) ABODE SERVICES 40849 FREMONT BLVD FREMONT, CA 94538 94-3087060 501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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<td>ABORTION CARE NETWORK</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ABRAHAM FOUNDATION</td>
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<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ABRAHAM JOSHUA HESCHEL SCHOOL</td>
<td>13-3091539</td>
<td>501 (C) 3</td>
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<tr>
<td>ABRAHAMS BLESSING</td>
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<td></td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ABRAMS HEBREW ACADEMY</td>
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<td>ABUNDANT LIFE BAPTIST CHURCH</td>
<td>43-1730709</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>ABUNDANT LIFE CHRISTIAN CENTRE INC</td>
<td>77-0013414</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>20-4467030</td>
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<td>ABUNDANT LIFE CHRISTIAN SCHOOLFOUNDATION IN</td>
<td>20-8910071</td>
<td>501 (C) 3</td>
<td>20,604.</td>
<td>FMV</td>
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<td>ABUSED ADULT RESOURCE CENTER</td>
<td>45-0363127</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1)</td>
<td>ABWE FOUNDATION INC</td>
<td>23-2913381</td>
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<tr>
<td></td>
<td>PO BOX 8585 HARRISBURG, PA 17105</td>
<td></td>
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<td>(2)</td>
<td>ACACIA FRATERNITY FOUNDATION INC</td>
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<td>(3)</td>
<td>ACADEMY ART MUSEUM INC</td>
<td>52-6051766</td>
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<td>33,500.</td>
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<td>106 SOUTH ST EASTON, MD 21601</td>
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<td>ACADEMY AT OCEAN REEF INC</td>
<td>65-0146241</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td></td>
<td>395 S HARBOR DR KEY LARGO, FL 33037</td>
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<td>(5)</td>
<td>ACADEMY CENTER OF THE ARTS INC</td>
<td>23-7061145</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td></td>
<td>600 MAIN ST LYNCHBURGH, VA 24504</td>
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<td>(6)</td>
<td>ACADEMY FOR URBAN SCHOOL LEADERSHIP</td>
<td>36-4447457</td>
<td>501 (C) 3</td>
<td>30,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td></td>
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<td>(7)</td>
<td>ACADEMY IN MANAYUNK INC</td>
<td>01-0849648</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td></td>
<td>1200 RIVER RD STE 100 CONEHUDOCHEN, PA 1942</td>
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<tr>
<td>(8)</td>
<td>ACADEMY OF AMERICAN POETS INCORPORATED</td>
<td>13-1879953</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td></td>
<td>75 MAIDEN LN RM 901 NEW YORK, NY 10038</td>
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<tr>
<td>(9)</td>
<td>ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA</td>
<td>23-1352000</td>
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<td>56,100.</td>
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<tr>
<td></td>
<td>1900 BENJAMIN FRANKLIN PKWY PHILADELPHIA, P</td>
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<td>(10)</td>
<td>ACADEMY OF OUR LADY OF NEMUR</td>
<td>23-1465491</td>
<td>501 (C) 3</td>
<td>468,033.</td>
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<td></td>
<td>560 SPROUL RD VILLANOVA, PA 19085</td>
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<td>(11)</td>
<td>ACADEMY OF OUR LADY OF MERCY INC</td>
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<td>200 HIGH ST MILFORD, CT 6460</td>
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<td>(12)</td>
<td>ACADEMY OF THE HOLY ANGELS</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td></td>
<td>6600 NICOLLET AVE MINNEAPOLIS, MN 55423</td>
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<td></td>
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<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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</table>
| ACADEMY OF THE NEW CHURCH  
PO BOX 813 BRYN ATHYN, PA 19009 | 23-1433899 | 501 (C) 3 | 130,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACADEMY OF THE SACRED HEART  
1250 KENSINGTON RD BLOOMFIELD HILLS, MI 48304 | 38-1358173 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACADEMY OF THE SACRED HEART  
619 N 2ND ST SAINT CHARLES, WI 633 | 43-0662494 | 501 (C) 3 | 22,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACADEMIA CENTER  
PO BOX 583 ROCKPORT, ME 04856 | 01-0518193 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCA INC ANNANDALE CHRISTIAN COMMUNITY FOR  
7200 COLUMBIA PIKE ANNANDALE, VA 22003 | 54-0836157 | 501 (C) 3 | 25,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESS  
3630 AVIATION WAY MEDFORD, OR 97504 | 93-0665396 | 501 (C) 3 | 19,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESS COMMUNITY HEALTH CENTERS INC  
2901 W BELTLINE HWY STE 120 MADISON, WI 537 | 39-1391134 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESS LIVING OF METROPOLITAN CHICAGO  
115 W CHICAGO AVE CHICAGO, IL 60654 | 36-3310774 | 501 (C) 3 | 15,525. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESS NOW  
463 LINCOLN PL # 241 BROOKLYN, NY 11238 | 27-057430 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESSIBLE HOPE INTERNATIONAL  
187 STATELINE RD STE 17 SOUTHAVEN, MS 386 | 27-057160 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCESSMATTERS  
1700 MARKET ST STE 1540 PHILADELPHIA, PA 19103 | 23-1878446 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| ACCION INTERNATIONAL  
10 FAWCETT ST STE 204 CAMBRIDGE, MA 2138 | 13-2535763 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

2. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) ACCREDITATION COUNCIL FOR PSYCHOANALYTIC ED</td>
<td>14-1838638</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 7545 NEW YORK, NY 10150</td>
<td>14-1838638</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ACCURACY IN MEDIA INC</td>
<td>23-7135837</td>
<td>501 (c) 3</td>
<td>550,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1717 K ST NW STE 900 WASHINGTON, DC 20006</td>
<td>23-7135837</td>
<td>501 (c) 3</td>
<td>550,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) ACES FOR ALZHEIMERS INC</td>
<td>81-2537952</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>67 FERNWOOD RD LARCHMONT, NY 10538</td>
<td>81-2537952</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ACH CHILD AND FAMILY SERVICES</td>
<td>75-0818140</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3712 WICHITA ST FORT WORTH, TX 76119</td>
<td>75-0818140</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>(5) ACHIEVE FOUNDATION OF SOUTH ORANGE AND MAPL</td>
<td>22-2822566</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 85 MAPLEWOOD, NJ 7040</td>
<td>22-2822566</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>(6) ACHIEVE HARTFORD INC</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>221 MAIN ST 3RD FL HARTFORD, CT 6106</td>
<td>45-0499390</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>(7) ACHIEVE NOW</td>
<td>38-3920150</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>1735 MARKET ST A500 PHILADELPHIA, PA 19</td>
<td>38-3920150</td>
<td>501 (c) 3</td>
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<td>(8) ACHIEVE TANOE</td>
<td>68-0024920</td>
<td>501 (c) 3</td>
<td>7,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 8339 TRUCKEE, CA 96162</td>
<td>68-0024920</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>(9) ACHIEVABILITY</td>
<td>23-2215980</td>
<td>501 (c) 3</td>
<td>21,500.</td>
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<tr>
<td>21 S 61ST ST PHILADELPHIA, PA 19139</td>
<td>23-2215980</td>
<td>501 (c) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ACHIEVERKIDS</td>
<td>77-0412221</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>3860 MIDDLEFIELD RD PALO ALTO, CA 94303</td>
<td>77-0412221</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ACHIEVEMENT CENTER FOR CHILDREN</td>
<td>34-0714766</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4255 NORTHFIELD RD CLEVELAND, OH 44128</td>
<td>34-0714766</td>
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<td>N/A</td>
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<td>(12) ACHIEVEMENT FIRST INC</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>370 JAMES ST STE 404 NEW HAVEN, CT 6513</td>
<td>59-1203744</td>
<td>501 (c) 3</td>
<td>59,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
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<tbody>
<tr>
<td>PO BOX 2063 PORTLAND, OR 97208</td>
<td>56-2459737</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 13418 TYLER, TX 75713</td>
<td>46-3504827</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>334 CENTRAL AVE LAWRENCE, NY 11559</td>
<td>27-4592919</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>315 W 39TH ST NEW YORK, NY 10018</td>
<td>13-3318293</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1100 SPRING ST NW STE 640 ATLANTA, GA 30309</td>
<td>23-7115937</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>211 CONGRESS ST BOSTON, MA 2110</td>
<td>47-3686152</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 87131 SAN DIEGO, CA 92138</td>
<td>33-0325791</td>
<td>501 (C) 3</td>
<td>24,500.</td>
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<tr>
<td>1313 W 8TH ST LOS ANGELES, CA 90017</td>
<td>85-2673361</td>
<td>501 (C) 3</td>
<td>151,007.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 8306 HOUSTON, TX 77288</td>
<td>76-0343171</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>134 S 13TH ST STE 100 LINCOLN, NE 68508</td>
<td>23-7259984</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2420 LAKE AVE ASHTABULA, OH 44004</td>
<td>34-1392784</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>55 MIDDLE ST SUITE 500 LOWELL, MA 1852</td>
<td>04-3036200</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: **10**

3. Enter total number of other organizations listed in the line 1 table: **1**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line 1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>ACRES OF DIAMONDS</td>
<td>91-1684691</td>
<td>501 (C) 3</td>
<td>21,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ACT II PLAYHOUSE LTD</td>
<td>23-2980813</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>ACTREYOND</td>
<td>27-1928559</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>ACTBLUE CHARITIES INC</td>
<td>47-3739141</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ACTERRA ACTION FOR A HEALTHY PLANET</td>
<td>23-7064937</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ACTION AGAINST HUNGER USA</td>
<td>13-3327220</td>
<td>501 (C) 3</td>
<td>102,290.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>ACTION CENTER INC</td>
<td>30-0246999</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>ACTION FOR BOSTON COMMUNITY DEVELOPMENT</td>
<td>84-2304133</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ACTION INTERNATIONAL MINISTRIES</td>
<td>51-0163499</td>
<td>501 (C) 3</td>
<td>37,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>ACTION NETWORK</td>
<td>45-0479312</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ACTION RESEARCH COLLABORATIVE</td>
<td>82-5252889</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>ACTION RESOURCES INTERNATIONAL</td>
<td>84-1296410</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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JSA 0E1288 1.000

18674H 1467 V 20-7.21
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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#### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | ACTIVATE GLOBAL INC  
2150 SHATTUCK AVE STE 300 BERKELEY, CA 94702 | 47-5502184 | 501 (C) 3 | 2,010,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | ACTIVE MINDS INC  
2001 S ST NW WASHINGTON, DC 20009 | 20-0587172 | 501 (C) 3 | 58,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | ACTIVIST SAN DIEGO  
PO BOX 5631 SAN DIEGO, CA 92165 | 33-0860813 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | ACTON INSTITUTE FOR THE STUDY OF RELIGION A  
98 FULTON ST E GRAND RAPIDS, MI 49503 | 38-2926822 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | ACTS CHURCH LAKEWAY  
1304 RANCH ROAD 620 N LAKEWAY, TX 78734 | 74-3017234 | 501 (C) 3 | 65,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | ACTS COMMUNITY DEVELOPMENT CORPORATION  
2414 W VLIET ST MILWAUKEE, WI 53205 | 39-1837474 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | ACTS LUTHERAN CHURCH LEANDER  
PO BOX 1596 LEANDER, TX 78646 | 46-3730001 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | ACTS OF WISDOM  
7327 APRIL CREEK LN HOUSTON, TX 77095 | 46-4531619 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | ACTUARIAL FOUNDATION  
475 N MARTINGALE RD STE 600 SCHAUMBURG, IL 60194 | 36-3968441 | 501 (C) 3 | 132,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | ACTUATE BOISE INC  
500 S 8TH ST BOISE, ID 83702 | 46-4479330 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | ACUMEN FUND INC  
ATTN: EMILY WILSON, BUSINESS DEVELOPMENT 40 | 13-4166228 | 501 (C) 3 | 22,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | AD FONTES EDUCATIONAL TRUST  
15452 LEE HWY CENTREVILLE, VA 20120 | 54-1780628 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) ADA BIBLE CHURCH 8899 CASCAD SE ADA, MI 49301</td>
<td>38-3086516</td>
<td>501 (c) 3</td>
<td>8,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) ADA JENKINS FAMILIES AND CAREERS DEVELOPMEN 212 GAMBLE ST DAVIDSON, NC 28036</td>
<td>56-1927067</td>
<td>501 (c) 3</td>
<td>8,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) ADAIR COMMUNITY FOR EXCELLENCE IN EDUCATION PO BOX 731 ADAIR, OK 74330</td>
<td>26-3165429</td>
<td>501 (c) 3</td>
<td>66,668</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ADAM J LEWIS ACADEMY INC 500 STATE ST BRIDGEPORT, CT 6604</td>
<td>45-3859735</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ADAMS COUNTY HISTORICAL SOCIETY PO BOX 4325 GETTYSBURG, PA 17325</td>
<td>23-7258494</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) ADAMS STREET FOUNDATION INC 283 ADAMS ST BROOKLYN, NY 11201</td>
<td>90-0394877</td>
<td>501 (c) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ADAPTIVE SPORTS CENTER OF CRESTED BUTTE INC PO BOX 1639 CRESTED BUTTE, CO 81224</td>
<td>84-1063447</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ADAS ISRAEL HERBEN CONGREGATION 2850 QUEBEC ST NW WASHINGTON, DC 20008</td>
<td>53-0196563</td>
<td>501 (c) 3</td>
<td>30,022.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) ADAT ARI EL 12020 BURBANK BLVD VALLEY VILLAGE, CA 91607</td>
<td>23-7366319</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ADAT CHAVERIM 8105 RASOR BLVD STE 282 PLANO, TX 75024</td>
<td>75-2708475</td>
<td>501 (c) 3</td>
<td>5,145.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ADAT SHALOM RECONSTRUCTIONIST 7727 PERSIMMON TREE LN BETHESDA, MD 20817</td>
<td>52-1763027</td>
<td>501 (c) 3</td>
<td>18,440.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) ADDISON GILBERT SOCIETY INC 41 MALL RD BURLINGTON, MA 1805</td>
<td>46-4371382</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>94-2222989</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2104 CHAPEL HILL RD VESTAVIA HILLS, AL 3521</td>
<td>46-5635459</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2907 W STRATHMORE AVE BALTIMORE, MD 21209</td>
<td>46-4288885</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>600 CORPORATE ROW CROMWELL, CT 6416</td>
<td>06-0664920</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SOUTH AVE LEVERMORE 201 GARDEN CITY, NY 115</td>
<td>11-1630741</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 442 NEEDHAM HEIGHTS, MA 2494</td>
<td>20-6745475</td>
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<td>FMV</td>
<td>N/A</td>
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<td>14 JESSICA CT JACKSON, NJ 8527</td>
<td>82-3371423</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>15100 N 90TH ST SCOTTSDALE, AZ 85260</td>
<td>86-1158500</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 484 WILMINGTON, NY 12997</td>
<td>82-3962735</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX D- 2 103 HAND AVENUE, #3 ELIZABETH,</td>
<td>14-1594386</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 288 LAKE PLACID, NY 12946</td>
<td>16-1535724</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 99 BLUE MOUNTAIN LAKE, NY 12812</td>
<td>13-5635801</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3 Enter total number of other organizations listed in the line 1 table...

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

Schedule I (Form 990) 2020
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ADIRONDACK LAND TRUST INC</td>
<td>22-2559576</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. ADIRONDACK MOUNTAIN CLUB INC</td>
<td>15-0586270</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. ADLER PLANETARIUM</td>
<td>36-6210902</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. ADMIRAL NIMITZ FOUNDATION</td>
<td>74-1492692</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. ADMIRALS COVE FOUNDATION INC</td>
<td>59-3786373</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. ADOLESCENT COUNSELING SERVICES</td>
<td>51-0192551</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. ADOLPH H SCHREIBER HEBREW ACADEMY OF ROCKLA</td>
<td>12-1889110</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. ADONAI PARTNERS INC</td>
<td>20-5797965</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. ADOPTABLE ANIMAL RESCUE FORCE</td>
<td>84-1180776</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. ADOPT-A-CLASSROOM INC</td>
<td>65-0828272</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. ADOPT-A-FAMILY OF THE PALM BEACHES INC</td>
<td>59-2471253</td>
<td>501 (C) 3</td>
<td>83,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. ADOPT-A-NATIVE-ELDER</td>
<td>87-0490211</td>
<td>501 (C) 3</td>
<td>30,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ADOPTION OPTION INC</td>
<td>12754 GODDARD AVE OVERLAND PARK, KS 66213</td>
<td>48-1177496</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ADOPTIONS TOGETHER INC</td>
<td>4061 POWDER MILL RD STE 320 BELTSVILLE, MD</td>
<td>52-1703994</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) ADORABLE MUTTS RESCUE</td>
<td>13547 ANDREW WAY HOUSTON, TX 77082</td>
<td>46-4761200</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) ADRIAN DOMINICAN SISTERS</td>
<td>1257 E SIENA HEIGHTS DR ADRIAN, MI 49221</td>
<td>38-1879966</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) ADULTS AND YOUTH UNITED DEVELOPMENT ASSOCIATION</td>
<td>1325 BEVERLY ANN DR SAN ELIZARIO, TX 79849</td>
<td>74-2696297</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) ADVANCE ILLINOIS NFP</td>
<td>303 E WACKER DR STE 1925 CHICAGO, IL 60601</td>
<td>26-2052733</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) ADVANCEMENT FOR RURAL KIDS INC</td>
<td>10 E 85TH ST NEW YORK, NY 10028</td>
<td>30-0559592</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ADVANCEMENT PROJECT</td>
<td>1910 W SUNSET BLVD STE 500 LOS ANGELES, CA</td>
<td>85-4835230</td>
<td>501 (C) 3</td>
<td>146,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) ADVANCING GIRLS EDUCATION IN AFRICA INC</td>
<td>921 PENNSYLVANIA AVE SE STE 308 WASHINGTON,</td>
<td>27-0143166</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ADVANCING NATIVE MISSIONS</td>
<td>PO BOX 5303 CHARLOTTESVILLE, VA 22905</td>
<td>75-2402759</td>
<td>501 (C) 3</td>
<td>14,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) ADVANCING REAL CHANGE INC</td>
<td>309 N CHARLES ST FL 3 BALTIMORE, MD 21201</td>
<td>35-2518417</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) ADVANTAGE SPORTS ACADEMY LLC</td>
<td>PO BOX 1932 KAILUA, HI 96734</td>
<td>45-4804012</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

**Part I** General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ADVENT CHRISTIAN VILLAGE INC</td>
<td>59-0751905</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 4327 LIVE OAK, FL 32064</td>
<td></td>
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<tr>
<td>(2) ADVENT EVANGELICAL LUTHERAN CHURCH</td>
<td>23-7361091</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3660 KENNY ROAD COLUMBUS, OH 43220</td>
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<tr>
<td>(3) ADVENT LUTHERAN CHURCH</td>
<td>13-1635264</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2504 BROADWAY AT 93RD ST NEW YORK, NY 10025</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) ADVENT LUTHERAN CHURCH INC</td>
<td>59-0999421</td>
<td>501 (C) 3</td>
<td>21,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>300 E YAMATO RD BOCA RATON, FL 33431</td>
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<tr>
<td>(5) ADVENT LUTHERAN CHURCH OF MELBOURNE INC</td>
<td>59-2256683</td>
<td>501 (C) 3</td>
<td>9,320.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7550 N WICKHAM RD MELBOURNE, FL 32940</td>
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<tr>
<td>(6) ADVENTHEALTH FOUNDATION SHAWNEE MISSION</td>
<td>48-0868859</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7315 E FRONTAGE RD MERRIAM, KS 66204</td>
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<tr>
<td>(7) ADVENTIST DEVELOPMENT AND RELIEF AGENCY INT</td>
<td>52-1314847</td>
<td>501 (C) 3</td>
<td>48,338.</td>
<td>FMV</td>
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<tr>
<td>12501 OLD COLUMBIA PIKE SILVER SPRING, MD 2</td>
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<tr>
<td>(8) ADVENTIST WORLD AVIATION</td>
<td>38-3242404</td>
<td>501 (C) 3</td>
<td>11,658.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3457 SWIFT CREEK RD SMITHFIELD, NC 27577</td>
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<tr>
<td>(9) ADVENTURE CYCLING ASSOCIATION</td>
<td>23-7427629</td>
<td>501 (C) 3</td>
<td>17,650.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 8308 MISSOULA, MT 59807</td>
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<tr>
<td>(10) ADVENTURERS AND SCIENTISTS FOR CONSERVATION</td>
<td>45-3345338</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 1834 BOZEMAN, MT 59771</td>
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<td>(11) ADVENTURES IN GOD'S CREATION</td>
<td>80-0946172</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>115 1ST AVENUE NORTH JACKSONVILLE BEACH, FL</td>
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<tr>
<td>(12) ADVENTURES IN MISSIONS INC</td>
<td>65-0133113</td>
<td>501 (C) 3</td>
<td>64,360.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6000 WELLSpring TRL Gainesville, GA 30506</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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<th>(g) Description of non-cash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1 ADVOCATE CHARITABLE FOUNDATION</td>
<td>36-3297360</td>
<td>501 (c) 3</td>
<td>22,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2 ADVOCATES AGAINST FAMILY VIOLENCE INC</td>
<td>14-1866709</td>
<td>501 (c) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3 ADVOCATES FOR CHILDREN OF NY INC</td>
<td>11-2247307</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 ADVOCATES FOR COMMUNITY CHOICE</td>
<td>47-5456955</td>
<td>501 (c) 3</td>
<td>2,000,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 ADVOCATES FOR THE WEST INC</td>
<td>06-1654062</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 ADVOCATES VICTIM OF DOMESTIC SEXUAL A</td>
<td>39-1374621</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 ADVOCATES INTERNATIONAL INC</td>
<td>56-1646669</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8 AEON</td>
<td>41-1558711</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 AEON AMERICA INC</td>
<td>81-3741044</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 AERIE AFRICA INC</td>
<td>27-0382888</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11 AEROSPACE CENTER FOR EXCELLENCE INC</td>
<td>59-3679477</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12 AFFECT REAL CHANGE INC</td>
<td>47-4115151</td>
<td>501 (c) 3</td>
<td>152,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................................................... [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>APF FOUNDATION FOR PHILANTHROPY</td>
<td>52-1241128</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>AFRICA CODE ACADEMY INC</td>
<td>82-2131888</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>AFRICA FOUNDATION USA</td>
<td>88-0461880</td>
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<td>N/A</td>
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<tr>
<td>AFRICA HEALTH AND HOPE INC</td>
<td>27-0842131</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>AFRICA INLAND MISSION INTERNATIONAL INCORPO</td>
<td>11-1873101</td>
<td>501 (C) 3</td>
<td>131,150.</td>
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<td>AFRICA NETWORK EVANGELISM TASK INC</td>
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<td>AFRICACARESOUT</td>
<td>81-3022255</td>
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<td>N/A</td>
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<tr>
<td>AFRICAN CHILDREN'S MISSION INC</td>
<td>63-1173214</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>AFRICAN ENTREPRENEURSHIP COLLECTIVE</td>
<td>46-0743201</td>
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<td>AFRICAN FAMILY HEALTH ORGANIZATION APAHO</td>
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<tr>
<td>AFRICAN LIBRARY PROJECT</td>
<td>65-1261685</td>
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<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**  
(Form 990)  

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   ![Yes][1]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.  

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<tr>
<td>1</td>
<td>AFRICAN PARKS FOUNDATION OF AMERICA</td>
<td>30-0241904</td>
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<tr>
<td>2</td>
<td>AFRICAN PEOPLE &amp; WILDLIFE FUND INC</td>
<td>20-3153855</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>AFRICAN WILDLIFE FOUNDATION</td>
<td>52-0781390</td>
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<td>FMV</td>
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<td>4</td>
<td>AFRO-AMERICAN CULTURAL CENTER INC</td>
<td>56-1152286</td>
<td>501 (C) 3</td>
<td>120,000.</td>
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<td>5</td>
<td>AGAPE ADOPTIONS</td>
<td>27-1947222</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>AGAPE CHIL AND FAMILY SERVICES INC</td>
<td>23-7039683</td>
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<td>FMV</td>
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<tr>
<td>7</td>
<td>AGAPE COMMUNITY CENTER INC</td>
<td>58-2372950</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>8</td>
<td>AGAPE DEVELOPMENT MINISTRIES</td>
<td>20-2095072</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>9</td>
<td>AGAPE INTERNATIONAL INC</td>
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<td>10</td>
<td>000 OPPORTUNITY DR STE 100 ROSEVILLE, CA 94-3100052</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   ![Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>AGAPE KURE BEACH MINISTRIES INC</td>
<td>56-1343563</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>AGASSIZ BALDWIN COMMUNITY A CAMBRIDGE CORPO</td>
<td>04-2862401</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>AGGIELAND PREGNANCY OUTREACH</td>
<td>74-2893803</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>AGL OVER THE RAINBOW FOUNDATION</td>
<td>83-2597955</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>5</td>
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<td>6</td>
<td>AGNES SCOTT COLLEGE</td>
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<td>AGOURA BIBLE FELLOWSHIP</td>
<td>95-3558099</td>
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<td>FMV</td>
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<td>8</td>
<td>AGRAVE HOSPICECARE FOUNDATION INCORPORATED</td>
<td>30-0001703</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>AGRARIAN LAND TRUST</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>11</td>
<td>AGRICULTURE AND LAND BASED TRAINING ASSOCIA</td>
<td>77-0566055</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**PART II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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</thead>
<tbody>
<tr>
<td>AGUA VIVA INTERNATIONAL INC</td>
<td>13921 NICKLAUS DR OVERLAND PARK, KS 66223</td>
<td>45-3845434</td>
<td>301 (C) 3</td>
<td>36,667.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>AGUDAT REFUA VCHAIM</td>
<td>1454 42ND ST BROOKLYN, NY 11219</td>
<td>11-3466034</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>AGUDATH ACHIM CONGREGATION</td>
<td>1306 17TH ST ALTOONA, PA 16601</td>
<td>23-1382404</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>AGUDATH ISRAEL OF AMERICA INC</td>
<td>42 BROADWAY FL 14 NEW YORK, NY 10004</td>
<td>13-5604164</td>
<td>501 (C) 3</td>
<td>7,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AHA ATTITUDE HARMONY ACHIEVEMENT</td>
<td>1209 DE LA VINA ST SANTA BARBARA, CA 93101</td>
<td>20-4418873</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>130 7TH AVE STE 236 NEW YORK, NY 10011</td>
<td>33-1185369</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARAVAS CHESED</td>
<td>166 HENES ST BROOKLYN, NY 11211</td>
<td>11-3460490</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
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<tr>
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<td>22-3719783</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ARAVAT YISROEL HUMANITY INC</td>
<td>5314 16TH AVE STE 244 BROOKLYN, NY 11204</td>
<td>27-2572108</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARAVATH ACHIM CONGREGATION INC.</td>
<td>600 PEACHTREE BATTLE AVENUE NW ATLANTA, GA</td>
<td>58-0632075</td>
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<td>25,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>AHC INC</td>
<td>2230 FAIRFAX DR STE 100 ARLINGTON, VA 22201</td>
<td>54-1026365</td>
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<td>11,450.</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>AHRC NEW YORK CITY FOUNDATION INC</td>
<td>83 MAIDEN LN NEW YORK, NY 10038</td>
<td>13-3779611</td>
<td>501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AID TO INMATE MOTHERS INC 660 MORGAN AVE MONTGOMERY, AL 36104</td>
<td>501 (C) 3</td>
<td>170,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>AID TO THE CHURCH IN NEED INC 725 LEONARD ST FL 3 BROOKLYN, NY 11222</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AID TO VICTIMS OF DOMESTIC ABUS INC 205 NE 5TH TER DELRAY BEACH, FL 33444</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AIDS FOUNDATION OF CHICAGO 200 W MONROE ST CHICAGO, IL 60606</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>AIDS HEALTHCARE FOUNDATION 6255 W SUNSET BLVD FL 21 LOS ANGELES, CA 90</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AIDSFREEAFRICA 125 S HIGHLAND AVE RM/STE 3-B1 OSSINING, NY</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Aiken Junior Golf Foundation 901 HOUNDSLAKE DR AIKEN, SC 29803</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Aiken Pregnancy Care Center Inc 130 E FINE LOG RD AIKEN, SC 29803</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AIM HIGH FOR HIGH SCHOOL PO BOX 410715 SAN FRANCISCO, CA 94141</td>
<td>501 (C) 3</td>
<td>755,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AIM Higher Foundation 2610 UNIVERSITY AVE W STE 525 SAINT PAUL, M</td>
<td>501 (C) 3</td>
<td>260,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>AIMS Education Foundation 1595 S CHESTNUT AVE FRESNO, CA 93702</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) AIR FORCE ACADEMY ATHLETIC CORPORATION</td>
<td>45-4331061</td>
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<td>PO BOX 89 USAF ACADEMY, CO 80840</td>
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<td>(2) AIR FORCE ACADEMY FOUNDATION</td>
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<td>(3) AIR FORCE ASSOCIATION</td>
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<tr>
<td>1501 LEE HWY STE 400 ARLINGTON, VA 22209</td>
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<td>(4) AISH CENTER INC</td>
<td>26-3698290</td>
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<td>315 W 36TH ST NEW YORK, NY 10018</td>
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<td>(5) AISH GLOBAL INC</td>
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<td>FMV</td>
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<td>915 CLIFTON AVE STE 7 CLIFTON, NJ 7013</td>
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<td>(6) AISHEL HOUSE INC</td>
<td>20-1225881</td>
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<td>FMV</td>
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<td>1955 UNIVERSITY BLVD HOUSTON, TX 77030</td>
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<td>(7) AISLING IRISH COMMUNITY CENTER INC</td>
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<td>990 MCLEAN AVE YONKERS, NY 10704</td>
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<td>(8) AKANKSHA EDUCATION FUND INC</td>
<td>13-3976569</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 2038 NEW YORK, NY 10113</td>
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<td>(9) AKMEDDOVA BALLET FOUNDATION INC</td>
<td>27-2978701</td>
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<td>FMV</td>
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<td>9511 SAINT ANDREWS WAY SILVER SPRING, MD 20</td>
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<td>(10) AKING COMMUNITY DEVELOPMENT CORPORATION</td>
<td>83-1587091</td>
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<td>FMV</td>
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<td>607 MAIN AVE CALLAWAY, MN 56521</td>
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<tr>
<td>(11) AKRON CHILDREN’S HOSPITAL FOUNDATION</td>
<td>23-7114013</td>
<td>501 (C) 3</td>
<td>22,500.</td>
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<td>1 PERKINS SQ AKRON, OH 44308</td>
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<td>(12) AKRON COMMUNITY FOUNDATION</td>
<td>34-1087616</td>
<td>501 (C) 3</td>
<td>32,000.</td>
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<tr>
<td>345 W CEDAR ST AKRON, OH 44307</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

## Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) AKRON GENERAL FOUNDATION</td>
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<td>(2) AKRON HEBREW CONGREGATION</td>
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<td>91 SPRINGSIDE DRIVE AKRON, OH 44333</td>
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<td>(3) AKRON-CANTON REGIONAL FOODBANK</td>
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<td>77,200.</td>
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<td>350 OPPORTUNITY PKWY AKRON, OH 44307</td>
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<td>(4) AKSHAYA PATRA FOUNDATION USA</td>
<td>01-0574950</td>
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<td>347,509.</td>
<td>FMV</td>
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<td>6800 OWENSMOUTH AVE STE 230 CANOGA PARK, CA</td>
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<td>(5) AKMUQI OHSKANHE YUKWAYOTE INC</td>
<td>83-4498385</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>4607 REGIMENT WAY MANLIUS, NY 13104</td>
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<td>(6) AL OTRO LADO INC</td>
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<td>501 (C) 3</td>
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<tr>
<td>4843 SLAUSON AVE MAYWOOD, CA 90270</td>
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<td>(7) ALABAMA RISE</td>
<td>63-1186365</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 1168 MONTGOMERY, AL 36101</td>
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<tr>
<td>(8) ALABAMA CHILDRENS HOSPITAL FOUNDATION</td>
<td>63-0879471</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1600 7TH AVE S BIRMINGHAM, AL 35233</td>
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<tr>
<td>(9) ALABAMA COALITION FOR IMMIGRANT JUSTICE UNI</td>
<td>47-4352872</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>1826 6TH AVE S IRONDALE, AL 35210</td>
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<td>(10) ALABAMA SYMPHONIC ASSOCIATION INC</td>
<td>63-1103036</td>
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<td>FMV</td>
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<td>3621 6TH AVE S BIRMINGHAM, AL 35222</td>
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<td>(11) ALACHUA COUNTY LIBRARY DISTRICT FOUNDATION</td>
<td>59-3014156</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>401 E UNIVERSITY AVE GAINESVILLE, FL 32601</td>
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<tr>
<td>(12) ALAIN LOCKE CHARTER SCHOOL</td>
<td>36-4182397</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>150 N MICHIGAN AVE STE 2100 CHICAGO, IL 606</td>
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</tbody>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

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**Part II**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>ALAMEDA COUNTY DEPUTY SHERIFFS ACTIVITIES L</td>
<td>16378 E 14TH ST STE 204 SAN LEANDRO, CA 945</td>
<td>83-0410537</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ALAMEDA EMERGENCY FOOD</td>
<td>PO BOX 2167 ALAMEDA, CA 94501</td>
<td>94-2878910</td>
<td>501 (C) 3</td>
<td>11,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ALAMEDA SEVENTH-DAY ADVENTIST CHURCH</td>
<td>1515 VERDI ST ALAMEDA, CA 94501</td>
<td>94-3089487</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
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<tr>
<td>ALAMO COLLEGES FOUNDATION INC</td>
<td>2222 N ALAMO ST SAN ANTONIO, TX 78215</td>
<td>74-2422589</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ALAMO HEIGHTS SCHOOL FOUNDATION</td>
<td>7101 BROADWAY SAN ANTONIO, TX 78209</td>
<td>23-7282478</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>ALAMO HEIGHTS UNITED METHODIST CHURCH</td>
<td>825 E BASSE RD SAN ANTONIO, TX 78209</td>
<td>74-2557013</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALAMO PUBLIC TELECOMMUNICATIONS COUNCIL</td>
<td>501 BROADWAY ST SAN ANTONIO, TX 78215</td>
<td>74-2461534</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
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<td>Al-Anon Family Group Headquarters Inc</td>
<td>1600 CORPORATE LANDING PKW VIRGINIA BEACH,</td>
<td>13-5636290</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ALASKA BOTANICAL GARDEN INC</td>
<td>4601 CAMPBELL AIRSTRIP RD ANCHORAGE, AK 995</td>
<td>92-0115504</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>ALASKA CHRISTIAN COLLEGE</td>
<td>35109 ROYAL PL SOLOOTNA, AK 99669</td>
<td>92-0174205</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALASKA COMMUNITY FOUNDATION</td>
<td>3201 C ST STE 110 ANCHORAGE, AK 99503</td>
<td>92-0155067</td>
<td>501 (C) 3</td>
<td>65,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ALASKA CONSERVATION FOUNDATION</td>
<td>1227 W 9TH AVE STE 300 ANCHORAGE, AK 99501</td>
<td>92-0061466</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [No]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ALASKA JEWISH CAMPUS 1117 E 35TH AVE ANCHORAGE, AK 99508 92-0139949 501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
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<td>2</td>
<td>ALASKA PACIFIC UNIVERSITY 4101 UNIVERSITY DR ANCHORAGE, AK 99508 92-0023588 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ALASKA PUBLIC TELECOMMUNICATIONS INC 3877 UNIVERSITY DR ANCHORAGE, AK 99508 23-7394629 501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ALASKA WILDERNESS LEAGUE 122 C ST NW STE 240 WASHINGTON, DC 20001 52-1814742 501 (C) 3</td>
<td>12,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ALASKA WILDLIFE ALLIANCE PO BOX 202022 ANCHORAGE, AK 99520 92-0073877 501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
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<td>6</td>
<td>ALASKA ZOO 4731 OSMALLEY RD ANCHORAGE, AK 99507 92-0039344 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>ALBANIAN ORTHODOX CHURCH OF THE ANNUNCIATION 37 WASHINGTON ST NATICK, MA 1760 23-7422911 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>8</td>
<td>ALBANY COLLEGE OF PHARMACY AND HEALTH SCIENCE 106 NEW SCOTLAND AVE ALBANY, NY 12208 14-1423161 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ALBANY GENERAL HOSPITAL FOUNDATION 1046 6TH AVE SW ALBANY, OR 97321 93-0712890 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>ALBANY MEDICAL CENTER 47 NEW SCOTLAND AVE # MC116 ALBANY, NY 1220 14-6023119 501 (C) 3</td>
<td>15,824.</td>
<td>FMV</td>
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<td>11</td>
<td>ALBANY PRO MUSICA INC 30 2ND ST TROY, NY 12180 22-2428967 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ALBENMARLE SOCIETY FOR THE PREVENTION OF CRU PO BOX 7047 CHARLOTTEVILLE, VA 22906 54-0595009 501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ALBERT &amp; MARY LASKER FOUNDATION INC</td>
<td>23-3888152</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ALBERT EINSTEIN HEALTHCARE NETWORK</td>
<td>23-1396794</td>
<td>501 (C) 3</td>
<td>50,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>ALBERT WISNER PUBLIC LIBRARY FOUNDATION INC</td>
<td>20-3272640</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>ALBION COLLEGE</td>
<td>38-1359081</td>
<td>501 (C) 3</td>
<td>59,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ALBRIGHT COLLEGE</td>
<td>23-1352615</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>ALBUQUERQUE ACADEMY HCSR</td>
<td>85-0129165</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>7</td>
<td>ALCORIC HOME INC</td>
<td>56-6060875</td>
<td>501 (C) 3</td>
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<td>8</td>
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<td>75-1175632</td>
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<td>FMV</td>
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<tr>
<td>9</td>
<td>ALDEA ADVANCING LOCAL DEVELOPMENT THROUGH E</td>
<td>13-6266540</td>
<td>501 (C) 3</td>
<td>11,200.</td>
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<td>10</td>
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<td>47-4649648</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11</td>
<td>ALDERSRO BROADDUS COLLEGE INC</td>
<td>55-0357072</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>ALDO LEIPOLD FOUNDATION INC</td>
<td>39-1423225</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

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<thead>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>(1)</td>
<td>ALLENA MUSEUM</td>
<td>92-0847922</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>ALEPH INSTITUTE</td>
<td>59-2291627</td>
<td>501 (C) 3</td>
<td>24,800</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>ALEPH SOCIETY INC</td>
<td>13-3472524</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>ALEX HOUSE PROJECT INC</td>
<td>47-5488301</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>ALEXANDRA HOUSE INC</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>(7)</td>
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<td>FMV</td>
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<td>(8)</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>(10)</td>
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<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>ALI FORNEY CENTER</td>
<td>30-0104507</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(12)</td>
<td>ALICE CURTIS DESMOND AND HAMILTON FISH LIBR</td>
<td>13-2933774</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>ALICES KIDS INC 3212 WESSYNTON WAY ALEXANDRIA, VA 22309</td>
<td>45-2390871</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ALIGHT 615 1ST AVE NE STE 500 MINNEAPOLIS, MN 5541</td>
<td>36-3241033</td>
<td>501 (c) 3</td>
<td>123,205.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALIGN LIFE MINISTRIES 131 S 8TH ST LEBANON, PA 17042</td>
<td>25-1506510</td>
<td>501 (c) 3</td>
<td>34,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALIMA USA INC 59 WINDSOR RD BROOKLINE, MA 2445</td>
<td>26-0397519</td>
<td>501 (c) 3</td>
<td>107,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ALIVE INC 2723 KING ST ALEXANDRIA, VA 22302</td>
<td>54-0914017</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ALL AMERICANS VOTE 13628 SWANSHOLLOW DR HENRICO, VA 23233</td>
<td>84-2048785</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ALL CLASSICAL PUBLIC MEDIA INC 211 SE CARUTHERS ST PORTLAND, OR 97214</td>
<td>93-1042868</td>
<td>501 (c) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALL FAITHS FOOD BANK INC 8171 BLAIKIE CT SARASOTA, FL 34240</td>
<td>65-0115814</td>
<td>501 (c) 3</td>
<td>139,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALL FIVE 5 REYNA PL MENLO PARK, CA 94025</td>
<td>45-2334963</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALL GODS CHILDREN INTERNATIONAL 1400 NE 136TH AVE STE 201 VANCOUVER, WA 98652</td>
<td>93-1052909</td>
<td>501 (c) 3</td>
<td>7,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALL HALLOWS HIGH SCHOOL 111 EAST 164TH STREET BRONX, NY 10452</td>
<td>13-1740431</td>
<td>501 (c) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALL HANDS AND HEARTS SMART RESPONSE INC 6 COUNTY RD STE 6 MATTAPOISETT, MA 2739</td>
<td>20-3414952</td>
<td>501 (c) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Method of valuation</th>
<th>(f) Description of noncash assistance</th>
<th>(g) Amount of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) ALL HANDS RAISED 2069 NE HOYT ST PORTLAND, OR 97232</td>
<td>93-1149789</td>
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<td>(2) ALL INDIA MOVEMENT AIM FOR SEVA INC PO BOX 639 SAYLORSBURG, PA 18353</td>
<td>11-3573392</td>
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<td>81-3816255</td>
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<td>(11) ALL SAINTS CATHOLIC CHURCH 620 NORTH CEDAR BLUFF ROAD KNOXVILLE, TN 37</td>
<td>62-1567335</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>2</td>
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<td>5</td>
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<td>8</td>
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<td>36-3062406</td>
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<td>10</td>
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<td>11</td>
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<td>12</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
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3. Enter total number of other organizations listed in the line 1 table ...............................................

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

Name of the organization

Employer identification number

VANGUARD CHARITABLE ENDOWMENT PROGRAM

23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>PO BOX 174 CHARLOTTESSVILLE, VA 22902</td>
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<td>(8) ALL WE ARE INC</td>
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<tr>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
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<tr>
<td>(2) ALLEN-STEVENSON SCHOOL 132 E 78TH ST NEW YORK, NY 10075</td>
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<td>9,000.</td>
<td>FMV</td>
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<td>(3) ALLENTOWN ART MUSEUM 31 N 5TH ST ALLENTOWN, PA 18101</td>
<td>23-1548101</td>
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<td>(5) ALLENTOWN SYMPHONY ASSOCIATION INC 23 N 6TH ST ALLENTOWN, PA 18101</td>
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<td>FMV</td>
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<tr>
<td>(6) ALLEY CAT ALLIES INCORPORATED 7920 NORFOLK AVE STE 600 BETHELA, MD 20814</td>
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<td>501 (C) 3</td>
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<td>(8) ALLIANCE CHURCH OF FOX ISLAND WASHINGTON PO BOX 23 FOX ISLAND, WA 98333</td>
<td>91-1286554</td>
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<td>FMV</td>
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<td>(9) ALLIANCE DEFENDING FREEDOM 15100 N 90TH ST SCOTTSDALE, AZ 85260</td>
<td>54-1660459</td>
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<td>316,930.</td>
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<td>20-4241178</td>
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<td>(11) ALLIANCE FOR A JUST SOCIETY 3518 S EDMUNDS ST SEATTLE, WA 98118</td>
<td>91-1635554</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
[Attach to Form 990.]

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) ALLIANCE FOR CHOICE IN EDUCATION</td>
<td>1201 E COLAX AVE DENVER, CO 80218</td>
<td>84-1531066</td>
<td>501 (C) 3</td>
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<td>(2) ALLIANCE FOR CLIMATE EDUCATION INC</td>
<td>4696 BROADWAY ST BOULDER, CO 80304</td>
<td>26-3106566</td>
<td>501 (C) 3</td>
<td>54,500.</td>
<td>FMV</td>
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<td>(3) ALLIANCE FOR COLLEGE - READY PUBLIC SCHOOLS</td>
<td>601 S FIGUEROA ST FL 4 LOS ANGELES, CA 9001</td>
<td>95-4779029</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>(4) ALLIANCE FOR DECISION EDUCATION INC</td>
<td>1 BELMONT AVE STE 610 BALA CYNWYD, PA 19004</td>
<td>46-4064705</td>
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<td>(5) ALLIANCE FOR EDUCATION</td>
<td>509 OLIVE WAY STE 500 SEATTLE, WA 98101</td>
<td>91-1508191</td>
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<td>9,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) ALLIANCE FOR GIRLS</td>
<td>510 16TH ST STE 100 OAKLAND, CA 94612</td>
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<td>225 E 26TH ST STE 1 TUCSON, AZ 85713</td>
<td>52-2094677</td>
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<td>(8) ALLIANCE FOR GUN RESPONSIBILITY FOUNDATION</td>
<td>PO BOX 4187 SEATTLE, WA 98194</td>
<td>46-4601368</td>
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<td>(9) ALLIANCE FOR JUSTICE</td>
<td>11 DUPONT CIR NW WASHINGTON, DC 20036</td>
<td>52-1008973</td>
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<td>161 N CLARK ST STE 4300 CHICAGO, IL 60601</td>
<td>46-4366317</td>
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<td>(11) ALLIANCE FOR SCHOOL CHOICE INC</td>
<td>1020 19TH ST NW STE 675 WASHINGTON, DC 2003</td>
<td>52-2111508</td>
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<td>(12) ALLIANCE FOR SMILES INTERNATIONAL INC</td>
<td>2565 3RD ST STE 237 SAN FRANCISCO, CA 94107</td>
<td>80-0119414</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>ALLIANCE FOR STRONG FAMILIES AND COMMUNITY</td>
<td>648 N PLANKINTON AVE STE 425 MILWAUKEE, WI 53203</td>
<td>39-1709925</td>
<td>501 (C) 3</td>
<td>853,000.</td>
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<td>2</td>
<td>ALLIANCE FOR THE GREAT LAKES</td>
<td>150 N MICHIGAN AVE CHICAGO, IL 60601</td>
<td>23-7104524</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>3</td>
<td>ALLIANCE FOR THE SHENANDOAH VALLEY</td>
<td>PO BOX 674 NEW MARKET, VA 22844</td>
<td>41-2233874</td>
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<td>80,500.</td>
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<td>4</td>
<td>ALLIANCE FOR YOUTH ORGANIZING</td>
<td>915 5TH ST NW WASHINGTON, DC 20001</td>
<td>46-2465621</td>
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<td>5</td>
<td>ALLIANCE MEDICAL MINISTRY INC</td>
<td>101 DONALD ROSS DR RALEIGH, NC 27610</td>
<td>56-2168673</td>
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<td>26,000.</td>
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<td>6</td>
<td>ALLIANCE MINISTRIES</td>
<td>PO BOX 59162 BIRMINGHAM, AL 35259</td>
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<td>ALLIANCE OF CONFESSIONING EVANGELICALS INC</td>
<td>600C EDEN RD LANCASTER, PA 17601</td>
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<td>ALLIANCE OF RESIDENT THEATRES NEW YORK INC</td>
<td>520 8TH AVE RM 319 NEW YORK, NY 10018</td>
<td>13-2768583</td>
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<td>ALLIANCE TO PROTECT NANTUCKET SOUND INC</td>
<td>4 BARNSTABLE RD HYANNIS, MA 2601</td>
<td>10-0008105</td>
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<td>ALLIED MEDIA PROJECTS INC</td>
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<td>11</td>
<td>ALL-IN MILWAUKEE INC</td>
<td>135 N WELLS ST STE 100 MILWAUKEE, WI 53203</td>
<td>83-2541054</td>
<td>501 (C) 3</td>
<td>6,250.</td>
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<td>12</td>
<td>ALLINA ASSOCIATED FOUNDATION</td>
<td>PO BOX 43 MINNEAPOLIS, MN 55440</td>
<td>27-4116873</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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Enter total number of other organizations listed in the line 1 table:  

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   □ Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>FMV</td>
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<td>9800 KEDVALE AVE SCHORIE, IL 60076</td>
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<td>ALOHA UNITED WAY INC</td>
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<td>ALPHA OMEGA INSTITUTE INC</td>
<td>74-2357394</td>
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<td>7,000</td>
<td>FMV</td>
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<tr>
<td>PO BOX 433 GRAND JCT, CO 81502</td>
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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>ALPHA USA</td>
<td>13-3962840</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALPHA1 FOUNDATION INC</td>
<td>65-0585415</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ALPHA2 PROJECT LTD</td>
<td>27-2248757</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALPHA CHAPEL</td>
<td>36-3205724</td>
<td>501 (c) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ALPINE THEATRE PROJECT INC</td>
<td>77-0626385</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALPINE THEATRE PROJECT INC</td>
<td>54-0616345</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ALS HOPE FOUNDATION</td>
<td>23-3010389</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................................................  ☑ Yes ☐ No</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>ALS THERAPY DEVELOPMENT FOUNDATION INC</td>
<td>34-362719</td>
</tr>
<tr>
<td>ALTA VISTA SCHOOL INC</td>
<td>27-2889011</td>
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<tr>
<td>ALTIMON TOURS</td>
<td>63-0302110</td>
</tr>
<tr>
<td>ALTERNATIVES TO HUNGER</td>
<td>91-0918619</td>
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<td>ALUMNI AND FRIENDS OF LYNN CLASSICAL HIGH S</td>
<td>33-362719</td>
</tr>
<tr>
<td>ALUMNI ASSOCIATION OF NAZARETH COLLEGE OF R</td>
<td>501 (C) 3</td>
</tr>
<tr>
<td>ALUMNI ASSOCIATION OF NAZARETH COLLEGE OF R</td>
<td>33-362719</td>
</tr>
<tr>
<td>ALUMNI FUND ASSOCIATION OF YALE UNIVERSITY</td>
<td>33-362719</td>
</tr>
<tr>
<td>ALUMNI OF THE RABBINICAL COLLEGE KNESSER I</td>
<td>501 (C) 3</td>
</tr>
<tr>
<td>ALVERNA UNIVERSITY</td>
<td>33-362719</td>
</tr>
<tr>
<td>ALVERNO COLLEGE</td>
<td>33-362719</td>
</tr>
<tr>
<td>ALVIN AILEY DANCE FOUNDATION INC</td>
<td>33-362719</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - X Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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</tr>
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<tbody>
<tr>
<td>ALZHEIMERS COMMUNITY CARE INC</td>
<td>31-1481653</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>ALZHEIMERS DISEASE AND RELATED DISORDERS AS</td>
<td>13-3039601</td>
<td>501 (C) 3</td>
<td>1,454,778.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>ALZHEIMERS DISEASE AND RELATED DISORDERS NE</td>
<td>13-3277408</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS DISEASE RESEARCH FOUNDATION</td>
<td>52-2396428</td>
<td>501 (C) 3</td>
<td>327,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS DRUG DISCOVERY FOUNDATION</td>
<td>20-1082179</td>
<td>501 (C) 3</td>
<td>576,645.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS FOUNDATION OF AMERICA INC</td>
<td>91-1792864</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS GREATER LOS ANGELES</td>
<td>95-3718119</td>
<td>501 (C) 3</td>
<td>10,890.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS ORANGE COUNTY</td>
<td>85-3702013</td>
<td>501 (C) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>ALZHEIMERS SAN DIEGO</td>
<td>47-5534541</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>AM KOLEL INC</td>
<td>52-1732440</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>AM SHALOM</td>
<td>23-7201901</td>
<td>501 (C) 3</td>
<td>51,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>AMALGAMATED CHARITABLE FOUNDATION INC</td>
<td>82-1517696</td>
<td>501 (C) 3</td>
<td>681,707.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>AMANI CHILDREN'S FOUNDATION 525 HEDGEWOOD PL WINSTON SALEM, NC 27104</td>
<td>56-2434324</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMANI GLOBAL WORKS 245 FORT WASHINGTON AVE APT 4A NEW YORK, NY</td>
<td>30-0603935</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>AMANI MEDICAL FOUNDATION INC 2858 E 89TH ST TULSA, OK 74137</td>
<td>26-0472447</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>AMARA 5907 MARTIN LUTHER KING JR WAY S SEATTLE, WA</td>
<td>91-0577487</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMARILLO AREA FOUNDATION INC 801 S FILLMORE ST STE 700 AMARILLO, TX 7910</td>
<td>75-0978220</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMAZEMENT SQUARE 27 9TH ST LYNCHBURG, VA 24504</td>
<td>54-1713204</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMAZIMA MINISTRIES INTERNATIONAL EDUCATION 1749 MALLORY LN STE 101 BRENTWOOD, TN 37027</td>
<td>61-1555718</td>
<td>501 (C) 3</td>
<td>54,994</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMAZING FACTS INTERNATIONAL 6615 SIERRA COLLEGE BLVD GRANITE BAY, CA 95</td>
<td>82-2966470</td>
<td>501 (C) 3</td>
<td>35,994</td>
<td>FMV</td>
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<tr>
<td>AMAZON CONSERVATION ASSOCIATION 1012 14TH NW STE 625 WASHINGTON, DC 2000</td>
<td>52-2211305</td>
<td>501 (C) 3</td>
<td>40,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMAZON MEDICAL PROJECT INC PO BOX 194 MAZOMANIE, WI 53560</td>
<td>39-1863128</td>
<td>501 (C) 3</td>
<td>14,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>AMAZON WATCH 520 3RD ST STE 108 OAKLAND, CA 94607</td>
<td>95-4604782</td>
<td>501 (C) 3</td>
<td>1,356,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMBASSADORS FOR CHRIST INTERNATIONAL LTD 4572 LAWRENCEVILLE HWY NW STE 101 LILBURN,</td>
<td>58-2655669</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
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**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [x]
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
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<tbody>
<tr>
<td>1</td>
<td>AMEGO INC</td>
<td>33 PERRY AVE ATTLEBORO, MA 2703</td>
<td>23-7131690</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>AMERICA GIVES INC</td>
<td>1732 1ST AVE # 27091 NEW YORK, NY 10128</td>
<td>26-3383926</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>AMERICA PRESS INC</td>
<td>1212 AVENUE OF THE AMERICAS FL 11 NEW YORK,</td>
<td>13-1623828</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>AMERICA SCORES NEW ENGLAND</td>
<td>29 GERMANIA ST JAMAICA PLAIN, MA 2130</td>
<td>04-3482756</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>AMERICA SHARE U.S.A INC</td>
<td>CO TAICOA CORP 15 WEST 26TH ST NEW YORK, NY</td>
<td>13-3599586</td>
<td>501 (C) 3</td>
<td>5,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>AMERICA-ISRAEL FRIENDSHIP LEAGUE INC</td>
<td>6TH FLOOR NEW YORK, NY 10036</td>
<td>23-7252135</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>AMERICAN ACADEMY OF ARTS AND SCIENCES</td>
<td>136 IRVING ST CAMBRIDGE, MA 2138</td>
<td>04-2103651</td>
<td>501 (C) 3</td>
<td>40,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>AMERICAN AGORA FOUNDATION INC</td>
<td>116 E 16TH ST NEW YORK, NY 10003</td>
<td>20-4000236</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>AMERICAN ASSOCIATES BEN-GURION UNIVERSITY O</td>
<td>1001 AVENUE OF THE AMERICANS FL 19 NEW YORK,</td>
<td>23-7270753</td>
<td>501 (C) 3</td>
<td>73,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>AMERICAN ASSOCIATES OF THE NATIONAL THEATRE</td>
<td>247 W 30TH ST NEW YORK, NY 10001</td>
<td>13-4140412</td>
<td>501 (C) 3</td>
<td>74,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>AMERICAN ASSOCIATION FOR CANCER RESEARCH</td>
<td>615 CHESTNUT ST FL 17 PHILADELPHIA, PA 1910</td>
<td>23-6251648</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF</td>
<td>1200 NEW YORK AVE NW # NW100 WASHINGTON, DC</td>
<td>53-0196568</td>
<td>501 (C) 3</td>
<td>88,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I
**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<tbody>
<tr>
<td>1</td>
<td>AMERICAN ASSOCIATION OF PEOPLE WITH DISABIL</td>
<td>52-1930174</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>AMERICAN ASSOCIATION OF PHYSICIANS OF INDIA</td>
<td>38-2532505</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>AMERICAN BAPTIST FOREIGN MISSION SOCIETY</td>
<td>13-5563392</td>
<td>501 (C) 3</td>
<td>7,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>AMERICAN BATTLEFIELD TRUST</td>
<td>54-1426643</td>
<td>501 (C) 3</td>
<td>285,268.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>AMERICAN BIBLE SOCIETY</td>
<td>13-1623885</td>
<td>501 (C) 3</td>
<td>731,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>AMERICAN BIRD CONSERVANCY</td>
<td>52-1501259</td>
<td>501 (C) 3</td>
<td>195,470.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>AMERICAN BIRDING ASSOCIATION INC</td>
<td>74-2347314</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>AMERICAN BRAIN SOCIETY</td>
<td>82-4935768</td>
<td>501 (C) 3</td>
<td>422,175.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>AMERICAN BRAIN TUMOR ASSOCIATION</td>
<td>23-7286648</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>AMERICAN CAMPING ASSOCIATION INC</td>
<td>35-0962419</td>
<td>501 (C) 3</td>
<td>21,948.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>AMERICAN CANCER SOCIETY INC</td>
<td>13-1788491</td>
<td>501 (C) 3</td>
<td>637,505.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12</td>
<td>AMERICAN CENTER FOR LAW AND JUSTICE INC</td>
<td>56-1586817</td>
<td>501 (C) 3</td>
<td>55,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a)</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>AMERICAN CHEMICAL SOCIETY 1155 16TH ST NW WASHINGTON, DC 20036</td>
<td>53-0196572</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>AMERICAN CIVIL LIBERTIES FOUNDATION OF OREG 506 SW 6TH AVE STE 700 PORTLAND, OR 97204</td>
<td>23-7048829</td>
<td>501 (C) 3</td>
<td>17,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>AMERICAN CIVIL LIBERTIES FOUNDATION OF PENN 1800 JOHN F KENNEDY BLVD STE 600 PHILADELPH</td>
<td>23-1742013</td>
<td>501 (C) 3</td>
<td>60,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION I 125 BROAD ST NEW YORK, NY 10004</td>
<td>13-6213516</td>
<td>501 (C) 3</td>
<td>2,087,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 303 E 17TH AVE STE 350 DENVER, CO 80203</td>
<td>23-7028224</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 4343 W FLAGLER ST STE 400 CORAL GABLES, FL</td>
<td>23-7137529</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 505 5TH AVE STE 808 DES MOINES, IA 50309</td>
<td>42-1002093</td>
<td>501 (C) 3</td>
<td>7,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 6701 W 64TH ST STE 210 MISSION, KS 66202</td>
<td>43-0926406</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 211 CONGRESS ST BOSTON, MA 2110</td>
<td>23-7312949</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O 39 DRUMM ST SAN FRANCISCO, CA 94110</td>
<td>94-0279770</td>
<td>501 (C) 3</td>
<td>133,704.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FOUNDATION O PO BOX 120160 NASHVILLE, TN 37212</td>
<td>62-0988329</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>AMERICAN CIVIL LIBERTIES UNION FUND OF MICH 2966 WOODWARD AVE DETROIT, MI 48201</td>
<td>23-7243421</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

✈️ Attach to Form 990.

✈️ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF HAWAII PO BOX 3410 HONOLULU, HI 96801 99-0192064 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY 325 W MAIN ST STE 2210 LOUISVILLE, KY 40202 61-6058569 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA PO BOX 14720 MINNEAPOLIS, MN 55414 41-605012 501 (C) 3 42,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF NEW JERSE  PO BOX 32159 NEWARK, NJ 7102 22-2010593 501 (C) 3 34,540. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF OHIO FOUN 4506 CHESTER AVE CLEVELAND, OH 44103 23-7137105 501 (C) 3 32,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>AMERICAN CIVIL LIBERTIES UNION OF WASHINGTON  PO BOX 2728 SEATTLE, WA 98111 23-7076867 501 (C) 3 51,041. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>AMERICAN COLLEGE 630 ALENDALE RD STE 400 KNG OF PRUSSA, PA 23-1352008 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>AMERICAN COLLEGE OF CARDIOLOGY FOUNDATION 2400 N ST NW WASHINGTON, DC 20037 13-5641985 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>AMERICAN COLLEGE OF MORES SURGERY INC 555 E WELLS ST STE 1100 MILWAUKEE, WI 53202 36-2902642 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>AMERICAN COMMITTEE FOR SHAARE ZEDEK 55 WEST 39TH ST 4TH FL NEW YORK, NY 10018 13-5645878 501 (C) 3 13,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>AMERICAN COMMITTEE FOR THE EDUCATION AND WE 232 MADISON AVE RM 608 NEW YORK, NY 10016 11-3564377 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTU 633 THIRD AVENUE 20TH FL NEW YORK, NY 10017 13-1623886 501 (C) 3 983,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - [ ] Yes
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>AMERICAN COMPASS INC 300 INDEPENDENCE AVE SE WASHINGTON, DC 2000</td>
<td>84-4031579</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>AMERICAN COMPOSERS ORCHESTRA INC 494 8TH AVE STE 503 NEW YORK, NY 10001</td>
<td>13-2838450</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>AMERICAN CONGRESS FOR TRUTH INC 1300 PENNSYLVANIA AVE NW STE 190 WASHINGTON</td>
<td>02-071284</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN CONSERVATIVE UNION FOUNDATION 1199 N FAIRFAX ST STE 500 ALEXANDRIA, VA 22</td>
<td>52-1294680</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN CONSERVATORY THEATRE FOUNDATION 415 GEARY ST SAN FRANCISCO, CA 94102</td>
<td>94-6135772</td>
<td>501 (C) 3</td>
<td>4,216,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN CONSTITUTION SOCIETY FOR LAW AND P</td>
<td>1899 L ST NW STE 200 WASHINGTON, DC 20036</td>
<td>52-2313694</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN CORPORATE PARTNERS 140 E 45TH ST FL 19 NEW YORK, NY 10017</td>
<td>61-1556042</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN COUNCIL OF LEARNED SOCIETIES 633 3RD AVE 8TH FLOOR NEW YORK, NY 10017</td>
<td>13-1851145</td>
<td>501 (C) 3</td>
<td>109,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN COUNCIL OF TRUSTEES AND ALUMNI 1730 M ST NW STE 600 WASHINGTON, DC 20036</td>
<td>52-1870003</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN COUNCIL ON SCIENCE AND HEALTH 135 MADISON AVE FL 06114 NEW YORK, NY 10016</td>
<td>13-2911127</td>
<td>501 (C) 3</td>
<td>82,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN DIABETES ASSOCIATION PO BOX 7023 MERRIFIELD, VA 22116</td>
<td>54-1734511</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN DIABETES ASSOCIATION INC 2451 CRYSTAL DR STE 900 ARLINGTON, VA 22202</td>
<td>13-1623888</td>
<td>501 (C) 3</td>
<td>190,214.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | AMERICAN ENDOWMENT FOUNDATION  
5700 DARROW RD STE 118 HUDSON, OH 44236 | 34-1747398 | 501 (C) 3 | 2,612,457 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC PO  
1789 MASSACHUSETTS AVE NW WASHINGTON, DC 20 | 53-0218495 | 501 (C) 3 | 379,800 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | AMERICAN EPILEPSY SOCIETY  
135 S LA SALLE ST STE 2850 CHICAGO, IL 6060 | 04-6112600 | 501 (C) 3 | 20,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | AMERICAN EXCHANGE PROJECT INC  
38 BALCOM RD SUDbury, MA 1776 | 84-2485684 | 501 (C) 3 | 32,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | AMERICAN EXPERIMENT FOUNDATION  
8421 WAYZATA BLVD STE 110 MINNEAPOLIS, MN 5 | 83-3831129 | 501 (C) 3 | 11,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | AMERICAN FAMILY ASSOCIATION INC  
PO DWR 2440 TUFELo, MS 38803 | 64-0607275 | 501 (C) 3 | 21,850 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | AMERICAN FARMLAND TRUST  
1150 CONNECTICUT AVE NW STE 600 WASHINGTON,  
DC 20 | 52-1190211 | 501 (C) 3 | 11,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | AMERICAN FEDERATION OF ARTS INC  
305 E 47TH ST FL 10 NEW YORK, NY 10017 | 13-1669334 | 501 (C) 3 | 20,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | AMERICAN FOLK ART MUSEUM  
4729 12ND PL LONG IS CITY, NY 11101 | 13-1985627 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | AMERICAN FUNDOUK MAINTENANCE COMMITTEE INC  
350 S HUNTINGTON AVE JAMAICA PLAIN, MA 2130 | 04-6043108 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | AMERICAN FORESTS  
1220 L ST NW STE 750 WASHINGTON, DC 20005 | 53-0196544 | 501 (C) 3 | 11,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | AMERICAN FOUNDATION FOR CHILDREN WITH AIDS  
1520 GREENING LN HARRISBURG, PA 17110 | 30-0247823 | 501 (C) 3 | 9,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..............................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
SCHEDULE I
(2020)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 AMERICAN FOUNDATION FOR FIREAM INJURY REDUC</td>
<td>82-3454784</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2 AMERICAN FOUNDATION FOR SUICIDE PREVENTION</td>
<td>13-3393329</td>
<td>501 (C) 3</td>
<td>85,855.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3 AMERICAN FREEDOM DEFENSE INITIATIVE</td>
<td>27-2518993</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4 AMERICAN FRIENDS FOR THE PRESERVATION OF CZ</td>
<td>04-3201394</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5 AMERICAN FRIENDS OF ALYN HOSPITAL INC</td>
<td>122 E 42ND ST RM 1519 NEW YORK, NY 10168</td>
<td>501 (C) 3</td>
<td>18,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6 AMERICAN FRIENDS OF BEIT OROT INC</td>
<td>27 MAPLE AVE CEDARHURST, NY 11516</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7 AMERICAN FRIENDS OF BET EL YESHIVA CENTER</td>
<td>6827 JUNO ST FOREST HILLS, NY 11375</td>
<td>501 (C) 3</td>
<td>258,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8 AMERICAN FRIENDS OF BET HATEFUTSOT</td>
<td>633 3RD AVE FL 21 NEW YORK, NY 10017</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9 AMERICAN FRIENDS OF BIALA INSTITUTIONS OF B</td>
<td>1436 S MOOSTER ST LOS ANGELES, CA 90035</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10 AMERICAN FRIENDS OF BIRDLIFE INTERNATIONAL</td>
<td>155 E 44TH ST STE 34 NEW YORK, NY 10017</td>
<td>501 (C) 3</td>
<td>751,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11 AMERICAN FRIENDS OF CANADIAN CONSERVATION</td>
<td>336 36TH ST # 717 BELLINGHAM, WA 98225</td>
<td>501 (C) 3</td>
<td>14,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12 AMERICAN FRIENDS OF COMBATANTS FOR PEACE IN</td>
<td>545 TERESITA BLVD SAN FRANCISCO, CA 94127</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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<tr>
<td>(1) AMERICAN FRIENDS OF EZRAT AVOT</td>
</tr>
<tr>
<td>(2) AMERICAN FRIENDS OF HERE NEXT YEAR INC</td>
</tr>
<tr>
<td>(3) AMERICAN FRIENDS OF INTERNATIONAL CHINA CON</td>
</tr>
<tr>
<td>(4) AMERICAN FRIENDS OF ISRAELI NAVY SEALS INC</td>
</tr>
<tr>
<td>(5) AMERICAN FRIENDS OF JAMAICA INC</td>
</tr>
<tr>
<td>(6) AMERICAN FRIENDS OF JORDAN RIVER VILLAGE PO</td>
</tr>
<tr>
<td>(7) AMERICAN FRIENDS OF KOHELET POLICY FORUM</td>
</tr>
<tr>
<td>(8) AMERICAN FRIENDS OF KOLLEL ZICHRON SHIMON I</td>
</tr>
<tr>
<td>(9) AMERICAN FRIENDS OF LATNET HUMANITARIAN AID</td>
</tr>
<tr>
<td>(10) AMERICAN FRIENDS OF LE KORSA INC</td>
</tr>
<tr>
<td>(11) AMERICAN FRIENDS OF LEKET ISRAEL INC</td>
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### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>(1) AMERICAN FRIENDS OF LIBI INC</td>
<td>45 BARTLETT CRES BROOKLINE, MA 2446</td>
<td>32-0081620 501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) AMERICAN FRIENDS OF LIVNOT ULEHIBA</td>
<td>1026 CORNWALL B BOCA RATON, FL 33434</td>
<td>13-3500786 501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) AMERICAN FRIENDS OF LUBAVITCH</td>
<td>2110 LEROY PL NW WASHINGTON, DC 20008</td>
<td>52-2193738 501 (C) 3</td>
<td>13,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) AMERICAN FRIENDS OF MAGEN DAVID ADOM</td>
<td>20 W 36TH ST STE 1100 NEW YORK, NY 10018</td>
<td>13-1790719 501 (C) 3</td>
<td>322,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) AMERICAN FRIENDS OF MAGGIES CENTRE INC</td>
<td>10375 WILSHIRE BLVD # 9AC LOS ANGELES, CA 9</td>
<td>04-3596357 501 (C) 3</td>
<td>136,139.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) AMERICAN FRIENDS OF MARU A FULA SCHOOL INC</td>
<td>4108 50TH AVE S SEATTLE, WA 98118</td>
<td>23-7449724 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) AMERICAN FRIENDS OF MATAN INC</td>
<td>FOMONA FOMONA, NY 10970</td>
<td>13-3639482 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) AMERICAN FRIENDS OF MESHI INC</td>
<td>7711 SAN MATEO DR E BOCA RATON, FL 33433</td>
<td>52-2292448 501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) AMERICAN FRIENDS OF MOSDOG NACHLAS SHIMON I</td>
<td>6132 N DRAKE AVE CHICAGO, IL 60659</td>
<td>13-4096453 501 (C) 3</td>
<td>11,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) AMERICAN FRIENDS OF NEVE SHALOM-WAHAT AL-SA</td>
<td>229 N CENTRAL AVE FL 4 GLENDALE, CA 91203</td>
<td>13-3441742 501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) AMERICAN FRIENDS OF NEW COLLEGE LTD</td>
<td>7 GREAT VALLEY PKWY STE 190 MALVERN, PA 193</td>
<td>13-2953688 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) AMERICAN FRIENDS OF NISHMAS YISROEL INC</td>
<td>C/O FRED E NUSSBAUM 1324 AVE J BROOKLYN, NY</td>
<td>13-3221646 501 (C) 3</td>
<td>9,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<td>EIN</td>
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<tr>
<td>1(c)</td>
<td>IRC section (if applicable)</td>
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<td>1(d)</td>
<td>Amount of cash grant</td>
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<td>1(f)</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
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<td>1(g)</td>
<td>Description of noncash assistance</td>
</tr>
<tr>
<td>1(h)</td>
<td>Purpose of grant or assistance</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>(1)</td>
<td>AMERICAN FRIENDS OF NISHMAT 520 8TH AVE FL 4 NEW YORK, NY 10018 04-3106173 501 (C) 3 150,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2)</td>
<td>AMERICAN FRIENDS OF ORR SHALOM INC 3706 ENTERPRISE DR JANESVILLE, WI 53546 13-3502817 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3)</td>
<td>AMERICAN FRIENDS OF PANIM EL PANIM INC 492 CEDAR LN UNIT 344 TEANECK, NJ 7666 27-2675230 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4)</td>
<td>AMERICAN FRIENDS OF POLIN MUSEUM OF THE HEB 15 E 65TH ST FL 4 NEW YORK, NY 10065 14-1937011 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5)</td>
<td>AMERICAN FRIENDS OF PROSPECT BURMA PO BOX 257 ACCORD, NY 12404 26-1923993 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6)</td>
<td>AMERICAN FRIENDS OF RABIN MEDICAL CENTER IN MEDICAL CENTER INC 636 BROADWAY SUI NEW YORK 52-1903777 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7)</td>
<td>AMERICAN FRIENDS OF RAMAT BET SHEMESH INC 285 DEWEY AVE LAKEWOOD, NJ 8701 47-1255430 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8)</td>
<td>AMERICAN FRIENDS OF REUTH MEDICAL &amp; LIFE C 600 COLUMBUS AVE NEW YORK, NY 10024 13-1940424 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9)</td>
<td>AMERICAN FRIENDS OF SHALVA ISRAEL INC 315 5TH AVE FL 6 NEW YORK, NY 10016 56-2676533 501 (C) 3 30,600. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10)</td>
<td>AMERICAN FRIENDS OF SHAVEI YISRAEL INC 1 ROCKEFELLER PLZ RM 1430 NEW YORK, NY 1002 20-1919394 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11)</td>
<td>AMERICAN FRIENDS OF SHEHEBAR SEPARDIC CENT 34 W 33RD ST NEW YORK, NY 10001 11-2642556 501 (C) 3 7,200. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12)</td>
<td>AMERICAN FRIENDS OF SHVUT AMI 669 E 7TH ST BROOKLYN, NY 11218 13-3249452 501 (C) 3 27,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1. (a) Name and address of organization or government

   (1) AMERICAN FRIENDS OF SULAM INC
   241 VIOLA RD MONSEY, NY 10952
   13-4133458 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM

   (2) AMERICAN FRIENDS OF THE BUGATTI TR INC
   4 STONEWOOD PL UNIT 201 DEDHAM, MA 02026
   14-1915432 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM

   (3) AMERICAN FRIENDS OF THE CENTRE POMPIDOU INC
   31 W 34TH ST STE 7010 NEW YORK, NY 10001
   13-2941675 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM

   (4) AMERICAN FRIENDS OF THE CTNRL COMM FOR TAHA
   4403 15TH AVE STE 445 BROOKLYN, NY 11219
   13-3244347 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM

   (5) AMERICAN FRIENDS OF THE EPISCOPAL DIOCESE O
   25 OLD KINGS HWY N STE 13 DARIEN, CT 6820
   59-6155008 501 (C) 3 38,000. FMV N/A FOR RECIPIENT'S EXEM

   (6) AMERICAN FRIENDS OF THE HEBREW UNIVERSITY I
   199 WATER ST FL NEW YORK, NY 10038
   13-1568923 501 (C) 3 541,500. FMV N/A FOR RECIPIENT'S EXEM

   (7) AMERICAN FRIENDS OF THE ISRAEL FREE LOAN AS
   2330 MILTON R. UNIVERSITY HEIGHTS, OH 44118
   13-3691494 501 (C) 3 117,500. FMV N/A FOR RECIPIENT'S EXEM

   (8) AMERICAN FRIENDS OF THE ISRAEL PHILHAMONIC
   122 E 42ND ST RM 4507 NEW YORK, NY 10168
   23-7183563 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM

   (9) AMERICAN FRIENDS OF THE LOUVRE INC
   12 E 49TH ST FL 11 NEW YORK, NY 10017
   52-2376786 501 (C) 3 22,125. FMV N/A FOR RECIPIENT'S EXEM

   (10) AMERICAN FRIENDS OF THE PARENTS CIRCLE FAMI
   1425 RXR PLZ UNIONDALE, NY 11556
   95-4869142 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM

   (11) AMERICAN FRIENDS OF THE SPAFFORD CHILDRENS
   5500 PRTYANIA ST # 337 NEW ORLEANS, LA 7011
   27-1974827 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM

   (12) AMERICAN FRIENDS OF THE TEL AVIV UNIVERSITY
   8 W 40TH ST FL 8 NEW YORK, NY 10018
   13-1996126 501 (C) 3 142,676. FMV N/A FOR RECIPIENT'S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ........................................... .................................

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23-2888152

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### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - **Yes**
   - **No**

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>AMERICAN FRIENDS OF TORAT MOSHE ZICHRON KED CO SEGAL 9 SPRINGBROOK DR JACKSON, NJ 8527 81-3666959 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN FRIENDS OF YESHIVA DMIR INC 5227 NEW UTRECHT AVE BROOKLYN, NY 11219 13-2946608 501 (C) 3 15,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FRIENDS OF YESHIVAS TEMIMEI DARECH C/O B DUBROW 261 OLD YORK RD JENKINTOWN, PA 27-1185788 501 (C) 3 34,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FRIENDS OF YESHIVAS TORAS MOSHK 1412 E 77TH ST BROOKLYN, NY 11230 11-3069714 501 (C) 3 5,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FRIENDS OF YESHIVAT HAKOTEL 43 RECTOR CT BERGENFIELD, NJ 7621 38-3984800 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FRIENDS OF YESHIVAT NEEDER SDEROT 49 DAKOTA ST PASSaic, NJ 7055 01-0553431 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY ST PHILADELPHIA, PA 19102 23-1352010 501 (C) 3 307,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN FUND FOR EMMANUEL 116 W MAIN ST STE 302 SALISBURY, MD 21801 30-0045973 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th></th>
<th>(a) Name and address of organization or government</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>AMERICAN FUNDRAISING FOUNDATION INC</td>
<td>2603 MAITLAND CTR PKWY STE B MAITLAND, FL 3</td>
<td>81-1160316</td>
<td>501 (c) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2.</td>
<td>AMERICAN GIFT FUND</td>
<td>PO BOX 15627 WILMINGTON, DE 19850</td>
<td>51-6506426</td>
<td>501 (c) 3</td>
<td>59,717.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>AMERICAN HEART ASSOCIATION INC</td>
<td>7272 GREENVILLE AVE DALLAS, TX 75231</td>
<td>13-5613797</td>
<td>501 (c) 3</td>
<td>2,181,826.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>AMERICAN HIMALAYAN FOUNDATION</td>
<td>909 MONTGOMERY ST STE 400 SAN FRANCISCO, CA</td>
<td>94-2951480</td>
<td>501 (c) 3</td>
<td>31,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>AMERICAN HORSE TRIALS FOUNDATION INC</td>
<td>363 N LOOMIS ST SOUTHWICK, MA 1077</td>
<td>52-1495923</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>AMERICAN HOSPITAL OF PARIS FOUNDATION ON</td>
<td>477 MADISON AVE FL 6 NEW YORK, NY 10022</td>
<td>54-1031618</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>AMERICAN HUMANE ASSOCIATION</td>
<td>1400 16TH ST NW WASHINGTON, DC 20036</td>
<td>84-0432950</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>AMERICAN HUMANIST ASSOCIATION</td>
<td>1821 JEFFERSON PLACE NW WASHINGTON, DC 2003</td>
<td>94-6168317</td>
<td>501 (c) 3</td>
<td>9,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>AMERICAN IDEAS INSTITUTE</td>
<td>910 17TH ST NW STE 400 WASHINGTON, DC 20006</td>
<td>27-0311492</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10.</td>
<td>AMERICAN IMMIGRATION COUNCIL</td>
<td>1331 G ST NW WASHINGTON, DC 20005</td>
<td>52-1549711</td>
<td>501 (c) 3</td>
<td>40,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>AMERICAN IMPACT CAPITAL FOUNDATION INC</td>
<td>10 VIOLET LN WESTPORT, CT 6880</td>
<td>83-1832513</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>AMERICAN INDIA FOUNDATION</td>
<td>216 E 45TH ST FL 7 NEW YORK, NY 10017</td>
<td>13-4159765</td>
<td>501 (c) 3</td>
<td>267,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number: 23-2888152

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<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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<td>(1)</td>
<td>AMERICAN INDIAN COLLEGE FUND</td>
</tr>
<tr>
<td>(2)</td>
<td>AMERICAN INDIAN GRADUATE CENTER INC</td>
</tr>
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<td>(3)</td>
<td>AMERICAN INSTITUTE FOR AVALANCHE RESEARCH AKA</td>
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<td>(4)</td>
<td>AMERICAN INSTITUTE FOR CANCER RESEARCH</td>
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<td>AMERICAN INSTITUTE FOR ECONOMIC RESEARCH INC</td>
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<td>AMERICAN INSTITUTE OF CHEMICAL ENGINEERS</td>
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<td>(7)</td>
<td>AMERICAN INTERNATIONAL COLLEGE</td>
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<tr>
<td>(8)</td>
<td>AMERICAN ISRAEL EDUCATION FOUNDATION INC</td>
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<td>(9)</td>
<td>AMERICAN JEWISH COMMITTEE</td>
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<td>AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE</td>
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<td>(11)</td>
<td>AMERICAN JEWISH UNIVERSITY</td>
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<tr>
<td>(12)</td>
<td>AMERICAN JEWISH WORLD SERVICE INC</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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► Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>(1)</td>
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<td>83-1772542</td>
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<td>FMV</td>
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<td>AMERICAN JUNIOR GOLF ASSOCIATION</td>
<td>58-1433914</td>
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<td>24,000.</td>
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<td>(3)</td>
<td>AMERICAN KIDNEY FUND INC</td>
<td>22-7124261</td>
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<td>13,000.</td>
<td>FMV</td>
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<td>AMERICAN LEADERSHIP FORUM</td>
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<td>FMV</td>
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<td>(5)</td>
<td>AMERICAN LEBANESE SYRIAN ASSOCIATION INC</td>
<td>35-1044585</td>
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<td>(11)</td>
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<td>38,675.</td>
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<td>(12)</td>
<td>AMERICAN MUSEUM OF THE MOVING IMAGE</td>
<td>11-2730714</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Optional Paperwork Reduction Act Notice:** See the Instructions for Form 990.

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000.** Part II can be duplicated if additional space is needed.

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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
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<td>52-0882226</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
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<td>501 (C) 3</td>
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<td>4</td>
<td>AMERICAN PARKINSON DISEASE ASSOC</td>
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<td>501 (C) 3</td>
<td>71,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
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<td>N/A</td>
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<td>8</td>
<td>AMERICAN POLITICAL SCIENCE ASSOCIATION</td>
<td>53-0200001</td>
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<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>AMERICAN PRAIRIE FOUNDATION</td>
<td>81-0541893</td>
<td>501 (C) 3</td>
<td>1,063,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>AMERICAN PRINCIPLES PROJECT FOUNDATION</td>
<td>26-4442148</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>AMERICAN PROMISE EDUCATION FUND INC</td>
<td>47-4601462</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12</td>
<td>AMERICAN PROSPECT INC</td>
<td>52-1617061</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  
**3** Enter total number of other organizations listed in the line 1 table:  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. AMERICAN PUBLIC MEDIA GROUP 480 CEDAR ST SAINT PAUL, MN 55101</td>
<td>36-3503764</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. AMERICAN RADIO RELAY LEAGUE INC 225 MAIN ST NEWINGTON, CT 6111</td>
<td>06-6000004</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. AMERICAN REPERTORY THEATRE 64 BRATTLE ST CAMBRIDGE, MA 2138</td>
<td>04-2665867</td>
<td>501 (C) 3</td>
<td>176,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. AMERICAN RESCUE WORKERS INC 643 ELMIRA ST WILLIAMSPORT, PA 17701</td>
<td>23-1714132</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. AMERICAN RIVERS INC 1101 14TH ST NW # NW1000 WASHINGTON, DC 200</td>
<td>23-7305963</td>
<td>501 (C) 3</td>
<td>147,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. AMERICAN ROENTGEN RAY SOCIETY 44211 SLATESTONE CT LEESBURG, VA 20176</td>
<td>58-0838728</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. AMERICAN SHAKESPEARE CENTER 20 S NEW ST 4TH FLOOR STAUNTON, VA 24401</td>
<td>54-1487955</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. AMERICAN SKIN ASSOCIATION INC 335 MADISON AVE FL 22 NEW YORK, NY 10017</td>
<td>13-3401320</td>
<td>501 (C) 3</td>
<td>21,748.</td>
<td>FMV</td>
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<td>9. AMERICAN SOCIETY FOR TECHNION- ISRAEL INSTI 55 E 59TH ST FL 14 NEW YORK, NY 10022</td>
<td>13-0434195</td>
<td>501 (C) 3</td>
<td>288,000.</td>
<td>FMV</td>
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<tr>
<td>10. AMERICAN SOCIETY FOR THE PREVENTION OF CRUE 424 E 92ND ST NEW YORK, NY 10128</td>
<td>13-1623829</td>
<td>501 (C) 3</td>
<td>298,953.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. AMERICAN SOCIETY FOR YAD VASHEM INC 500 5TH AVE FL 42 NEW YORK, NY 10110</td>
<td>13-3106768</td>
<td>501 (C) 3</td>
<td>13,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. AMERICAN SOCIETY OF CATARACT AND REFRACTIVE 12587 FAIR LAKES CIRCLE NO 348 FAIRFAX, VA</td>
<td>23-7388748</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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### Part I General Information on Grants and Assistance

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   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMERICAN SOCIETY OF TRANPLANTATION 1000 ATRIUM WAY STE 400 MOUNT LAUREL, NJ 80 42-1182936 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN SOCIETY OF TROPICAL MEDICINE AND 241 18TH ST S STE 501 ARLINGTON, VA 22202 57-0408245 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN SOLAR ENERGY SOCIETY INC 2525 ARAFANGAGE AVE UNIT E4 # 253 BOULDER, CO 59-1768923 501 (C) 3 26,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN STAGE CO INC PO BOX 1560 SAINT PETERSBURG, FL 33731 59-1777189 501 (C) 3 27,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN SYMPHONY ORCHESTRA LEAGUE 520 8TH AVE RM 2005 NEW YORK, NY 10018 23-7300636 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>AMERICAN THEATRE WING INC 230 W 41ST ST STE 1101 NEW YORK, NY 10036 13-1893906 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN TRADITIONS COMPETITION INC PO BOX 10422 SAVANNAH, GA 31412 27-2893610 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN TRANSPARENCY 200 S FRONTEAGE RD STE 106 BURL RIDGE, IL 60 26-3593601 501 (C) 3 56,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN UNIVERSITY 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20 53-0196549 501 (C) 3 393,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN UNIVERSITY OF BEIRUT 305 E 47TH ST FL 8 NEW YORK, NY 10017 13-55959846 501 (C) 3 390,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN VETERANS SERVICE DOG 4 WILD PLUM CT LEMONT, IL 60439 46-5397186 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AMERICAN WHITEN WATER 629 W MAIN ST SYLVA, NC 28779 23-7083760 501 (C) 3 119,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) AMERICAN WRITERS MUSEUM 205 W WACKER DR STE 625 CHICAGO, IL 60606</td>
<td>27-1822749</td>
<td>501 (C) 3</td>
<td>171,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) AMERICAN YOUTH FOUNDATION 147 CANAAN RD CENTER TUFTONBORO, NH 3816</td>
<td>43-0652614</td>
<td>501 (C) 3</td>
<td>24,303</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) AMERICAN YOUTH SOCCER ORGANIZATION 19750 S VERMONT AVE TORRANCE, CA 90502</td>
<td>95-6205398</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) AMERICANS AGAINST LEGALIZING MARIJUANA 4241 RIO MONTE CT CARMICHAEL, CA 95608</td>
<td>47-2120025</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) AMERICANS FOR A BETTER TOMORROW INC 2320 E BASELINE RD PHOENIX, AZ 85042</td>
<td>86-0733919</td>
<td>501 (C) 3</td>
<td>11,450</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) AMERICANS FOR FAIR TREATMENT INC 1200 NW 63RD ST STE 5000 OKLAHOMA CITY, OK</td>
<td>47-2593565</td>
<td>501 (C) 3</td>
<td>1,000,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) AMERICANS FOR FINANCIAL REFORM EDUCATION FUND 1615 L ST NW STE 450 WASHINGTON, DC 20036</td>
<td>82-2553525</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) AMERICANS FOR OXFORD INC 500 5TH AVE FL 32 NEW YORK, NY 10110</td>
<td>52-1495060</td>
<td>501 (C) 3</td>
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<tr>
<td>(9) AMERICANS FOR PEACE NOW INC 1320 19TH ST NW STE 400 WASHINGTON, DC 20033</td>
<td>13-3509867</td>
<td>501 (C) 3</td>
<td>18,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) AMERICANS FOR PROSPERITY FOUNDATION 1310 N COURTHOUSE RD ARLINGTON, VA 22201</td>
<td>52-1527294</td>
<td>501 (C) 3</td>
<td>71,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) AMERICANS FOR TAX REFORM FOUNDATION C/O MEGAN WORLEY 4301 BUSHIE CT, ALEXANDRIA</td>
<td>52-1400492</td>
<td>501 (C) 3</td>
<td>34,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) AMERICANS UNITED FOR LIFE 1150 CONNECTICUT AVE NW STE 500 WASHINGTON, DC 20036</td>
<td>36-3906065</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>191,100.</td>
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<tr>
<td>88 HAMILTON AVE STAMFORD, CT 6902</td>
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<tr>
<td>14150 NEWBROOK DR STE 110 CHANTILLY, VA 201</td>
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<td>75,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1633 CONNECTICUT AVE NW STE 300 WASHINGTON,</td>
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<tr>
<td>7800 BONHOMME AVE SAINT LOUIS, MO 63105</td>
<td>13-1549794</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>601 ROUTE 530 WHITING, NJ 8759</td>
<td>21-0715335</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>2501 E PRESIDENT ST SAVANNAH, GA 31404</td>
<td>58-1442013</td>
<td>501 (C) 3</td>
<td>39,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4446 ENTREPOIT BLVD TALLAHASSEE, FL 32310</td>
<td>59-2610345</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>680 PARK AVE NEW YORK, NY 10065</td>
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<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>371 E JERICHO TPKE SMITHTOWN, NY 11787</td>
<td>20-8814368</td>
<td>501 (C) 3</td>
<td>8,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 BAKER LANE MONSEY, NY 10952</td>
<td>30-0110364</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2622 LINCOLN WAY AMES, IA 50014</td>
<td>42-0698279</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
</tbody>
</table>

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(Form 990)

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) AMICUS FUND INC</td>
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<td>PO BOX 476 MALVERN, PA 19355</td>
<td>23-3027589</td>
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<td>PO BOX 106 WIMBERLEY, TX 78676</td>
<td>82-5286022</td>
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<td>1800 WEST LOOP S STE 1125 HOUSTON, TX 77027</td>
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<td>(5) AMIGOS DE LOS NIÑOS</td>
<td>330 N BASSE LN BREA, CA 92821</td>
<td>95-3848922</td>
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<td>75 MADDOX ROAD SUITE 107 BUFORD, GA 30518</td>
<td>58-2484257</td>
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<td>462,000.</td>
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<td>(8) AMISTAD INTERNATIONAL</td>
<td>2205 SHIRLARD TRACT RD AUBURN, CA 95603</td>
<td>94-2737593</td>
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<td>63-1011215</td>
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<td>13-5631502</td>
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<td>(11) AMneath INTERNATIONAL OF THE USA INC</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes  No

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) AMORY FOOD PANTRY INC</td>
<td>123 MAIN ST S AMORY, MS 38821</td>
<td>64-0758372</td>
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<td>27-0837989</td>
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<td>05-0387218</td>
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<td>6844 BARDSTOWN RD STE 677 LOUISVILLE, KY 40</td>
<td>37-1568787</td>
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<td>(7) AMREF HEALTH AFRICA INC</td>
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<td>(8) AMUDIM COMMUNITY RESOURCES INC</td>
<td>11 BROADWAY STE 1076 NEW YORK, NY 10004</td>
<td>47-0984801</td>
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<td>(9) AMYOTROPHIC LATERAL SCLEROSIS ASSN</td>
<td>1300 WILSON BLVD STE 600 ROSSLYN, VA 22209</td>
<td>13-3271855</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>700 NE MULTNOMAH ST STE 210 PORTLAND, CT 64</td>
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<td>(12) ANANDA CHURCH OF SELF-REALIZATION OF NEVADA</td>
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<td>14618 TYLER FOOTE RD NEVADA CITY, CA 95959</td>
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Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
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<th>(h) Purpose of grant or assistance</th>
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<td>(10) AND JUSTICE FOR ALL INC</td>
<td>8244 NATIVE VIOLET DR LORTON, VA 22079</td>
<td>501 (C) 3</td>
<td>15,000. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) AND THEN THERE WERE NONE</td>
<td>45-3839973</td>
<td>501 (C) 3</td>
<td>52,000. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(12) ANDREAN HEALTH AND DEVELOPMENT INC</td>
<td>3902 MILWAUKEE ST UNIT 7702 MADISON, WI 5377</td>
<td>501 (C) 3</td>
<td>211,800. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................

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

Schedule I (Form 990) 2020

JSA

OE1288 1.000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| (1) Anderson Foundation For Autism Inc | 80-0363172 | 501 (c) 3 | 50,000. | FMV | N/A | For Recipient's Exem |
| (2) Andover Community Trust Inc | 04-3159877 | 501 (c) 3 | 11,500. | FMV | N/A | For Recipient's Exem |
| (3) Andre House Of Arizona Inc | 84-0717841 | 501 (c) 3 | 41,500. | FMV | N/A | For Recipient's Exem |
| (4) Andrew Greene Foundation | 111 Rawls Rd Des Plaines, Il 60018 | 501 (c) 3 | 30,000. | FMV | N/A | For Recipient's Exem |
| (5) Andrew L Hicks Jr Foundation | 27-3283954 | 501 (c) 3 | 30,000. | FMV | N/A | For Recipient's Exem |
| (6) Andrew Momack Ministries Inc | 1 Innovation Way Woodland Park, Co 80863 | 501 (c) 3 | 81,760. | FMV | N/A | For Recipient's Exem |
| (7) Angel Flight West Inc | 3161 Donald Douglas Loop S Santa Monica, Ca | 501 (c) 3 | 8,000. | FMV | N/A | For Recipient's Exem |
| (8) Angel Foundation | 1155 Centre Pointe Dr Ste 7 Saint Paul, Mn | 501 (c) 3 | 9,300. | FMV | N/A | For Recipient's Exem |
| (9) Angel Island Immigration Station Foundation | 870 Market St Ste 941 San Francisco, Ca 941 | 501 (c) 3 | 13,500. | FMV | N/A | For Recipient's Exem |
| (10) Angel Reach | 206-A South Loop 336 W-203 Conroe, Tx 77304 | 501 (c) 3 | 19,000. | FMV | N/A | For Recipient's Exem |
| (11) Angel Shine Foundation Inc | 181 E 90th St Apt 23H New York, N.Y. 10128 | 501 (c) 3 | 120,000. | FMV | N/A | For Recipient's Exem |
| (12) Angel Wings Foundation | 2134 Baldwin Ct Hangover Park, Il 60133 | 501 (c) 3 | 10,000. | FMV | N/A | For Recipient's Exem |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ANGELMAN SYNDROME FOUNDATION INC</td>
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<td></td>
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<td></td>
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<tr>
<td>3015 E NEW YORK ST STE A2 # 28 AURORA, IL 6</td>
<td>59-3092842</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ANGELS OVER SANDPOINT</td>
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<td></td>
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<tr>
<td>PO BOX 2369 SANDPOINT, ID 83864</td>
<td>82-0536068</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(3) ANGELUS ACADEMY</td>
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<tr>
<td>7644 DYNATECH CT SPRINGFIELD, VA 22153</td>
<td>54-1923974</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ANGLICAN CHURCH IN NORTH AMERICA</td>
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<tr>
<td>800 MAPLEWOOD AVE AMBRIDGE, PA 15003</td>
<td>76-0754677</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ANGLICAN COMMUNICATION COMPASS ROSE SOCIETY INC</td>
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<tr>
<td>1225 TEXAS ST HOUSTON, TX 77002</td>
<td>31-1721705</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) ANGLICAN FRONTIER MISSIONS</td>
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<tr>
<td>PO BOX 18038 RICHMOND, VA 23226</td>
<td>62-1491171</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) ANIMAL AID UNLIMITED</td>
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<tr>
<td>6900 37TH AVE SW SEATTLE, WA 98126</td>
<td>71-0884843</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ANIMAL CHARITY EVALUATORS</td>
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<tr>
<td>1682 SCENIC AVE APT 3 BERKELEY, CA 94709</td>
<td>36-4684978</td>
<td>501 (C) 3</td>
<td>122,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) ANIMAL FRIENDS INC</td>
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<tr>
<td>562 CAMP HORNE RD PITTSBURGH, PA 15237</td>
<td>25-0951565</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ANIMAL HAVEN OF ASHEVILLE</td>
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<tr>
<td>PO BOX 9697 ASHEVILLE, NC 28815</td>
<td>56-2157276</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ANIMAL HUMANE SOCIETY</td>
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<tr>
<td>845 MEADOW LN N MINNEAPOLIS, MN 55422</td>
<td>41-0693842</td>
<td>501 (C) 3</td>
<td>51,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) ANIMAL LEGAL DEFENSE FUND</td>
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<tr>
<td>525 E COTATI AVE COTATI, CA 94931</td>
<td>94-2681680</td>
<td>501 (C) 3</td>
<td>119,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table .......................................................... ▶

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Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [ ]
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ANIMAL OUTLOOK INC 6930 CARROLL AVE STE 910 TAKOMA PARK, MD 20153-4702</td>
<td>6930-0001</td>
<td>501 (C) 3</td>
<td>7,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ANIMAL PLACE 17314 MCCOURTNEY RD GRASS VALLEY, CA 95949</td>
<td>17314-0002</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) ANIMAL REFUGE LEAGUE OF GREATER PORTLAND PO BOX 336 WESTBROOK, ME 04801-9872</td>
<td>336-0003</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ANIMAL RESCUE &amp; K9 CHARITIES INC 23 OBTUSE RD N BROOKFIELD, CT 06804</td>
<td>23-0004</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) ANIMAL RESCUE CORPS INC 1380 MONROE ST NW # 326 WASHINGTON, DC 20001</td>
<td>1380-0005</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) ANIMAL RESCUE FOUNDATION OF ROME-FLOYD COUNTY PO BOX 682 ROME, GA 30162</td>
<td>682-0006</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ANIMAL RESCUE LEAGUE OF BOSTON 10 CHANDLER ST BOSTON, MA 2116</td>
<td>10-0007</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ANIMAL RESCUE LEAGUE WESTERN PENNSYLVANIA INC 6926 HAMILTON AVE PITTSBURGH, PA 15208</td>
<td>6926-0008</td>
<td>501 (C) 3</td>
<td>26,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) ANIMAL RESCUE NEW ORLEANS INC 1219 COLISEUM ST NEW ORLEANS, LA 70130</td>
<td>1219-0009</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ANIMAL RESCUE OF LABELLE INC 463 E LINCOLN AVE LABELLE, FL 33935</td>
<td>463-0010</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ANIMAL WELFARE ASSOCIATION INCORPORATED 507 CENTENNIAL BLVD VOORHEES, NJ 08043</td>
<td>507-0011</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) ANIMAL WELFARE INSTITUTE 900 PENNSYLVANIA AVE SE WASHINGTON, DC 20003</td>
<td>900-0012</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.  
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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</tbody>
</table>

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] No [ ]

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<table>
<thead>
<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ANIMAL WELFARE LEAGUE OF ARLINGTON VA, INC.</td>
<td>2650 S ARLINGTON MILL DRIVE ARLINGTON, VA 2</td>
<td>54-0603502</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ANIMAL WELNESS FOUNDATION</td>
<td>4053 LINCOLN BLVD MARINA DL REY, CA 90292</td>
<td>45-4361755</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ANIMALS ASIA FOUNDATION LIMITED</td>
<td>6060 CENTER DR FL 10 LOS ANGELES, CA 90045</td>
<td>31-1802798</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>ANJALI HOUSE US INC</td>
<td>54 BLUEBERRY RIDGE LN CHILMARK, MA 2535</td>
<td>47-2750228</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ANN &amp; ROBERT H LURIE CHILDREN'S HOSPITAL OF</td>
<td>225 E CHICAGO AVE BOX 282 CHICAGO, IL 60611</td>
<td>36-2170833</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>ANN &amp; ROBERT H LURIE CHILDREN'S HOSPITAL OF</td>
<td>225 E CHICAGO AVE # 282 CHICAGO, IL 60611</td>
<td>36-3357006</td>
<td>501 (C) 3</td>
<td>19,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>ANN ARBOR AREA COMMUNITY FOUNDATION</td>
<td>301 N MAIN ST STE 300 ANN ARBOR, MI 48104</td>
<td>38-6087967</td>
<td>501 (C) 3</td>
<td>6,053.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>ANN ARBOR ART ASSOCIATION</td>
<td>117 W LIBERTY ST ANN ARBOR, MI 48104</td>
<td>23-7205537</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>ANN ARBOR CHINESE CHRISTIAN CHURCH SBC</td>
<td>1750 DHU VARREN RD ANN ARBOR, MI 48105</td>
<td>38-2915168</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>ANN ARBOR SUMMER FESTIVAL INC</td>
<td>210 HURONVIEW BLVD ANN ARBOR, MI 48103</td>
<td>38-2307397</td>
<td>501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ANN ARBOR SYMPHONY ORCHESTRA INC</td>
<td>35 RESEARCH DR STE 100 ANN ARBOR, MI 48103</td>
<td>38-6069701</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>ANNA CRUSIS WOMEN S CHOIR INC</td>
<td>PO BOX 42277 PHILADELPHIA, PA 19101</td>
<td>23-2524428</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II
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</tr>
</thead>
<tbody>
<tr>
<td><strong>(1)</strong> ANNA JULIA COOPER EPISCOPAL SCHOOL</td>
<td>2124 N 29TH ST RICHMOND, VA 23223</td>
<td>27-0407231</td>
<td>501 (C) 3</td>
<td>88,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(2)</strong> ANNA MARY SCHOLARSHIP FOUNDATION</td>
<td>2624 N FILLMORE ST LITTLE ROCK, AR 72207</td>
<td>27-2988333</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(3)</strong> ANNA MARIES ALLIANCE</td>
<td>500 11TH AVE N SAINT CLOUD, MN 56303</td>
<td>41-1344743</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(4)</strong> ANNA DALE EVANGELICAL FREE CHURCH</td>
<td>10252 STATE HIGHWAY 55 NW ANNANDALE, MN 55302</td>
<td>41-1487347</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(5)</strong> ANNA DALE AREA COMMUNITY FOODSHELF</td>
<td>PO BOX 94 ANNANDALE, MN 55302</td>
<td>36-3297409</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(6)</strong> ANNA DALE CHURCH OF CHRIST</td>
<td>4709 RAVENSWORTH ROAD ANNANDALE, VA 22003</td>
<td>54-1225902</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(7)</strong> ANNA DALE UNITED METHODIST CHURCH</td>
<td>250 OAK AVENUE NORTH PO BOX 329 ANNANDALE,</td>
<td>41-1393198</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(8)</strong> ANNA DALE YOUTH FIRST INC</td>
<td>125 CHERRY AVE N ANNANDALE, MN 55302</td>
<td>41-1895999</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(9)</strong> ANNA MARIS MARITIME MUSEUM INC</td>
<td>PO BOX 3088 ANNAPOLIS, MD 21403</td>
<td>52-1664577</td>
<td>501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(10)</strong> ANNA MARIS SYMPHONY ORCHESTRA ASSOCIATION</td>
<td>801 CHASE ST ANNAPOLIS, MD 21401</td>
<td>23-7001357</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(11)</strong> ANNA MARIS MEDICAL CENTER FOUNDATION INC</td>
<td>2000 MARYLAND PKWY STE 606 ANNAPOLIS, MD 21403</td>
<td>52-1331298</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(12)</strong> ANNIE CANNONS INC</td>
<td>340 S LEMON AVE WALNUT, CA 91789</td>
<td>47-3202155</td>
<td>501 (C) 3</td>
<td>71,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**Department of the Treasury**
Internal Revenue Service

---

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<tr>
<td>1 ANNS HEART</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 ANNUNCIATION HOUSE INC</td>
<td>74-1152529</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3 ANNUNCIATION MONASTERY OF CLEAR CREEK FOUN</td>
<td>72-1539587</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 ANSHE EMET SYNAGOGUE</td>
<td>36-0739900</td>
<td>501 (C) 3</td>
<td>21,370.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 ANSHE SHOLOM B'NAI ISRAEL CONGREGATION</td>
<td>36-2284422</td>
<td>501 (C) 3</td>
<td>10,425.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 ANSHEI SFARD OF WESLEY HILLS</td>
<td>13-4197477</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 ANTARA INTERNATIONAL INC</td>
<td>30-1250104</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 ANTHEM CHAPEL OF GOLETA</td>
<td>82-3499341</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 ANTHEM CHURCH</td>
<td>26-4263152</td>
<td>501 (C) 3</td>
<td>23,314.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 ANTHONY MUÑOZ FOUNDATION</td>
<td>30-0091100</td>
<td>501 (C) 3</td>
<td>26,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 ANTHONY SCHOOL INC</td>
<td>71-0708868</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 ANTI DEFAMATION LEAGUE FOUNDATION</td>
<td>13-2887439</td>
<td>501 (C) 3</td>
<td>541,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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<tr>
<td>ANTI-CRUELTY SOCIETY 157 W GRAND AVE CHICAGO, IL 60654</td>
<td>36-2179814</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ANTI-DEFAMATION LEAGUE 605 3RD AVE NEW YORK, NY 10158</td>
<td>13-1818723</td>
<td>501 (c) 3</td>
<td>1,579,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ANTIGO AREA COMMUNITY FOOD PANTRY INC PO BOX 194 ANTIGO, WI 54409</td>
<td>45-4834406</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ANTIOCH CHRISTIAN CHURCH PO BOX 187 MARION, IA 52302</td>
<td>42-1023557</td>
<td>501 (c) 3</td>
<td>12,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ANTIOCH COMMUNITY CHURCH 375 SENATE AVE YPSILANTI, MI 48197</td>
<td>46-2848478</td>
<td>501 (c) 3</td>
<td>14,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ANTIOCHIAN VILLAGE PO BOX 307 BOLIVAR, PA 15923</td>
<td>25-1374683</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ANTI-RECIDIVISM COALITION 1320 E 7TH ST STE 260 LOS ANGELES, CA 90021</td>
<td>46-2140915</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AOPA FOUNDATION 421 AVIATION WAY FREDERICK, MD 21701</td>
<td>20-8817225</td>
<td>501 (c) 3</td>
<td>59,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APARTMENT LIFE INC PO BOX 1369 BEDFORD, TX 76095</td>
<td>75-2868621</td>
<td>501 (c) 3</td>
<td>85,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APEX FOR YOUTH INC 120 WALKER ST # 5 NEW YORK, NY 10013</td>
<td>13-3650718</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AFFED 2307 THOMPSON CROSSING DR RICHMOND, TX 7740</td>
<td>76-0700153</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>API CULTURAL CENTER INC 388 9TH ST STE 290 OAKLAND, CA 94607</td>
<td>72-1649335</td>
<td>501 (c) 3</td>
<td>200,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APLA HEALTH &amp; WELLNESS 611 S KINGSLEY DR LOS ANGELES, CA 90005</td>
<td>84-1661910</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APOLLOS FIRE THE CLEVELAND BAROQUE ORCHESTRA 3091 MAYFIELD RD STE 217 CLEVELAND, OH 4411</td>
<td>34-1696842</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APOSTOLIC CHRISTIAN CHURCH 19400 WEST 13 MILE ROAD BEVERLY HILLS, MI 4</td>
<td>38-2218440</td>
<td>501 (C) 3</td>
<td>6,344.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APOSTOLIC CHRISTIAN CHURCH OF AMERI CA OF M 645 MARIE AVE W SAINT PAUL, MN 55118</td>
<td>41-6099117</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>APOSTOLIC CHRISTIAN CHURCH OF BELVI DERE PO BOX 391 BELVIDERE, IL 61008</td>
<td>36-3765095</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>APOSTOLIC CHRISTIAN CHURCH OF ELLIN GTON CT 34 MIDDLE BUTCHER RD ELLINGTON, CT 6029</td>
<td>23-7357977</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>APOSTOLIC CHRISTIAN CHURCH OF TREMONT IL PO BOX 108 TREMONT, IL 61568</td>
<td>37-0750775</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APOSTOLIC CHRISTIAN COUNSELING AND FAMILY S 515 E HIGHLAND ST MORTON, IL 61550</td>
<td>37-1394041</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>APOSTOLIC CHRISTIAN HARVESTCALL 711 ELM DR BLUFFTON, IN 46714</td>
<td>20-3273241</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APOSTOLIC CHRISTIAN HOME FOR THE HANDICAPPE 2125 VETERANS RD MORTON, IL 61550</td>
<td>23-7033585</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>APOSTOLIC FAITH CHURCH OF MECHANICSBURG P.O. BOX 596 MECHANICSBURG, PA 17055</td>
<td>25-1754422</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>APPALACHIA SERVICE PROJECT INC 4523 BRISTOL HWY JOHNSON CITY, TN 37601</td>
<td>62-0989383</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tbody>
<tr>
<td>(1) APPALACHIAN COMMUNITY FUND INC 1405 E MAGNOLIA AVE KNOXVILLE, TN 37917</td>
<td>62-1316019</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) APPALACHIAN MOUNTAIN CLUB 10 CITY SQ CHARLESTOWN, MA 2129</td>
<td>04-6001677</td>
<td>501 (C) 3</td>
<td>225,251.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) APPALACHIAN PRISON BOOK PROJECT INC PO BOX 601 MORGANTOWN, WV 26507</td>
<td>45-4906618</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) APPALACHIAN STATE UNIVERSITY FOUNDATION INC ASU BOX 32064 MCKINNEY ALUMNI CTR BOONE, NC</td>
<td>23-7099379</td>
<td>501 (C) 3</td>
<td>8,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) APPALACHIAN TRAIL CONSERVANCY PO BOX 807 HARPER'S FERRY, WV 25425</td>
<td>52-6046689</td>
<td>501 (C) 3</td>
<td>78,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) APPALACHIAN VOICES 589 W KING ST BOONE, NC 28607</td>
<td>56-2049956</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) APPELLATE PROJECT INC 2214 11TH ST NW APT 4 WASHINGTON, DC 20001</td>
<td>84-3852810</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) APPLE HILL CENTER FOR CHAMBER MUSIC INC 217 APPLE HILL RD SULLIVAN, NH 3445</td>
<td>23-7135782</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) APPLE OF HIS EYE MISSION SOCIETY PO BOX 6977 SAINT LOUIS, MO 63123</td>
<td>43-1751864</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) APPLETON ALLIANCE CHURCH INC 2693 W GRAND CHUTE BLVD APPLETON, WI 54913</td>
<td>39-1345185</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(11) APPLETON COMMUNITY EVANGELICAL FREE CHURCH 2490 W CAPITOL DR APPLETON, WI 54914</td>
<td>39-1626235</td>
<td>501 (C) 3</td>
<td>26,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) APPLIED COMPUTER SECURITY ASSOCIATES INC 18529 MEADOWLAND TER OLNEY, MD 20832</td>
<td>52-1575759</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  ( )

3. Enter total number of other organizations listed in the line 1 table:  ( )

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1)</strong> AQUARIUM OF THE PACIFIC <strong>100 AQUARIUM WAY LONG BEACH, CA 90802</strong></td>
<td>33-0532354</td>
<td>501 (c) 3</td>
<td>44,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(2)</strong> AQUIDNECK LAND TRUST <strong>790 AQUIDNECK AVE MIDDLETOWN, RI 2842</strong></td>
<td>22-3073770</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(3)</strong> AQUINAS ACADEMY <strong>2308 W HADGES RD GIBSONIA, PA 15044</strong></td>
<td>25-1753350</td>
<td>501 (c) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(4)</strong> AQUINAS AT DARTMOUTH INC <strong>PO BOX 147 HANOVER, NH 3755</strong></td>
<td>02-0275080</td>
<td>501 (c) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(5)</strong> AQUINAS COLLEGE INC <strong>1700 FULTON ST E GRAND RAPIDS, MI 49506</strong></td>
<td>38-1367080</td>
<td>501 (c) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(6)</strong> ARBUTUS FOUNDATION INC <strong>441 BROADWAY 3RD FLOOR NEW YORK, NY 10013</strong></td>
<td>83-1802347</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(7)</strong> ARC MINNESOTA INC <strong>2446 UNIVERSITY AVE W STE 110 SAINT PAUL, MN 55104</strong></td>
<td>41-0795254</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(8)</strong> ARC OCEAN COUNTY CHAPTER <strong>815 CEDARBRIDGE AVE LAKEWOOD, NJ 8701</strong></td>
<td>21-0723435</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(9)</strong> ARC OF ANCHORAGE <strong>2211 ARCA DR ANCHORAGE, AK 99508</strong></td>
<td>92-0028571</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>(10)</strong> ARCADIA FOUNDATION <strong>1434 FUNABOU ST HONOLULU, HI 96822</strong></td>
<td>99-0335929</td>
<td>501 (c) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(11)</strong> ARCADIA UNIVERSITY <strong>450 S EASTON RD GLENMERE, PA 19008</strong></td>
<td>23-1352620</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(12)</strong> ARCENCIHEL USA INC <strong>124 W 23RD ST APT 12A NEW YORK, NY 10011</strong></td>
<td>81-1265030</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>ARCH CITY DEFENDERS INC</td>
<td>80-0471494</td>
<td>501 (c) 3</td>
<td>70,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>ARCHANGEL MICHAELS ORTHODOX CHURCH</td>
<td>34-0801318</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>ARCHBISHOP ALTER HIGH SCHOOL</td>
<td>31-0652528</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>ARCHBISHOP CURLEY HIGH SCHOOL</td>
<td>52-0740597</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>ARCHBISHOP MCNICHOLAS HIGH SCHOOL</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>N/A</td>
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<td>(7)</td>
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<td>11-1848825</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>ARCHBISHOP MOLLOY HIGH SCHOOL CHARITABLE TRU</td>
<td>20-8522725</td>
<td>501 (c) 3</td>
<td>40,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>ARCHBISHOP RYAN SCHOOL FOR DEAF AND HARD OF</td>
<td>23-1698681</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>ARCHBISHOP WILLIAMS HIGH SCHOOL</td>
<td>56-2438555</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(12)</td>
<td>ARCHDIOCESE FOR THE MILITARY SERVICES USA</td>
<td>13-1624090</td>
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<td>9,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Schedule I**
(Schedule I of Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**I. General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**II. Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>1</td>
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<td>12,850</td>
<td>FMV</td>
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<td>13,700</td>
<td>FMV</td>
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<td>ARCHDIOCESE OF DENVER</td>
<td>84-0499858</td>
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<td>5</td>
<td>ARCHDIOCESE OF KANSAS CITY</td>
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<td>501 (C) 3</td>
<td>31,602</td>
<td>FMV</td>
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<td>6</td>
<td>ARCHDIOCESE OF MIAMI INC</td>
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<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
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<td>ARCHDIOCESE OF MILWAUKEE</td>
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<td>45,800</td>
<td>FMV</td>
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<td>8</td>
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<td>501 (C) 3</td>
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<td>ARCHDIOCESE OF NEWARK</td>
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<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
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<td>73-0632924</td>
<td>501 (C) 3</td>
<td>22,544</td>
<td>FMV</td>
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<td>12</td>
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<td>23-1360839</td>
<td>501 (C) 3</td>
<td>23,750</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**2.** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

**3.** Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

### (1) Name and address of organization or government

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
<th>IRC section</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>67,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARCHDIOCESE OF PORTLAND IN OREGON</td>
<td>2838 E BURNSIDE ST PORTLAND, OR 97214</td>
<td>501 (c) 3</td>
<td>148,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARCHDIOCESE OF SEATTLE</td>
<td>30 ARCHDIOCESE OF ST LOUIS</td>
<td>501 (c) 3</td>
<td>105,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARCHDIOCESE OF ST LOUIS</td>
<td>3527 MT DIABLO BLVD LAFAYETTE, CA 94549</td>
<td>501 (c) 3</td>
<td>300,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARCHDIOCESE OF SEATTLE</td>
<td>3600 PHILADELPHIA FINE CLAYMONT, DE 19703</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARDEN THEATRE COMPANY</td>
<td>40 N 2ND ST PHILADELPHIA, PA 19106</td>
<td>501 (c) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ARIS G. EGAN JUNIOR HIGH</td>
<td>100 WEST PORTOLA AVENUE LOS ALTO, CA 94022</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>AREA CHURCHES TOGETHER SERVING ACTS INC</td>
<td>340 PARK AVE SW AIKEN, SC 29801</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>AREVUT INC</td>
<td>147 S WASHINGTON AVE BERGENFIELD, NJ 7621</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ARIE CROWN HEBREW DAY SCHOOL</td>
<td>4915 CONRAD ST SOKIOS, IL 60077</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ARIEL RIVKA DANCE INC</td>
<td>341 MONMOUTH ST APT 408D JERSEY CITY, NJ 73</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ARISE &amp; SHINE EVANGELISTIC ASSOCIATION INC</td>
<td>3360 SW COUNTY RD 769 ARCADIA, FL 34269</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

### 2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

### 3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>Name and address of organization or government</th>
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<th>IRC section (if applicable)</th>
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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARIZONA CENTER FOR EMPOWERMENT</td>
<td>27-2366780</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA COALITION TO END SEXUAL AND DOMESTIC</td>
<td>86-0593601</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA COMMUNITY FOUNDATION</td>
<td>86-0348306</td>
<td>501 (C) 3</td>
<td>46,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA FRIENDS OF FOSTER CHILDREN FOUNDATION</td>
<td>86-0468650</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ARIZONA HUMANE SOCIETY</td>
<td>86-0135567</td>
<td>501 (C) 3</td>
<td>107,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA KOREAN ALL NATIONALS CHURCH</td>
<td>20-3754812</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA ONCOLOGY FOUNDATION</td>
<td>27-4035615</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA OPERA COMPANY</td>
<td>23-7169261</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA STATE UNIVERSITY FOUNDATION FOR A N</td>
<td>86-6051042</td>
<td>501 (C) 3</td>
<td>80,208.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ARIZONA THEATRE COMPANY</td>
<td>86-0211777</td>
<td>501 (C) 3</td>
<td>13,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ARIZONA TRAIL ASSOCIATION</td>
<td>86-0762149</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ARIZONA VETERANS HALL OF FAME SOCIETY</td>
<td>83-0481331</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>ARIZONA VETERINARY MEDICAL FOUNDATION</td>
<td>86-0988887</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>ARK ANIMAL RESCUE &amp; ADOPTION INC</td>
<td>35-2260120</td>
<td>501 (C) 3</td>
<td>8,849</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>ARKANSAS CHILDRENS FOUNDATION</td>
<td>71-0568795</td>
<td>501 (C) 3</td>
<td>159,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>ARKANSAS COMMUNITY FOUNDATION INC</td>
<td>52-1055743</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ARKANSAS FOODBANK</td>
<td>71-0596734</td>
<td>501 (C) 3</td>
<td>33,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ARLINGTON CLUB HERITAGE FOUNDATION</td>
<td>45-3508575</td>
<td>501 (C) 3</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>ARLINGTON FOOD ASSISTANCE CENTER</td>
<td>54-1473207</td>
<td>501 (C) 3</td>
<td>42,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>ARLINGTON FREE CLINIC INC</td>
<td>54-1671883</td>
<td>501 (C) 3</td>
<td>9,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ARLINGTON STREET PEOPLE'S ASSISTANCE NETWORK</td>
<td>54-1615993</td>
<td>501 (C) 3</td>
<td>8,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10</td>
<td>ARLINGTON SYMPHONY ORCHESTRA INC</td>
<td>75-2941132</td>
<td>501 (C) 3</td>
<td>60,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>ARLINGTON THRIVE INC</td>
<td>51-0207684</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ARM IN ARM INC</td>
<td>22-3198464</td>
<td>501 (C) 3</td>
<td>47,706</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

 Attach to Form 990.

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

*OMB No. 1545-0047*

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| ARMADA EDUCATIONAL FOUNDATION  
BURK ST ARMADA, MI 48005  
38-2862495  
501 (c) 3  
25,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMANIS ANGELS INC  
80 S HIGHWAY UU COLUMBIA, MO 65203  
47-2251359  
501 (c) 3  
9,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMENIA FUND INC  
111 N JACKSON ST STE 205 GLENDALE, CA 91206  
95-4485698  
501 (c) 3  
24,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMENIAN ASSEMBLY OF AMERICA INC  
1032 15TH STREET NW SUITE 416 WASHINGTON, D  
52-1614093  
501 (c) 3  
19,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMENIAN CHURCH CHARITIES  
6624 FANNIN ST STE 2580 HOUSTON, TX 77030  
82-4404658  
501 (c) 3  
269,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMENIAN GENERAL BENEVOLENT UNION  
2495 E MOUNTAIN ST PASADENA, CA 91104  
13-5600421  
501 (c) 3  
31,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMENIAN MISSIONARY ASSOC OF AMER INC  
31 W CENTURY RD PARAMUS, NJ 7652  
13-5670954  
501 (c) 3  
33,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMER FOUNDATION FOR KIDS  
9830 S 51ST ST STE A128 PHOENIX, AZ 85044  
84-2327428  
501 (c) 3  
10,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMS CONTROL ASSOCIATION  
1200 18TH ST NW STE 1175 WASHINGTON, DC 200  
23-7124588  
501 (c) 3  
5,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMSTRONG COUNTY COMMUNITY FOUNDATION  
220 S JEFFERSON ST KITTIANNING, PA 16201  
31-1625798  
501 (c) 3  
20,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMY EMERGENCY RELIEF  
2530 CRYSTAL DR STE 13161 ARLINGTON, VA 222  
53-0196552  
501 (c) 3  
25,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| ARMY HISTORICAL FOUNDATION INC  
1775 LIBERTY DR STE 400 FORT BELVOIR, VA 222  
52-1367225  
501 (c) 3  
48,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

3. Enter total number of other organizations listed in the line 1 table:  

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
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<tr>
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<tr>
<td>1 (b)</td>
<td>EIN</td>
</tr>
<tr>
<td>1 (c)</td>
<td>IRC section (if applicable)</td>
</tr>
<tr>
<td>1 (d)</td>
<td>Amount of cash grant</td>
</tr>
<tr>
<td>1 (e)</td>
<td>Amount of non-cash assistance</td>
</tr>
<tr>
<td>1 (f)</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
</tr>
<tr>
<td>1 (g)</td>
<td>Description of noncash assistance</td>
</tr>
<tr>
<td>1 (h)</td>
<td>Purpose of grant or assistance</td>
</tr>
</tbody>
</table>

| (1) ARMY WEST POINT ATHLETIC ASSOCIATION INC | 639 HOWARD RD WEST POINT, NY 10996 | 47-4457035 | 501 (C) 3 | 27,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) AROOSTOOK ARTS AND EDUCATION CENTER | PO BOX 1252 FRESQUE ISLE, ME 4769 | 20-5036371 | 501 (C) 3 | 13,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) ARROYO SECO FOUNDATION | PO BOX 91662 PASADENA, CA 91109 | 95-4328068 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) ARUPE JESUIT HIGH SCHOOL | 4343 UTICA ST DENVER, CO 80212 | 02-0628872 | 501 (C) 3 | 37,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) ARS NOVA THEATER I INC | 511 W 54TH ST NEW YORK, NY 10019 | 80-0339038 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) ARSHA-VIDYA-PITAM | PO BOX 1059 SAYLORSBURG, PA 18353 | 94-2839344 | 501 (C) 3 | 59,103. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) ART AIDS ART | PO BOX 6483 ALTADENA, CA 91003 | 91-2199364 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) ART ENABLES | 2204 RHODE ISLAND AVE NE WASHINGTON, DC 200 | 52-2296718 | 501 (C) 3 | 8,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) ART ESCAPE | 17474 HIGHWAY 12 SONOMA, CA 95476 | 47-3626950 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) ART INSTITUTE OF CHICAGO | 111 S MICHIGAN AVE CHICAGO, IL 60603 | 36-2167725 | 501 (C) 3 | 269,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) ART LEAGUE OF HOUSTON | 1953 MONTROSE BLVD HOUSTON, TX 77006 | 74-1299166 | 501 (C) 3 | 8,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) ART OF LIVING FOUNDATION | PO BOX 2010 CUPERTINO, CA 95015 | 77-0240101 | 501 (C) 3 | 7,900. | FMV | N/A | FOR RECIPIENT'S EXEM |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

### Part II

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ART OF PROBLEM SOLVING INITIATIVE INC</td>
<td>20-1239616</td>
<td>501 (c) 3</td>
<td>1,702,958</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. ART OF THE MATTER PERFORMANCE FOUNDATION</td>
<td>94-3085133</td>
<td>501 (c) 3</td>
<td>11,111</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>3. ART OF YOGA PROJECT</td>
<td>20-2448697</td>
<td>501 (c) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>4. ART OMI INC</td>
<td>13-3641616</td>
<td>501 (c) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. ARTHRITIS FOUNDATION INC</td>
<td>1355 PEACHTREE ST NE STE 600 ATLANTA, GA 30</td>
<td>58-1341679</td>
<td>501 (c) 3</td>
<td>133,122.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. ARTHUR G JAMES CANCER HOSPITAL &amp; RICHARD J</td>
<td>31-1301428</td>
<td>501 (c) 3</td>
<td>5,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. ARTHUR MORGAN SCHOOL INC</td>
<td>56-2257100</td>
<td>501 (c) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>8. ARTISANS GUILD OF AMERICA</td>
<td>45-4541525</td>
<td>501 (c) 3</td>
<td>5,500</td>
<td>FMV</td>
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<tr>
<td>9. ARTIS-NAPLES INC</td>
<td>59-2322926</td>
<td>501 (c) 3</td>
<td>414,600</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10. ARTISTS COOPERATIVE RESIDENCY AND EXHIBITION</td>
<td>27-2325908</td>
<td>501 (c) 3</td>
<td>6,900</td>
<td>FMV</td>
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<td>11. ARTISTS FOR HUMANITY INC</td>
<td>04-3138434</td>
<td>501 (c) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. ARTISTS IN CHRISTIAN TESTIMONY</td>
<td>95-3660821</td>
<td>501 (c) 3</td>
<td>26,775</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

**Note:** For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>ARTISTS SPACE INC</td>
<td>13-2749632</td>
<td>501 (C) 3</td>
<td>83,333.</td>
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<td>ARTS &amp; BUSINESS COUNCIL OF GREATER BOSTON I</td>
<td>22-3217131</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>3</td>
<td>ARTS BASED SCHOOL</td>
<td>56-2160330</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>4</td>
<td>ARTS BUSINESS COLLABORATIVE INC</td>
<td>83-2173068</td>
<td>501 (C) 3</td>
<td>14,120.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>ARTS CENTER ASSOCIATION INC</td>
<td>59-6163303</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>6</td>
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<td>71-0398247</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>ARTS COUNCIL INCORPORATED WINSTON-SALEM ART</td>
<td>56-0526856</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>8</td>
<td>ARTS COUNCIL OF BIG SKY</td>
<td>81-0457768</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ARTS COUNCIL OF GREATER NEW HAVEN INC</td>
<td>06-6082782</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>10</td>
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<td>51-0186372</td>
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<td>11</td>
<td>ARTS COUNCIL OF PRINCETON</td>
<td>22-6108090</td>
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<td>12</td>
<td>ARTS COUNCIL OF SNOHOMISH COUNTY</td>
<td>23-7438061</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>ARTS IN THE PARK 803 WASHINGTON ST LAFORTE, IN 46350</td>
<td>32-0117698</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>ARTS PARTNERSHIP 345 WASHINGTON ST SAINT PAUL, MN 55102</td>
<td>26-2507419</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>ARTSFUND PO BOX 19780 SEATTLE, WA 98109</td>
<td>91-0839644</td>
<td>501 (C) 3</td>
<td>14,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ARVADA PRESBYTERIAN CHURCH 5592 INDEPENDENCE ST ARVADA, CO 80002</td>
<td>84-0516314</td>
<td>501 (C) 3</td>
<td>12,635</td>
<td>FMV</td>
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<td>5</td>
<td>AS 220 95 MATHEWSON ST PROVIDENCE, RI 2903</td>
<td>22-2754566</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>AS YOU SOW 2020 MILVIA ST STE 500 BERKELEY, CA 94704</td>
<td>94-3169008</td>
<td>501 (C) 3</td>
<td>121,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>ASANTE FOUNDATION 2650 SISKIUOY BLVD MEDFORD, OR 97504</td>
<td>93-6087366</td>
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<td>15,000</td>
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<td>8</td>
<td>ASAP MINISTRIES INC PO BOX 84 BERRIEN SPRINGS, MI 49103</td>
<td>38-3256028</td>
<td>501 (C) 3</td>
<td>17,200</td>
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<tr>
<td>9</td>
<td>ASBURY COLLEGE 1 MACKLEM DR WILMORE, KY 40390</td>
<td>61-0458355</td>
<td>501 (C) 3</td>
<td>80,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>ASBURY MADISON UNITED METHODIST CHURCH 6101 UNIVERSITY AVE MADISON, WI 53705</td>
<td>39-6063282</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ASBURY THEOLOGICAL SEMINARY 204 N LEXINGTON AVE WILMORE, KY 40390</td>
<td>61-0445823</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
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<td>12</td>
<td>ASBURY UNITED METHODIST CHURCH 205 S MAIN ST HARRISONBURG, AL 35242</td>
<td>56-0519596</td>
<td>501 (C) 3</td>
<td>7,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. ASBURY UNITED METHODIST CHURCH</td>
<td>6690 CANABA VALLEY RD BIRMINGHAM, AL 35758</td>
<td>63-0954649</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2. ASBURY UNITED METHODIST CHURCH</td>
<td>980 HUGHES RD MADISON, VA 22801</td>
<td>63-0920911</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. ASBURY UNITED METHODIST CHURCH, INC. - TULS</td>
<td>6767 SOUTH MINGO ROAD TULSA, OK 74133</td>
<td>73-0728230</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4. ASCENSION</td>
<td>808 S EAST AVE OAK PARK, IL 60304</td>
<td>36-2170796</td>
<td>501 (C) 3</td>
<td>11,788.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5. ASCENSION EPISCOPAL CHURCH</td>
<td>215 4TH ST N STILLWATER, MN 55082</td>
<td>41-0694753</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. ASCENSION EVANGELICAL LUTHERAN CHURCH</td>
<td>7100 N MOCKINGBIRD LN PARADISE VALLEY, AZ 8</td>
<td>86-0148330</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. ASCENSION LUTHERAN CHURCH</td>
<td>26231 SILVER SPRD RD ROLLING HILLS ESTATES,</td>
<td>95-2409232</td>
<td>501 (C) 3</td>
<td>9,200.</td>
<td>FMV</td>
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<td>8. ASCENSION LUTHERAN CHURCH &amp; SCHOOL</td>
<td>1600 E HILLCREST DR THOUSAND OAKS, CA 91362</td>
<td>85-2243400</td>
<td>501 (C) 3</td>
<td>14,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9. ASCENT SOCCER USA</td>
<td>722 N 4TH ST SEATTLE, WA 98103</td>
<td>82-3614231</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10. ASCENT-INNER DIMENSIONS OF JEWISH LIFESTYLE</td>
<td>C/O HOROWITZ 1436 PRESIDENT STREET BROOKLYN</td>
<td>11-2879462</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<td>11. ASCUTNEY UNION CHURCH INC</td>
<td>5243 RTE 5 ASCUTNEY, VT 5030</td>
<td>03-0225942</td>
<td>501 (C) 3</td>
<td>19,560.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12. ASEMPBO SKILLS FOR HOPE INC</td>
<td>2058 MAPLE AVE APT V2-5 HATFIELD, PA 19440</td>
<td>85-2725258</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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Schedule I (Form 990) 2020

JSA  
OE1288 1.000

18674H 1467 V 20-7.21
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</tr>
</thead>
</table>
| 1. **ASHA FOR EDUCATION**  
   340 S LEMON AVE # 2742 WALNUT, CA 91789 | 77-0459884 | 501 (C) 3 | 50,001. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2. **ASHA-JYOTHI**  
   13760 HENRY FOND CT CHANTILLY, VA 20151 | 02-0658463 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3. **ASHAWAY FREE LIBRARY**  
   PO BOX 70 ASHAWAY, RI 2804 | 05-0274531 | 501 (C) 3 | 8,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4. **ASHESI UNIVERSITY FOUNDATION**  
   1201 3RD AVE STE 2200 SEATTLE, WA 98101 | 91-1997089 | 501 (C) 3 | 21,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5. **ASHEVILLE CHRISTIAN ACADEMY INC**  
   PO BOX 1089 SWANNANOA, NC 28778 | 56-0889168 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6. **ASHEVILLE COMMUNITY YOGA CENTER**  
   8 BROOKDALE RD SUITE A ASHEVILLE, NC 28804 | 37-1636382 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7. **ASHEVILLE GREENWORKS**  
   2 SULPHUR SPRINGS RD ASHEVILLE, NC 28806 | 56-1672870 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8. **ASHEVILLE HUMANE SOCIETY INC**  
   14 FOREVER FRIEND LN ASHEVILLE, NC 28806 | 56-1444098 | 501 (C) 3 | 22,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9. **ASHEVILLE SCHOOL INCORPORATED**  
   360 ASHEVILLE SCHOOL RD ASHEVILLE, NC 28806 | 56-0530248 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10. **ASHEVILLE-BUNCOMBE COMMUNITY CHRISTIAN MINI**  
   20 20TH ST ASHEVILLE, NC 28806 | 56-0945001 | 501 (C) 3 | 22,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11. **ASHEVILLE-BUNCOMBE TECHNICAL COMMUNITY COLL**  
   340 VICTORIA RD ASHEVILLE, NC 28801 | 56-1993458 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12. **ASHLAND EMERGENCY FOOD BANK**  
   PO BOX 3578 ASHLAND, OR 97520 | 93-1329669 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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## Part I  General Information on Grants and Assistance

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## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) ASHLAND EVANGELICAL PRESBYTERIAN CHURCH</td>
<td>22-2327332</td>
<td>501 (C) 3</td>
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<td>(2) ASHLAND PRODUCTIONS INC</td>
<td>32-0122026</td>
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<td>(4) ASHORA</td>
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<td>(5) ASHREINU SCHOOL FOR GIRLS INC</td>
<td>46-1497066</td>
<td>501 (C) 3</td>
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<td>(6) ASHUELOT CONCERTS</td>
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<td>(11) ASIAN AMERICAN PACIFIC ISLANDER LEADERS FOR</td>
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<td>(12) ASIAN AMERICAN RESOURCE WORKSHOP INC</td>
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<td>FMV</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>ASIAN AMERICANS ADVANCING JUSTICE -AAJC INC</td>
<td>1620 L ST NW STR 1050 WASHINGTON, DC 20036</td>
<td>13-3619000 501 (C) 3</td>
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<td>ASIAN AMERICANS ADVANCING JUSTICE ATLANTA I</td>
<td>5860 OAKBROOK PKWY NORCROSS, GA 30093</td>
<td>27-2577567 501 (C) 3</td>
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<td>1145 WILSHIRE BLVD FL 2 LOS ANGELES, CA 900</td>
<td>95-3854152 501 (C) 3</td>
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<td>ASIAN AMERICANS ADVANCING JUSTICE-ASIAN LAW</td>
<td>55 COLUMBUS AVE SAN FRANCISCO, CA 94111</td>
<td>94-2176139 501 (C) 3</td>
<td>41,700.00</td>
<td>FMV</td>
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<td>ASIAN AND PACIFIC ISLANDER AMERICAN SCHOLAR</td>
<td>2025 M ST NW STE 610 WASHINGTON, DC 20036</td>
<td>57-1192973 501 (C) 3</td>
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<td>03-0575412 501 (C) 3</td>
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<td>200 LARKIN ST SAN FRANCISCO, CA 94102</td>
<td>94-1704765 501 (C) 3</td>
<td>207,500.00</td>
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<tr>
<td>ASIAN BUSINESS INSTITUTE AND RESOURCE CENTER</td>
<td>135 N FRUIT AVE FREMONT, CA 93315</td>
<td>26-1988976 501 (C) 3</td>
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<td>ASIAN CULTURAL COUNCIL INC</td>
<td>475 RIVERSIDE DR MM 900 NEW YORK, NY 10115</td>
<td>13-3018822 501 (C) 3</td>
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<td>ASIAN HEALTH SERVICES</td>
<td>818 WEBSTER ST OAKLAND, CA 94607</td>
<td>94-2235908 501 (C) 3</td>
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<td>426 17TH ST STE 500 OAKLAND, CA 94612</td>
<td>94-3261846 501 (C) 3</td>
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<td>ASIAN PACIFIC FUND</td>
<td>465 CALIFORNIA ST STE 809 SAN FRANCISCO, CA</td>
<td>94-3201522 501 (C) 3</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) ASIAN UNIVERSITY FOR WOMEN -AUNW SUPPORT FO</td>
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<td>(12) ASSEMBLY Mennonite Church INC</td>
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<td>FMV</td>
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<td>727 NEW YORK ST GOSHEN, IN 46526</td>
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</tr>
</tbody>
</table>

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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>ASSEMBLY OF GOD CALVARY MISSION CHURCH</td>
<td>8700 STANTON AVE BUENA PARK, CA 90620</td>
<td>95-3785967</td>
<td>501 (C) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>83-1215288</td>
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<td>18,407.</td>
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<td>ASSIST CRISIS PREGNANCY CENTER</td>
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<td>54-15400093</td>
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<td>6,000.</td>
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<td>ASSISTANCE DOGS OF HAWAII</td>
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<td>99-0353694</td>
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<td>10,000.</td>
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<td>ASSISTANCE LEAGUE OF PASADENA</td>
<td>820 E CALIFORNIA BLVD PASADENA, CA 91106</td>
<td>95-1891341</td>
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<td>11,000.</td>
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<td>7</td>
<td>ASSISTING CHRISTIAN INDIVIDUALS INT</td>
<td>PO BOX 1131 CLIFTON, CO 81520</td>
<td>83-0464962</td>
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<td>7,200.</td>
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<td>8</td>
<td>ASSOCIATED ALUMNI OF THE CENTRAL HIGH SCHOOL</td>
<td>PO BOX 26580 PHILADELPHIA, PA 19141</td>
<td>23-1618008</td>
<td>501 (C) 3</td>
<td>1,203,000.</td>
<td>FMV</td>
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<td>9</td>
<td>ASSOCIATED BETH RYVA SCHOOL FOR GIRLS INC</td>
<td>310 CROWN ST BROOKLYN, NY 11225</td>
<td>11-2163504</td>
<td>501 (C) 3</td>
<td>11,432.</td>
<td>FMV</td>
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<td>ASSOCIATED CATHOLIC CHARITIES INC</td>
<td>23008 DUNIANY VALELY RD TIMONIUM, MD 21093</td>
<td>52-0591538</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>ASSOCIATED JEWISH CHARITIES OF BALTIMORE</td>
<td>101 W MOUNT ROYAL AVE BALTIMORE, MD 21201</td>
<td>52-6024192</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ASSOCIATED JEWISH COMMUNITY FEDERATION OF B</td>
<td>101 W MOUNT ROYAL AVE BALTIMORE, MD 21201</td>
<td>52-0607957</td>
<td>501 (C) 3</td>
<td>16,885.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASSOCIATED MINISTRIES OF TACOMA-PIERCE COUN</td>
<td>901 S 13TH ST TACOMA, WA 98405</td>
<td>91-0847534</td>
<td>501 (c) 3</td>
<td>6,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR COMPUTING MACHINERY</td>
<td>1601 BROADWAY 10TH FL NEW YORK NY 10121-07</td>
<td>13-1921358</td>
<td>501 (c) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR CULTURAL INTERCHANGE INC</td>
<td>420 LEXINGTON AVE RM 300 NEW YORK, NY 10170</td>
<td>52-6054124</td>
<td>501 (c) 3</td>
<td>146,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR INDIA'S DEVELOPMENT INC</td>
<td>5011 TECUMSEH ST COLLEGE PARK, MD 20740</td>
<td>04-3652609</td>
<td>501 (c) 3</td>
<td>143,201.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR SLAVIC EAST EUROPEAN AND EU</td>
<td>315 S BELLEFIELD AVE # 203C PITTSBURGH, PA</td>
<td>31-0785029</td>
<td>501 (c) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR THE COLONIAL THEATER</td>
<td>227 BRIDGE ST PHOENIXVILLE, PA 19460</td>
<td>23-2846336</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR THE PRESERVATION OF THE ENO</td>
<td>4404 GUESS RD DURHAM, NC 27712</td>
<td>56-1134204</td>
<td>501 (c) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION FOR WOMEN IN SCIENCE INC</td>
<td>PO BOX 6083 SAN MATEO, CA 94403</td>
<td>27-0955566</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION OF AMERICAN RHODES SCHOLARS</td>
<td>8229 BOONE BLVD STE 240 VIENNA, VA 22182</td>
<td>84-1718491</td>
<td>501 (c) 3</td>
<td>7,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION OF BAPTISTS FOR WORLD EVANGELIS</td>
<td>522 LEWISBERRY RD NEW CUMBERLAND, PA 17070</td>
<td>23-1445623</td>
<td>501 (c) 3</td>
<td>72,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION OF CHINESE AMERICANS INC</td>
<td>32585 CONCORD DR MADISON HEIGHTS, MI 48071</td>
<td>38-2809409</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ASSOCIATION OF COMMUNITY LIVING AGENCIES INC</td>
<td>28 CORPORATE DR HALFWOOD, NY 12065</td>
<td>11-2646820</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ASSOCIATION OF FATIMA JINNAH OLD GRADUATES</td>
<td>4446-1A HENDRICKS AVE STE 245 JACKSONVILLE,</td>
<td>84-1994004</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) ASSOCIATION OF FORMER STUDENTS OF TEXAS A &amp;</td>
<td>505 GEORGE BUSH DR COLLEGE STATION, TX 7784</td>
<td>74-0490865</td>
<td>501 (C) 3</td>
<td>6,510.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) ASSOCIATION OF GRADUATES OF THE UNITED STAT</td>
<td>698 MILLS RD WEST POINT, NY 10996</td>
<td>14-1260763</td>
<td>501 (C) 3</td>
<td>578,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) ASSOCIATION OF MARSHALL SCHOLARS INC</td>
<td>12 DUNSTABLE RD CAMBRIDGE, MA 2138</td>
<td>22-2973653</td>
<td>501 (C) 3</td>
<td>360,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) ASSOCIATION OF RELIGIOUS COMMUNITIES INC</td>
<td>24 DELAY ST STE 4 DANBURY, CT 6810</td>
<td>06-0942514</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) ASSOCIATION OF THE MIRACULOUS MEDAL</td>
<td>1811 WEST SAINT JOSEPH STREET PERRYVILLE, M</td>
<td>43-0673516</td>
<td>501 (C) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) ASSOCIATION TO BENEFIT CHILDREN</td>
<td>419 E 86TH ST NEW YORK, NY 10028</td>
<td>13-3303089</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) ASSUMPTION COLLEGE FOR SISTERS</td>
<td>200 A MORRIS AVENUE DENVILLE, NJ 7834</td>
<td>52-1318258</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) ASSUMPTION OF THE BLESSED VIRGIN MARY CHURC</td>
<td>300 STATE RD WEST GROVE, PA 19390</td>
<td>23-1401549</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) ASSURE WOMENS CENTER</td>
<td>6510 SORESENDF PKW OMAHA, NE 68152</td>
<td>47-0700371</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) ASTRAL ARTISTS INC</td>
<td>1500 WALNUT ST STE 413 PHILADELPHIA, PA 191</td>
<td>23-2654833</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) ASTRONAUT SCHOLARSHIP FOUNDATION INC</td>
<td>651 DAVENILE DR ORLANDO, FL 32825</td>
<td>59-2449775</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Method of valuation</th>
<th>6 (f) Description of noncash assistance</th>
<th>7 (g) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. ASYLUM ACCESS  
  555 12TH ST 5TH FL OAKLAND, CA 94607  
  20-3642040  
  501 (c) 3  
  75,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 2. AT THE CROSSROADS  
  167 JESSIE ST SAN FRANCISCO, CA 94105  
  27-2603924  
  501 (c) 3  
  16,500.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 3. ATAXIA TELANGIECTASIA CHILDREN'S PROJECT INC  
  6810 N STATE ROAD 7 STE 125 COCONUT CREEK, FL 33063  
  65-0427215  
  501 (c) 3  
  10,500.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 4. ATERES MECHOEL INC  
  5 DITMAS AVE BROOKLYN, NY 11218  
  22-3140720  
  501 (c) 3  
  52,600.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 5. ATGLEN PUBLIC LIBRARY  
  PO BOX 190 ATGLEN, PA 19310  
  23-2492037  
  501 (c) 3  
  30,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 6. ATHENS BIBLE SCHOOL  
  700 US HIGHWAY 31 N ATHENS, AL 35611  
  63-0366655  
  501 (c) 3  
  7,500.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 7. ATHENS CHURCH  
  PO BOX 80271 ATHENS, GA 30608  
  20-1444886  
  501 (c) 3  
  63,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 8. ATHENS LAND TRUST INC  
  685 N POPE ST ATHENS, GA 30601  
  58-2154133  
  501 (c) 3  
  25,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 9. ATHEY CREEK CHRISTIAN FELLOWSHIP  
  2700 SW EX RD WEST LINN, OR 97068  
  93-1202956  
  501 (c) 3  
  6,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 10. ATHLETES AND CAUSES INC  
  12551 FRANKLIN RD THONOTOSASSA, FL 33592  
  47-2377003  
  501 (c) 3  
  15,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 11. ATHLETES IN ACTION SPORTS COMPLEX AND RETREAT  
  651 TAYLOR DR XENIA, OH 45385  
  27-0869839  
  501 (c) 3  
  6,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |
| 12. ATLANTA BALLET INCORPORATED  
  1695 MARIETTA BLVD NW ATLANTA, GA 30318  
  58-1047798  
  501 (c) 3  
  70,000.  
  FMV  
  N/A  
  FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1. Name and address of organization or government
   - ATLANTA BOTANICAL GARDEN INC
     - 1345 FIDDMONT AVE NE ATLANTA, GA 30309
     - EIN: 58-1313284
     - IRC section: 501 (c) 3
     - Amount of cash grant: $13,000
     - Method of valuation: FMV
     - Description of noncash assistance: N/A
     - Purpose of grant or assistance: FOR RECIPIENT'S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...  
   - 18674H  
   - 1467 V  
   - 20-7.21

3. Enter total number of other organizations listed in the line 1 table...  
   - 18674H  
   - 1467 V  
   - 20-7.21

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

Schedule I (Form 990) 2020
## Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ATLANTA RONALD MCDONALD HOUSE CHARITIES INC</td>
<td>58-1295754</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>ATLANTA SPEECH SCHOOL INC</td>
<td>58-0566198</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>ATLANTA UNION MISSION CORPORATION HCSR</td>
<td>58-0572430</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>ATLANTA URBAN SQUASH INC</td>
<td>46-4750786</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>ATLANTA WESTSIDE PRESBYTERIAN CHURCH</td>
<td>26-1165077</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>ATLANTA WOMENS FOUNDATION INC</td>
<td>58-2389721</td>
<td>501 (C) 3</td>
<td>52,911.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>ATLANTA YOUTH ACADEMIES FOUNDATION INC</td>
<td>58-2554519</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>ATLANTA-FULTON COUNTY ZOO INC</td>
<td>58-1655184</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>ATLANTIC CLASSICAL ORCHESTRA INC</td>
<td>65-0307858</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>ATLANTIC COUNCIL OF THE U S INC</td>
<td>52-0742294</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>ATLANTIC LEGAL FOUNDATION</td>
<td>23-2022920</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>ATLANTIC STREET CENTER</td>
<td>41-0568710</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATLANTIC THEATER COMPANY 336 W 20TH ST NEW YORK, NY 10011</td>
<td>13-3218253</td>
<td>501 (C) 3</td>
<td>26,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ATLAS ECONOMIC RESEARCH FOUNDATION 4075 WILSON BLVD STE 310 ARLINGTON, VA 22202</td>
<td>94-2763845</td>
<td>501 (C) 3</td>
<td>772,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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<td>ATLAS MINISTRY INC 1560 S MAIN ST GREENSBORO, GA 30642</td>
<td>51-0561091</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ATONEMENT LUTHERAN CHURCH - WYOMISSING, PA 5 WYOMISSING BOULEVARD WYOMISSING, PA 19610</td>
<td>23-1484142</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ATONEMENT LUTHERAN CHURCH OF BOULDER, COLORADO 685 INCA PKWY BOULDER, CO 80303</td>
<td>84-0578970</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ATRIUM HEALTH FOUNDATION PO BOX 32861 CHARLOTTE, NC 28232</td>
<td>56-6060481</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ATRIUM SCHOOL INC 69 GROVE ST WATERTOWN, MA 2472</td>
<td>04-2768241</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ATTAIN HOUSING 125 STATE ST S KIRKLAND, WA 98033</td>
<td>91-1481848</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUBURN GRACE COMMUNITY CHURCH PO BOX 6446 AUBURN, CA 95604</td>
<td>94-2842590</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUBURN THEOLOGICAL SEMINARY 475 RIVERSIDE DRIVE, SUITE 1800 NEW YORK, NY 10023</td>
<td>15-0532053</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUBURN UNIVERSITY FOUNDATION 317 S COLLEGE ST AUBURN UNIVERSITY, AL 36849</td>
<td>63-6022422</td>
<td>501 (C) 3</td>
<td>368,832.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUDIO &amp; BRAILLE LITERACY ENHANCEMENT, INC. CENTRAL LIBRARY BUILDING 803 WEST WELLS ST</td>
<td>39-1593301</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>AUDUBON KIDS ZONE INC</strong>&lt;br&gt;PO BOX 2057 HENDERSON, KY 42419</td>
<td>81-1166593</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td></td>
<td>FMV</td>
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<tr>
<td>2</td>
<td><strong>AUDUBON NATURALIST SOCIETY OF THE CENTRAL A</strong>&lt;br&gt;8940 JONES MILL RD CHEVY CHASE, MD 20815</td>
<td>53-0233715</td>
<td>501 (c) 3</td>
<td>52,500.</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td><strong>AUDUBON SOCIETY OF NEW YORK STATE INC</strong>&lt;br&gt;120 DEFREEST DR TROY, NY 12180</td>
<td>14-1698061</td>
<td>501 (c) 3</td>
<td>7,200.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td><strong>AUGSBURG LUTHERAN CHURCH</strong>&lt;br&gt;845 WEST 5TH STREET WINSTON-SALEM, NC 27101</td>
<td>56-6021786</td>
<td>501 (c) 3</td>
<td>18,500.</td>
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<td>5</td>
<td><strong>AUGSBURG UNIVERSITY</strong>&lt;br&gt;2211 RIVERSIDE AVE MINNEAPOLIS, MN 55454</td>
<td>41-0694721</td>
<td>501 (c) 3</td>
<td>201,500.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td><strong>AUGUSTA UNIVERSITY RESEARCH INSTITUTE INC</strong>&lt;br&gt;1120 15TH ST AUGUSTA, GA 30912</td>
<td>58-1418202</td>
<td>501 (c) 3</td>
<td>10,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td><strong>AUGUSTANA COLLEGE</strong>&lt;br&gt;639 38TH ST ROCK ISLAND, IL 61201</td>
<td>36-2166962</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td><strong>AUGUSTANA EVANGELICAL LUTHERAN CHURCH</strong>&lt;br&gt;2100 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20</td>
<td>53-0204709</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td><strong>AUGUSTINE INSTITUTE INC</strong>&lt;br&gt;6160 S SYRACUSE WAY STE 310 GREENWOOD VILLA</td>
<td>20-2349108</td>
<td>501 (c) 3</td>
<td>1,041,850.</td>
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<tr>
<td>10</td>
<td><strong>AUSBAL ARTISAN VILLAGE</strong>&lt;br&gt;219 E MICHIGAN AVE GRAYLING, MI 49738</td>
<td>27-2182086</td>
<td>501 (c) 3</td>
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<tr>
<td>11</td>
<td><strong>AUSBAL CLUB PRESERVATION FOUNDATION</strong>&lt;br&gt;137 AUSBAL RD KEENE VALLEY, NY 12943</td>
<td>20-3719078</td>
<td>501 (c) 3</td>
<td>6,000.</td>
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<td>FMV</td>
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<td>12</td>
<td><strong>AUSBAL SARGENT LAND PRESERVATION TRUST</strong>&lt;br&gt;PO BOX 2040 NEW LONDON, NH 3257</td>
<td>22-2884768</td>
<td>501 (c) 3</td>
<td>118,289.</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>AUSCHWITZ-BIRKENAU MEMORIAL FOUNDATION</td>
<td>46-1411164</td>
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<td>2</td>
<td>AUSTIN AREA ART FROM THE STREETS</td>
<td>30-0705692</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>AUSTIN AREA URBAN LEAGUE INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>AUSTIN CLASSICAL GUITAR SOCIETY</td>
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<td>5</td>
<td>AUSTIN COMMUNITY FOUNDATION</td>
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<td>8</td>
<td>AUSTIN FRIARS ORDER OF ST AUGUSTINE</td>
<td>23-1600614</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>AUSTIN HABITAT FOR HUMANITY INC</td>
<td>74-2373217</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
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<td>10</td>
<td>AUSTIN LYRIC OPERA</td>
<td>74-2390496</td>
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<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>AUSTIN PETS ALIVE</td>
<td>74-2893360</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>AUSTIN SYMPHONY ORCHESTRA SOCIETY</td>
<td>74-6000068</td>
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<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>AUSTRIN TRINITY SCHOOL 3901 BEE CAVES RD WEST LAKE HILLS, TX 78746</td>
<td>74-2918235</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>AUSTINS HOUSE PO BOX 784 MINDEN, NV 89423</td>
<td>03-0533503</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>AUTISM DELAWARE INC 924 OLD HARMONY RD STE 201 NEWARK, DE 19713</td>
<td>20-2110190</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUTISM SCIENCE FOUNDATION 3 CONTINENTAL RD SCARSDALE, NY 10583</td>
<td>26-4522309</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUTISM SOCIETY SAN DIEGO INC 4699 MURPHY CANYON RD SAN DIEGO, CA 92123</td>
<td>93-1132987</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUTISM SPEAKS INC 1060 STATE RD STE 2 PRINCETON, NJ 8540</td>
<td>20-2329938</td>
<td>501 (C) 3</td>
<td>510,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AUTISTIC SELF ADVOCACY NETWORK PO BOX 66122 WASHINGTON, DC 20035</td>
<td>26-1270198</td>
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<td>16,000</td>
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<tr>
<td>AUTUMN RIDGE CHURCH 4700 WESTERN HERITAGE WAY LOS ANGELES, CA 95</td>
<td>85-3947744</td>
<td>501 (C) 3</td>
<td>46,000</td>
<td>FMV</td>
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<tr>
<td>AVADHUTA FOUNDATION 3611 SALEM RD SW ROCHESTER, MN 55902</td>
<td>47-0721677</td>
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<td>AVAIL NYC PO BOX 296 BOULDER, CO 80306</td>
<td>84-1465779</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>AVE MARIA SCHOOL OF LAW 115 W 45TH ST FL 4 NEW YORK, NY 10036</td>
<td>13-3771206</td>
<td>501 (C) 3</td>
<td>35,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>1025 COMMONS CIR NAPLES, FL 34119</td>
<td>38-3519708</td>
<td>501 (C) 3</td>
<td>24,000</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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

**SCHEDULE I (Form 990)**

**Department of the Treasury**

**Internal Revenue Service**

**Name of the organization**

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

**23-2888152**

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - ![Yes](yes_icon)
   - ![No](no_icon)

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) AVE MARIA UNIVERSITY INC</td>
<td>5050 AVE MARIA BLVD AVE MARIA, FL 34142</td>
<td>03-0482006 501 (C) 3</td>
<td>25,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) AVENIDAS</td>
<td>450 BRYANT ST PALO ALTO, CA 94301</td>
<td>94-1480548 501 (C) 3</td>
<td>19,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) AVENUE OF LIFE INC</td>
<td>PO BOX 34495 KANSAS CITY, MO 64116</td>
<td>46-2526799 501 (C) 3</td>
<td>35,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) AVENUES FOR JUSTICE INC</td>
<td>100 CENTRE ST RM 1541 NEW YORK, NY 10013</td>
<td>13-3267496 501 (C) 3</td>
<td>92,500. FMV</td>
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<tr>
<td>(5) AVERY COONLEY SCHOOL</td>
<td>1400 MAPLE AVE DOWNERS GROVE, IL 60515</td>
<td>36-2171680 501 (C) 3</td>
<td>110,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) AVIGDORS HELPING HAND INC</td>
<td>13945 78TH DR FLUSHING, NY 11367</td>
<td>59-3829893 501 (C) 3</td>
<td>7,300. FMV</td>
<td>N/A</td>
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<tr>
<td>(7) AVIV HA TORAH</td>
<td>5151 BELT LINE RD DALLAS, TX 75254</td>
<td>27-4662430 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) AVODAH THE JEWISH SERVICE CORPS INC</td>
<td>125 MAIDEN LN RM 88 NEW YORK, NY 10038</td>
<td>13-3914342 501 (C) 3</td>
<td>6,300. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) AVON THEATRE FILM CENTER INC</td>
<td>8 SOUND SHORE DR GREENWICH, CT 6830</td>
<td>90-0060073 501 (C) 3</td>
<td>6,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) AVOW FOUNDATION INC</td>
<td>1095 WHIPPOORWILL LN NAPLES, FL 34105</td>
<td>46-5736467 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11) AVOW HOSPICE INC</td>
<td>1095 WHIPPOORWILL LN NAPLES, FL 34105</td>
<td>59-2201250 501 (C) 3</td>
<td>56,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) AWARENESS SOCIETY A NEW JERSEY NONPROFIT CO</td>
<td>PO BOX 219 FMB 137 DUVALL, WA 98019</td>
<td>22-3190778 501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) 2020**
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Completed if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>AWBURY ARBORETUM ASSOCIATION INC</td>
<td>22-2614286</td>
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<td>1 AWBURY RD PHILADELPHIA, PA 19138</td>
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<td>AYCO CHARITABLE FOUNDATION</td>
<td>14-1782466</td>
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<td>100 COLISEUM DR COHOES, NY 12047</td>
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<td>AYN RAND INSTITUTE THE CENTER FOR THE ADVANCE</td>
<td>22-2570926</td>
<td>501 (C) 3</td>
<td>662,000.</td>
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<tr>
<td>6 HUTTON CENTRE DR STE 600 SANTA ANA, CA 92</td>
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<td>AYURVEDIC INSTITUTE</td>
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<td>11311 MENAUL BLVD NE ALBUQUERQUE, NM 87112</td>
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<td>501 (C) 3</td>
<td>6,389.</td>
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<td>6301 MONTROSE RD ROCKVILLE, MD 20852</td>
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<td>B STRONG FUND INC</td>
<td>85-0807163</td>
<td>501 (C) 3</td>
<td>55,000.</td>
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<td>470 ATLANTIC AVE STE 301 BOSTON, MA 2210</td>
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<td>B U I L D INCORPORATED</td>
<td>23-7022085</td>
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<td>5100 W HARRISON ST CHICAGO, IL 60644</td>
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<td>20 SUNNYSIDE AVE STE F MILL VALLEY, CA 9494</td>
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<td>BAMSON COLLEGE</td>
<td>04-2103544</td>
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<td>19,500.</td>
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<td>231 FOREST STREET ROOM 161 NIC WELLESLEY, M</td>
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<td>BABY FOLD</td>
<td>37-0673453</td>
<td>501 (C) 3</td>
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<td>108 E WILLOW ST NORMAL, IL 61761</td>
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<td>BACH CHOIR OF BETHLEHEM</td>
<td>24-0795385</td>
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<td>44,000.</td>
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<tr>
<td>440 HECKEWELDER PL BETHLEHEM, PA 18018</td>
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<td>BACK 2 BACK MINISTRIES INC</td>
<td>31-1468516</td>
<td>501 (C) 3</td>
<td>52,100.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 70 MASON, OH 45040</td>
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**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>BACK BAY MISSION 1012 DIVISION ST BILOXI, MS 39530</td>
<td>64-0431066</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BACK ON MY FEET 100 S BROAD ST STE 2136 PHILADELPHIA, PA 19</td>
<td>26-2109809</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BACKBAY THERAPEUTIC RIDING CLUB INC 20262 SW CYPRESS ST NEWPORT BEACH, CA 92660</td>
<td>20-5773475</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BADGER INSTITUTE INC 700 W VIRGINIA ST MILWAUKEE, WI 53204</td>
<td>39-1592727</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAHAI HUQQULLAH TRUST 1233 CENTRAL ST EVANSTON, IL 60201</td>
<td>36-3297839</td>
<td>501 (C) 3</td>
<td>1,784,018.</td>
<td>FMV</td>
<td>N/A</td>
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<td>BAHAMA BAPTIST CHURCH 7917 WILLARDVILLE STATION RD BAHAMA, NC 27</td>
<td>56-1456853</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAIL PROJECT INC PO BOX 750 VENICE, CA 90294</td>
<td>81-4985512</td>
<td>501 (C) 3</td>
<td>1,405,058.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAINBRIDGE ISLAND LAND TRUST 147 FINCH PL SW BAINBRIDGE ISLAND, WA 98110</td>
<td>91-1439338</td>
<td>501 (C) 3</td>
<td>515,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>BAINBRIDGE ISLAND MUSEUM OF ART 550 WINISLOW WAY E BAINBRIDGE ISLAND, WA 981</td>
<td>27-0183255</td>
<td>501 (C) 3</td>
<td>87,000.</td>
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<tr>
<td>BAINBRIDGE ISLAND PARKS FOUNDATION PO BOX 11127 BAINBRIDGE ISLAND, WA 98110</td>
<td>91-1855049</td>
<td>501 (C) 3</td>
<td>37,800.</td>
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<tr>
<td>BAINBRIDGE ISLAND ROWING CLUB 22 WINISLOW WAY W STE 102 BAINBRIDGE ISLAND</td>
<td>91-2101122</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BAIS CHABAD 5595 WEST MAPLE ROAD WEST BLOOMFIELD, MI 48</td>
<td>38-2388299</td>
<td>501 (C) 3</td>
<td>5,843.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>BAIS MEDRASH LAVREICHEM INC</td>
<td>46-0932109</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>2</td>
<td>BAIS MEDRASH MAYAN HATORAH INC</td>
<td>20-2925281</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
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<td>4</td>
<td>BAIS MEDRASH TOLDOS YEHUDA INC</td>
<td>81-3321805</td>
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<td>FMV</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>6</td>
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<td>BAKASHANA</td>
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<td>FMV</td>
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<td>BAKERSFIELD HOMELESS CENTER</td>
<td>95-2858936</td>
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<td>BALDWIN SCHOOL</td>
<td>23-1352619</td>
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<td>12</td>
<td>BALDWIN WALLACE UNIVERSITY</td>
<td>36-0714629</td>
<td>501 (C) 3</td>
<td>34,200.</td>
<td>FMV</td>
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Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>BALTIMORE SYMPHONY ORCHESTRA INC</td>
<td>52-0629696</td>
<td>501 (C) 3</td>
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<td>2</td>
<td>BALTIMORE URBAN BASEBALL ASSOCIATION</td>
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<td>BALTIMORE YEARLY MEETING OF THE RELIGIOUS S</td>
<td>52-0856309</td>
<td>501 (C) 3</td>
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<td>4</td>
<td>BANANAS INCORPORATED</td>
<td>5232 CLAREMONT AVE OAKLAND, CA 94618</td>
<td>501 (C) 3</td>
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<td>5</td>
<td>BANDERA CANYONLANDS ALLIANCE</td>
<td>32-0241394</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>6</td>
<td>BANG ON A CAN INC</td>
<td>80 HANSON FL ST 301 BROOKLYN, NY 11217</td>
<td>501 (C) 3</td>
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<td>7</td>
<td>BANGOR YOUNG MENS CHRISTIAN ASSOCIATION</td>
<td>01-0211485</td>
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<td>8</td>
<td>BANK OF AMERICA CHARITABLE GIFT FUND</td>
<td>04-6010342</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>BANK STREET COLLEGE OF EDUCATION</td>
<td>13-5562167</td>
<td>501 (C) 3</td>
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<td>10</td>
<td>BANKS COUNTY FAMILY CONNECTION INC</td>
<td>47-2021789</td>
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<tr>
<td>11</td>
<td>BANNER ALZHEIMERS FOUNDATION</td>
<td>2901 N CENTRAL AVE STE 160 PHOENIX, AZ 8501</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>BANNER COMMUNICATIONS INC</td>
<td>14260 W NEWBERRY RD # 242 NEWBERRY, FL 3266</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>BANNER LAKE CLUB INC PO BOX 1875 HOBE SOUND, FL 33475 59-1093236 501 (C) 3 500,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPS ENDOWMENT INC 81 SUTTONS LN PISCATAWAY, NJ 08854 20-2889249 501 (C) 3 147,904. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST CHURCH OF BEAUFORT 601 CHARLES ST BEAUFORT, SC 29902 46-3939675 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST FOUNDATION OF TEXAS 1717 MAIN ST STE 1400 DALLAS, TX 75201 75-0891441 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST GLOBAL RESPONSE INC 402 BNA DR STE 411 NASHVILLE, TN 37217 20-8409511 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST HEALTH SOUTH FLORIDA FOUNDATION INC 6855 RED ROAD STE 600 CORAL GABLES, FL 3314 59-1923401 501 (C) 3 107,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST HEALTH SYSTEM FOUNDATION INC 1660 PRUDENTIAL DR STE 203 JACKSONVILLE, FL 59-2487135 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST MEDICAL &amp; DENTAL MISSION INTERNATIONAL 11 PLAHA DR HATTIESBURG, MS 39402 64-0811705 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>BAPTIST MID MISSIONS FOUNDATION INC 7749 WEBSTER RD BM CLEVELAND, OH 44130 45-2782288 501 (C) 3 12,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAR HARBOR HISTORICAL SOCIETY INC 127 WEST ST BAR HARBOR, ME 4609 01-0342596 501 (C) 3 100,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>1. BAR ILAN UNIVERSITY IN ISRAEL</td>
<td>13-6192275</td>
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<tr>
<td>2. BARABOO FOOD PANTRY INC</td>
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<tr>
<td>3. BARACK H OBAMA FOUNDATION</td>
<td>26-2461343</td>
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<tr>
<td>4. BARBARA BELLE ASH DOUGAN FOUNDATION - WOMEN</td>
<td>46-0556386</td>
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<td>5. BARBARA BUSH HOUSTON LITERACY FOUNDATION</td>
<td>46-5037878</td>
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<tr>
<td>6. BARBERTON COMMUNITY FOUNDATION</td>
<td>34-1846432</td>
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<td>7. BARD COLLEGE</td>
<td>14-1713034</td>
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<td>FMV</td>
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<td>8. BAREFOOT REPUBLIC INC</td>
<td>62-1841336</td>
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<td>9. BARN ARTS CENTER FOR THE ARTS COMPANY</td>
<td>45-547535</td>
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<td>59-2920275</td>
<td>501 (C) 3</td>
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<td>11. BARNABAS FOUNDATION INC</td>
<td>43-1700240</td>
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<td>12. BARNABAS INTERNATIONAL</td>
<td>36-353053</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
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   - No [ ]

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>3009 BROADWAY NEW YORK, NY 10027</td>
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<td><strong>2</strong> BARNHART TEMPLE</td>
<td>22-1589196</td>
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<td>747 ROUTE 208 S FRANKLIN LAKES, NJ 7417</td>
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<td><strong>3</strong> BARNES FOUNDATION</td>
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<td>FMV</td>
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<td>2025 BENJAMIN FRANKLIN PKWY PHILADELPHIA, P</td>
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<td><strong>4</strong> BARNS OF ROSE HILL</td>
<td>27-0103521</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 738 BERRYVILLE, VA 22611</td>
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<td><strong>5</strong> BARNSTABLE LAND TRUST INC</td>
<td>22-2483963</td>
<td>501 (C) 3</td>
<td>10,521</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1540 MAIN ST WEST BARNSTABLE, MA 2668</td>
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<tr>
<td><strong>6</strong> BARRETT FOUNDATION INC</td>
<td>85-0336208</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10300 CONSTITUTION AVE NE ALBUQUERQUE, NM 8</td>
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<tr>
<td><strong>7</strong> BARRETT MEMORIAL HALL</td>
<td>03-0198127</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 74 SOUTH STRAFFORD, VT 5070</td>
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<tr>
<td><strong>8</strong> BARRIER ISLAND GROUP FOR THE ARTS</td>
<td>59-1956939</td>
<td>501 (C) 3</td>
<td>218,000</td>
<td>FMV</td>
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<tr>
<td>900 DUNLOP RD SANIBEL, FL 33957</td>
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<tr>
<td><strong>9</strong> BARRIER ISLANDS FREE MEDICAL CLINIC INC</td>
<td>20-5628911</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3226 MAYBANK HWY STE C JOHNS ISLAND, SC 294</td>
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<tr>
<td><strong>10</strong> BARRINGTON STAGE CO INC</td>
<td>04-3263298</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>122 NORTH ST PITTSFIELD, MA 1201</td>
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<td><strong>11</strong> BARRIO LOGAN COLLEGE INSTITUTE</td>
<td>33-0771222</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2114 NATIONAL AVENUE SAN DIEGO, CA 92113</td>
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<td><strong>12</strong> BARROW NEUROLOGICAL FOUNDATION</td>
<td>86-0174371</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>350 W THOMAS RD PHOENIX, AZ 85013</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

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18674H 1467  V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Schedule I (Form 990) 2020**

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**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BARROW STREET NURSERY SCHOOL AT GREENWICH H 122 WEST 27TH ST 6TH FL NEW YORK, NY 10001</td>
<td>38-3720019</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BARRY GOLDWATER INSTITUTE FOR PUBLIC POLICY 500 E CORONADO RD PHOENIX, AZ 85004</td>
<td>86-0597661</td>
<td>501 (c) 3</td>
<td>668,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BARRY LOPEZ FOUNDATION FOR ART &amp; ENVIRONMENT 270B COUNTY ROAD 423 COYOTE, NM 87012</td>
<td>85-1182399</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BARTER FOUNDATION INCORPORATED STATE THEATRE PO BOX 867 ABINGDON, VA 24212</td>
<td>54-6000120</td>
<td>501 (c) 3</td>
<td>11,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION 1200 CENTRAL AVENUE COLUMBUS, IN 47203</td>
<td>35-1113190</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BARTHOLOMEW COUNTY HUMANE SOCIETY 4415 E. 200 S.F.O. BOX 1088 COLUMBUS, IN 47203</td>
<td>23-7282731</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BARTLESVILLE FIRST CHURCH OF THE NAZARENE 3650 SE ADAMS BLVD BARTLESVILLE, OK 74006</td>
<td>73-0964098</td>
<td>501 (c) 3</td>
<td>5,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BASE VISROEL</td>
<td>1307 PRESIDENT ST BROOKLYN, NY 11213</td>
<td>20-3121901</td>
<td>501 (c) 3</td>
<td>27,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BASIC FUND</td>
<td>475 14TH ST STE 290 OAKLAND, CA 94612</td>
<td>94-3290699</td>
<td>501 (c) 3</td>
<td>103,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BASILICA NATIONAL SHRINE OF THE IMMACULATE 400 MICHIGAN AVE NE WASHINGTON, DC 20017</td>
<td>53-0196626</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BASILICA OF ST JOHN</td>
<td>1915 UNIVERSITY AVE DES MOINES, IA 50314</td>
<td>42-0703274</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BASIS CHARTER SCHOOLS INC 7975 N HAYDEN RD SCOTTSDALE, AZ 85258</td>
<td>86-0908854</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1.</td>
<td>14500 JUANITA DR NE KENMORE, WA 98028</td>
<td>91-1036794 501 (C) 3</td>
<td>11,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>BAYON ROUGE AREA FOUNDATION</td>
<td>72-6030391 501 (C) 3</td>
<td>25,500.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>BAYON ROUGE CHRISTIAN EDUCATION FOUNDATION</td>
<td>72-0921878 501 (C) 3</td>
<td>20,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>BATTERED WOMENS SHELTER</td>
<td>34-1249342 501 (C) 3</td>
<td>25,650.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>BATTERY FOUNDATION</td>
<td>46-5476017 501 (C) 3</td>
<td>47,800.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>BAY AREA CHRISTIAN CHURCH</td>
<td>94-1640617 501 (C) 3</td>
<td>20,250.00</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>BAY AREA COMMUNITY SERVICES INC</td>
<td>94-1708069 501 (C) 3</td>
<td>11,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8.</td>
<td>BAY AREA CRISIS NURSERY</td>
<td>94-2681676 501 (C) 3</td>
<td>10,500.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>BAY AREA DISC ASSOCIATION</td>
<td>82-2866445 501 (C) 3</td>
<td>10,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10.</td>
<td>BAY AREA DISCOVERY MUSEUM</td>
<td>68-0033227 501 (C) 3</td>
<td>313,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>BAY AREA FURNITURE BANK</td>
<td>81-0978660 501 (C) 3</td>
<td>25,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>BAY AREA LEGAL AID</td>
<td>94-1631316 501 (C) 3</td>
<td>10,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Purpose of grant or assistance</th>
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<tr>
<td>1. BAY AREA MUSIC PROJECT 740 SANTA CLARA AVE ALAMEDA, CA 94501</td>
<td>47-4460867</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. BAY AREA RESCUE MISSION 2114 MACDONALD AVE RICHMOND, CA 94801</td>
<td>94-6124054</td>
<td>501 (C) 3</td>
<td>29,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. BAY AREA RIDGE TRAIL COUNCIL 391 SUTER ST STE 701 SAN FRANCISCO, CA 941</td>
<td>94-3148503</td>
<td>501 (C) 3</td>
<td>11,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. BAY AREA TEACHER TRAINING INSTITUTE 6134 HANWOO AVE OAKLAND, CA 94618</td>
<td>75-3001792</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. BAY AREA WOMEN LEADER NETWORK 1 ADRIAN TER SAN RAFAEL, CA 94903</td>
<td>47-1938087</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6. BAY FARM COMMUNITY CHURCH 3189 MECARTNEY RD ALAMEDA, CA 94502</td>
<td>94-3070481</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7. BAY LEAF BAPTIST CHURCH 12200 BAYLEAF CHURCH RD RALEIGH, NC 27614</td>
<td>56-6148149</td>
<td>501 (C) 3</td>
<td>7,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. BAY NATURE INSTITUTE 1328 6TH ST STE 2 BERKELEY, CA 94710</td>
<td>76-0744881</td>
<td>501 (C) 3</td>
<td>9,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. BAY PRESBYTERIAN CHURCH 25415 LAKE RD BAY VILLAGE, OH 44140</td>
<td>34-0861012</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. BAYAN 1325 N COLLEGE AVE CLAREMONT, CA 91711</td>
<td>46-2431099</td>
<td>501 (C) 3</td>
<td>30,380.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. BAYKEEPER 1736 FRANKLIN ST OAKLAND, CA 94612</td>
<td>68-0120240</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. BAYLOR COLLEGE OF MEDICINE 1 BAYLOR PLZ HOUSTON, TX 77030</td>
<td>74-1613878</td>
<td>501 (C) 3</td>
<td>209,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
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<th>Name of the organization</th>
<th>Employer identification number</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>BAYLOR HEALTH CARE SYSTEM FOUNDATION</td>
<td>1301 N WASHINGTON AVE DALLAS, TX 75246</td>
<td>75-1606705</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYLOR UNIVERSITY</td>
<td>1 BEAR PL UNIT 97042 WACO, TX 76798</td>
<td>74-1159753</td>
<td>501 (C) 3</td>
<td>185,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYOU CITY FELLOWSHIP</td>
<td>555 JONES RD # 351 HOUSTON, TX 77065</td>
<td>44-1199398</td>
<td>501 (C) 3</td>
<td>29,204.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYPATH HUMANE SOCIETY OF HOPKINTON INC</td>
<td>500 LEGACY FARMS HOPKINTON, MA 1748</td>
<td>04-265753</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYSHORE CHRISTIAN MINISTRIES</td>
<td>1001 BEECH ST EAST PALO ALTO, CA 94303</td>
<td>77-0151434</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAYSIDE COMMUNITY CHURCH</td>
<td>25080 STATE HWY 172 PORT LAVACA, TX 77979</td>
<td>80-0463712</td>
<td>501 (C) 3</td>
<td>8,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BAYSIDE COVENANT CHURCH GRANITE BAY ROSEVILLE</td>
<td>821 SIERRA COLLEGE BLVD STE 440 ROSEVILLE</td>
<td>68-0358620</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYSIDE HOUSING &amp; SERVICES</td>
<td>PO BOX 927 PORT HADLOCK, WA 98339</td>
<td>47-1798297</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYSIDE HEALTH FOUNDATION INC</td>
<td>759 CHESTNUT ST SPRINGFIELD, MA 1199</td>
<td>04-3549011</td>
<td>501 (C) 3</td>
<td>11,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BAYVIEW HUNTERS POINT CENTER FOR ARTS AND T</td>
<td>2415 3RD ST STE 230 SAN FRANCISCO, CA 94107</td>
<td>94-3329786</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BD PERFORMING ARTS</td>
<td>4065 NELSON AVE CONCORD, CA 94520</td>
<td>94-2216542</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
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► Attach to Form 990.
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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

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<tbody>
<tr>
<td>BE IN HEALTH INC</td>
<td>20-3532218</td>
<td>501 (c) 3</td>
<td>19,198.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BE THE MATCH FOUNDATION</td>
<td>41-1704734</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACH CITIES CHABAD</td>
<td>95-4602186</td>
<td>501 (c) 3</td>
<td>13,543.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACHES EMERGENCY ASSISTANCE MINISTRY INC</td>
<td>59-2564222</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BEACHPOINT CHURCH</td>
<td>17415 MAGNOLIA ST FOUNTAIN VALLEY, CA 92708</td>
<td>501 (c) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACON ACADEMY INC</td>
<td>73-1710051</td>
<td>501 (c) 3</td>
<td>187,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACON GROUP INC</td>
<td>86-0107976</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACON HEBREW ALLIANCE</td>
<td>14-6039468</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BEACON HILL CIVIC ASSOCIATION INC</td>
<td>04-2295394</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BEACON HILL FRIENDS HOUSE INC</td>
<td>04-2240610</td>
<td>501 (c) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACON HILL VILLAGE INC</td>
<td>04-3563239</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BEACON INTERFAITH HOUSING COLLABORATIVE</td>
<td>41-1953599</td>
<td>501 (c) 3</td>
<td>17,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| BEACON SCHOOL PARENT ASSOCIATION                     | 13-3749712 | 501 (C) 3                        | 10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEACON WORLD MISSIONS INC                            | 58-2204791 | 501 (C) 3                        | 7,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEANS CAFE INC                                       | 92-0072522 | 501 (C) 3                        | 16,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAR NECESSITIES PEDIATRIC CANCER FOUNDATION         | 36-3874655 | 501 (C) 3                        | 100,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEATRICE CHRISTIAN ACADEMY INC                       | 84-2935646 | 501 (C) 3                        | 40,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAUMONT RETIREMENT SERVICES INC                     | 23-2324586 | 501 (C) 3                        | 30,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAUTIFUL SAVIOR LUTHERAN CHURCH                     | 65-0381127 | 501 (C) 3                        | 13,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAUTIFUL SAVIOR LUTHERAN CHURCH                     | 39-6141018 | 501 (C) 3                        | 9,996.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAUTIFUL SAVIOR LUTHERAN CHURCH                     | 82-0361378 | 501 (C) 3                        | 15,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAVER COUNTRY DAY SCHOOL INC                        | 04-2103869 | 501 (C) 3                        | 45,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAVER MEMORIAL UNITED METHODIST CHURCH              | 24-6002587 | 501 (C) 3                        | 20,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| BEAVER RIDGE UNITED METHODIST CHURCH                 | 62-1190087 | 501 (C) 3                        | 20,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

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3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
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</tr>
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<tbody>
<tr>
<td>(1) BEAVERTON ARTS FOUNDATION INC</td>
<td>93-1271238</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) BEBER CAMP PROPERTY INC</td>
<td>8833 GROSS POINT RD STE 312 SKOKIE, IL 6007</td>
<td>27-2025066</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) BECAUSE PEOPLE MATTER</td>
<td>PO BOX 5944 PORTLAND, OR 97228</td>
<td>30-0516378</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) BECKER CHRISTIAN CENTER / D.R.A. ABUNDANT G</td>
<td>15455 59TH STREET BECKER, MN 55308-9104</td>
<td>41-1855559</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) BECKET FUND</td>
<td>1919 PENNSYLVANIA AVE NW STE 400 WASHINGTON</td>
<td>52-1858532</td>
<td>141,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) BECKUM STAPLETON LITTLE LEAGUE BASEBALL INC</td>
<td>4213 N 17TH ST MILWAUKEE, WI 53209</td>
<td>23-7126228</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) BECOME EMPOWERED</td>
<td>2128 COMEGYS AVE SCRANTON, PA 18509</td>
<td>85-0851695</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) REDLAM INC</td>
<td>603 W 115TH ST NEW YORK, NY 10025</td>
<td>80-0784887</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) SEECH ACRES PARENTING CENTER</td>
<td>6881 BEECHMONT AVE CINCINNATI, OH 45230</td>
<td>31-0536663</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) BEHOLD ISRAEL</td>
<td>18940 BASE CAMP RD MONUMENT, CO 80132</td>
<td>47-1532020</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) BEIT EL BARAKA USA</td>
<td>1100 WILSON BLVD ARLINGTON, VA 22209</td>
<td>85-0879465</td>
<td>17,940.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(12) BEIT RABBAN DAY SCHOOL</td>
<td>15 W 86TH ST NEW YORK, NY 10024</td>
<td>13-3876942</td>
<td>206,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3 Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BEIT RAMBAM INC 200 178TH ST SUNNY ISLES BEACH, FL 33160</td>
<td>27-1450139</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BELGRADE LAKES ASSOCIATION PO BOX 551 BELGRADE LAKES, ME 4918</td>
<td>01-0377308</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BELGRADE REGIONAL CONSERVATION ALLIANCE INC PO BOX 250 BELGRADE LAKES, ME 4918</td>
<td>04-3047156</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) BELIEVE IN STUDENTS INC 1755 N 13TH ST # 295 PHILADELPHIA, PA 19122</td>
<td>81-3612875</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) BELLA MENTE QUANTUM RACING ASSOCIATION 333 S 7TH ST STE 3100 MINNEAPOLIS, MN 55402</td>
<td>82-2576323</td>
<td>501 (C) 3</td>
<td>61,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) BELLAIRE UNITED METHODIST CHURCH 4417 BELLAIRE BLVD BELLAIRE, TX 77401</td>
<td>74-1166901</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) BELLARMINE COLLEGE PREPARATORY 960 W HEDDING ST SAN JOSE, CA 95126</td>
<td>94-1160938</td>
<td>501 (C) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) BELLARMINE PREPARATORY SCHOOL 2300 S WASHINGTON ST TACOMA, WA 98405</td>
<td>81-1109930</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) BELLAS ANGELS INC 13860 WELLINGTON TRCE WELLINGTON, FL 33414</td>
<td>26-1594604</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) BELLE GROVE INC PO BOX 537 MIDDLETOWN, VA 22645</td>
<td>54-1047175</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) BELLEFAIRE JEWISH CHILDREN'S BUREAU 22001 FAIRMOUNT BLVD CLEVELAND, OH 44118</td>
<td>34-0714630</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) BELLEFIELD PRESBYTERIAN CHURCH 4001 5TH AVE PITTSBURGH, PA 15213</td>
<td>25-0965245</td>
<td>501 (C) 3</td>
<td>6,356.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
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Schedule I (Form 990) 2020

JSA

OE1288 1.000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>810 NEWPORT AVE, GAP, PA 17527</td>
<td>23-1370409</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>303 POTTER STREET, BELLINGHAM, WA 98225</td>
<td>83-4627890</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>1651 BELLEVUE AVE, SEATTLE, WA 98122</td>
<td>91-1116960</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2150 HEMPSTEAD TPKE, ELMONTE, NY 11003</td>
<td>31-1646091</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>68 MUSIC SQ E, NASHVILLE, TN 37203</td>
<td>62-0731726</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>350 PROSPECT ST, BELMONT, MA 2470</td>
<td>04-2103870</td>
<td>501 (C) 3</td>
<td>404,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1900 BELMONT BLVD, NASHVILLE, TN 37212</td>
<td>62-0465076</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>700 COLLEGE ST, BELOIT, WI 53511</td>
<td>39-0808497</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1615 N OGDEN ST, DENVER, CO 80218</td>
<td>81-2994765</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>607 ALMA LN, BRENHAM, TX 77833</td>
<td>85-2333773</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CO ZZRD LLP, 901 A STREET, STE C, SAC RAFAEL,</td>
<td>68-0010945</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 483, BELVEDERE TIBURON, CA 94920</td>
<td>88-0280522</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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<tr>
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<td>1 (a)</td>
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<td>Description of non-cash assistance</td>
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<td>1 (h)</td>
<td>Purpose of grant or assistance</td>
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<td>851 N BROAD ST ELIZABETH, NJ 7208</td>
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Schedule I (Form 990) 2020

OMB No. 1545-0047
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>BENEDICTINE SOCIETY OF ST BEDE</td>
<td>24 W US HIGHWAY 6 PERU, IL 61354</td>
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<td>501 (C) 3</td>
<td>10,500.</td>
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<td>BENEDICTINES OF MARY QUEEN OF APOSTLES</td>
<td>8005 NW 316TH ST GOWER, MO 64454</td>
<td>20-4450092</td>
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<td>3</td>
<td>BENEDICTING FOUNDATION ST ANSELM’S ABBEY &amp; S</td>
<td>4501 SOUTH DAKOTA AVE NE WASHINGTON, DC 200</td>
<td>53-0204623</td>
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<td>160,000.</td>
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<td>BENEFICENT TECHNOLOGY INC</td>
<td>480 S CALIFORNIA AVE 201 PALO ALTO, CA 9430</td>
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<td>15,000.</td>
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<td>6</td>
<td>BENEVOLENCE FARM</td>
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<td>FMV</td>
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<td>10377 E GEDDES AVE ENGLEWOOD, CO 80112</td>
<td>84-1568566</td>
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<td>5,600.</td>
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<td>11</td>
<td>BENJAMIN PRIVATE SCHOOL INC</td>
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<td>59-1536502</td>
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<td>FOR RECIPIENT’S EXEM</td>
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**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

**General Information on Grants and Assistance**

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   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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**Part II**

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<th>Purpose of grant or assistance</th>
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   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<td>20-2633437</td>
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<td>501 (c) 3</td>
<td>6,750.</td>
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<td>5</td>
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<td>94-2976226</td>
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<td>FMV</td>
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<td>06-1013935</td>
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<td>BERKELEY EARTH INC 2831 GABBA ST BERKELEY, CA 94705</td>
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<td>8</td>
<td>BERKELEY EAST BAY HUMAN SOCIETY INC 2700 9TH ST BERKELEY, CA 94710</td>
<td>94-1347069</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>BERKELEY EXISTENTIAL RISK INITIATIVE 340 S LEMON AVE # 2374 WALNUT, CA 91789</td>
<td>81-4820272</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>BERKELEY FOOD AND HOUSING PROJECT 3225 ADELINE ST BERKELEY, CA 94703</td>
<td>94-2979073</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>BERKELEY FOOD NETWORK 1569 SOLANO AVE # 423 BERKELEY, CA 94707</td>
<td>81-4942342</td>
<td>501 (c) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>BERKELEY HIGH SCHOOL DEVELOPMENT GROUP PO BOX 519 BERKELEY, CA 94701</td>
<td>94-3173406</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. BERKELEY PLAYHOUSE INC  
   2640 COLLEGE AVE BERKELEY, CA 94704  
   94-2626454  
   501 (C) 3  
   6,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 2. BERKELEY REPERTORY THEATRE  
   999 HARRISON ST BERKELEY, CA 94710  
   94-1679756  
   501 (C) 3  
   27,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 3. BERKELEY STUDENT COOPERATIVE INC  
   2424 RIDGE RD BERKELEY, CA 94709  
   94-0948140  
   501 (C) 3  
   17,750.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 4. BERKELEY-CARROLL STREET SCHOOL  
   152 STERLING PL BROOKLYN, NY 11217  
   11-2611384  
   501 (C) 3  
   6,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 5. BERKLEE COLLEGE OF MUSIC INC  
   1140 BOYLSTON ST BOSTON, MA 2215  
   04-2300472  
   501 (C) 3  
   62,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 6. BERKS ARTS COUNCIL  
   PO BOX 854 READING, PA 19601  
   23-7366925  
   501 (C) 3  
   27,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 7. BERKSHIRE ENVIRONMENTAL ACTION TEAM INC  
   20 CHAPEL ST FITTSFIELD, MA 1201  
   27-0054356  
   501 (C) 3  
   8,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 8. BERKSHIRE HUMANE SOCIETY INC  
   214 BARKER RD FITTSFIELD, MA 1201  
   04-3148018  
   501 (C) 3  
   70,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 9. BERKSHIRE PULSE INC  
   420 PARK ST HOUSATONIC, MA 1236  
   43-2052204  
   501 (C) 3  
   10,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 10. BERKSHIRE SCHOOL INC  
   245 N UNDERMOUNTAIN RD SHEFFIELD, MA 1257  
   04-2121313  
   501 (C) 3  
   70,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 11. BERKSHIRE SOUTH REGIONAL COMMUNITY  
   15 CRISSEY RD GREAT BARRINGTON, MA 1230  
   04-3348584  
   501 (C) 3  
   5,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 12. BERKSHIRE UNITED WAY INC  
   200 SOUTH ST FITTSFIELD, MA 1201  
   04-2104841  
   501 (C) 3  
   19,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | 2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
   - | 3. Enter total number of other organizations listed in the line 1 table.  
   -
**SCHEDULE I**

**(Form 990)**

**OMB No. 1545-0047**

**2020 Open to Public Inspection**

Department of the Treasury
Internal Revenue Service

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1. (1) BERNARD ZELL ANSHE EMET DAY SCHOOL</td>
<td>36-2166955</td>
<td>501 (c) 3</td>
<td>14,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. (2) BERNARDINE CENTER</td>
<td>20-0882850</td>
<td>501 (c) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3. (3) BERNARDINE FRANCISCAN SISTERS</td>
<td>23-1691743</td>
<td>501 (c) 3</td>
<td>65,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. (4) BERRY COLLEGE INC</td>
<td>58-0566133</td>
<td>501 (c) 3</td>
<td>10,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5. (5) BERRYESSA ALLIANCE CHURCH</td>
<td>91-2121858</td>
<td>501 (c) 3</td>
<td>6,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6. (6) BERT NASH COMMUNITY MENTAL HEALTH CENTER IN</td>
<td>48-0775739</td>
<td>501 (c) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7. (7) BERWYN FIRE COMPANY</td>
<td>23-0406833</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8. (8) BEST BUDDIES INTERNATIONAL INC</td>
<td>52-1614576</td>
<td>501 (c) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. (9) BEST FRIENDS ANIMAL SOCIETY</td>
<td>23-7147797</td>
<td>501 (c) 3</td>
<td>175,433</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. (10) BET AM SHALOM SYNAGOGUE</td>
<td>13-1913705</td>
<td>501 (c) 3</td>
<td>12,418</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. (11) BET SHRAGA HEbrew ACADEMY OF THE CAPITAL DI</td>
<td>14-1470222</td>
<td>501 (c) 3</td>
<td>77,550</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. (12) BET TORAH INC.</td>
<td>13-1980421</td>
<td>501 (c) 3</td>
<td>5,940</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
0E1288 1,000

18674H 1467 V 20-7.21
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Part I  General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>BET TIZEDEX</td>
<td>3250 WILSHIRE BLVD PL 13 LOS ANGELES, CA 90203</td>
<td>23-7304205</td>
<td>501 (C) 3</td>
<td>192,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETA THETA PI FOUNDATION</td>
<td>5134 BONHAM RD OXFORD, OH 45056</td>
<td>80-0296934</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETH AM SYNAGOGUE</td>
<td>2701 N CHARLES ST STE 402 BALTIMORE, MD 21220</td>
<td>52-1009445</td>
<td>501 (C) 3</td>
<td>6,379.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BETH DAVID REFORM CONGREGATION</td>
<td>1110 VAUGHN LN GLADWYN, PA 19035</td>
<td>23-6000090</td>
<td>501 (C) 3</td>
<td>8,795.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BETH DAVID SYNAGOGUE</td>
<td>39 RIVERSIDE DRIVE BINGHAMTON, NY 13905</td>
<td>15-0599393</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BETH EL CONGREGATION</td>
<td>750 WHITE FOND DRIVE AARON, OH 44320</td>
<td>34-0760585</td>
<td>501 (C) 3</td>
<td>6,714.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETH EL SYNAGOGUE OF NEW ROCHELLE</td>
<td>1324 NORTH AVE NEW ROCHELLE, NY 10804</td>
<td>13-1760097</td>
<td>501 (C) 3</td>
<td>7,660.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETH EL TEMPLE CENTER OF BELMONT INC</td>
<td>BELMONT INC 2 CONCORD AVENUE BELMONT, MA 24401</td>
<td>04-6003002</td>
<td>501 (C) 3</td>
<td>9,248.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETH EMET THE FREE SYNAGOGUE</td>
<td>ATTENTION: DONATIONS 1224 DEMPSTER STREET E</td>
<td>36-2382842</td>
<td>501 (C) 3</td>
<td>20,614.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETH EVERGREEN CONGREGATION</td>
<td>PO BOX 415 EVERGREEN, CO 80437</td>
<td>84-1012915</td>
<td>501 (C) 3</td>
<td>7,462.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BETH ISRAEL CONGREGATION</td>
<td>2000 WASHTENAW AVE ANN ARBOR, MI 48104</td>
<td>38-1794360</td>
<td>501 (C) 3</td>
<td>20,619.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>BETH ISRAEL CONGREGATION</td>
<td>3706 CRONDALE LN OWING MILLS, MD 21117</td>
<td>52-0743534</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*Attach to Form 990.*

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### Part I
**General Information on Grants and Assistance**

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   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>BETH ISRAEL DEACONESS HOSPITAL - NEEDHAM IN 148 CHESTNUT ST NEEDHAM, MA 2492</td>
<td>04-3229679</td>
<td>501 (C) 3</td>
<td>3,106,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BETH ISRAEL DEACONESS MEDICAL CENTER INC 330 BROOKLINE AVE BOSTON, MA 2215</td>
<td>04-2103881</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH JACOB CONGREGATION 1179 VICTORIA CURV SAINT PAUL, MN 55118</td>
<td>41-1525206</td>
<td>501 (C) 3</td>
<td>11,011.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH JACOB CONGREGATION OF OAKLAND 3778 PARK BLVD OAKLAND, CA 94610</td>
<td>94-1156833</td>
<td>501 (C) 3</td>
<td>33,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH JACOB HEBREW TEACHERS COLLEGE INC 1213 ELM AVE BROOKLYN, NY 11230</td>
<td>13-2507037</td>
<td>501 (C) 3</td>
<td>5,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH MEDRASH GOVOHA OF LAKEWOOD INC 601 PRIVATE WAY LAKEWOOD, NJ 8701</td>
<td>22-3839462</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BETH MORRISON PROJECTS 138 S OXFORD ST STE 1C BROOKLYN, NY 11217</td>
<td>20-8422447</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH OLOT CO TED KATZENSTEIN 1 LOUIS AVENUE MONSEY,</td>
<td>23-7213514</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH SHLOM B'NAI ISRAEL 400 MIDDLE TPKE E MANCHESTER, CT 6040</td>
<td>06-0797859</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BETH SHLOM CONGREGATION- ELKINS PARK, PA 8231 OLD YORK ROAD ELKINS PARK, PA 19027</td>
<td>23-1360837</td>
<td>501 (C) 3</td>
<td>49,640.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BETH TEFILLA OF MONSEY PO BOX 107 MONSEY, NY 10952</td>
<td>51-0168555</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>BETHANY BIBLE CHURCH 6060 N 7TH AVE PHOENIX, AZ 85013</td>
<td>86-0123684</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
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<td>38-1405282</td>
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<td>5</td>
<td>BETHANY CHURCH OF SAN DIEGO 4747 SOLEDAD MOUNTAIN ROAD SAN DIEGO, CA 92</td>
<td>33-0971385</td>
<td>501 (C) 3</td>
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<td>BETHANY COMMUNITY CHURCH 27265 DUTCH LANE WASHINGTON, IL 61571</td>
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<td>7</td>
<td>BETHANY HOUSE SERVICES INC 1841 FAIRMOUNT AVE CINCINNATI, OH 45214</td>
<td>31-1101401</td>
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<td>9,500</td>
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<td>8</td>
<td>BETHANY LAND TRUST INCORPORATED 649 AMITY RD BETHANY, CT 6524</td>
<td>06-6105317</td>
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<td>9</td>
<td>BETHANY LUTHERAN CHURCH 2202 FOREST DR SE CEDAR RAPIDS, IA 52403</td>
<td>42-0932114</td>
<td>501 (C) 3</td>
<td>14,000</td>
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<td>10</td>
<td>BETHANY LUTHERAN CHURCH 35 W MESSENGER ST RICE LAKE, WI 54868</td>
<td>39-0872438</td>
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<td>11</td>
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<td>12</td>
<td>BETHANY MENNONITE BRETHREN CHURCH OF FRESNO 9161 N MAPLE AVE FRESNO, CA 93720</td>
<td>94-1347070</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
<table>
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<tr>
<th>Name of the organization</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>BETHANY UNITED METHODIST CHURCH</td>
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<td>BETHANY UNITED METHODIST CHURCH FOUNDATION</td>
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<td>501 (C) 3</td>
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<td>BETHANY UNITED REFORMED CHURCH</td>
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<td>JOINT VENTURE COMMITTEE COSTA RICA 5401 BYR</td>
<td>1217 WILSON RD WILMINGTON, MD 21043</td>
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<td>BETHEL BAPTIST CHURCH</td>
<td>4261 MONTGOMERY RD ELLICOTT CITY, DE 19803</td>
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<td>33,500.</td>
<td>FMV</td>
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<tr>
<td>BETHEL BAPTIST CHURCH</td>
<td>313 W HIGHWAY 7 NEWELL, IA 50568</td>
<td>501 (C) 3</td>
<td>9,500.</td>
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<td>BETHEL CHURCH OF REDDING</td>
<td>933 COLLEGE VIEW DR REDDING, CA 96003</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
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<td>BETHEL CHURCH OF SAN JOSE</td>
<td>1201 S WINCHESTER BLVD SAN JOSE, CA 95128</td>
<td>501 (C) 3</td>
<td>18,940.</td>
<td>FMV</td>
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<tr>
<td>BETHEL COLLEGE</td>
<td>300 E 27TH ST NORTH NEWTON, KS 67117</td>
<td>501 (C) 3</td>
<td>7,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BETHEL CORNERSTONE</td>
<td>6140 BLACKSTONE RD LINCOLN, NE 68526</td>
<td>501 (C) 3</td>
<td>7,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>BETHEL EVAN COVENANT CHURCH BETHEL AK PO BOX 828 BETHEL, AK 99559</td>
<td>92-0082166</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
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<td>35-1089152</td>
<td>501 (C) 3</td>
<td>34,384</td>
<td>FMV</td>
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<td>3</td>
<td>BETHEL EVANGELICAL LUTHERAN CHURCH OF CICER</td>
<td>20650 CUMBERLAND RD NOBLESVILLE, IN 46062</td>
<td>39-0669781</td>
<td>9,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>BETHEL LUTHERAN CHURCH</td>
<td>810 3RD AVE SE ROCHESTER, MN 55904</td>
<td>41-0713886</td>
<td>11,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>BETHEL LUTHERAN HOME FOUNDATION INC</td>
<td>4221 BOONVILLE RD BRYAN, WI 53703</td>
<td>74-6059882</td>
<td>15,356</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>BETHEL WORLD OUTREACH CENTER INC</td>
<td>312 WISCONSIN AVE MADISON, WI 53702</td>
<td>39-0669781</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>BETHEL WORLD OUTREACH CENTER INC</td>
<td>810 3RD AVE SE ROCHESTER, MN 55904</td>
<td>41-0713886</td>
<td>11,400</td>
<td>FMV</td>
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<td>8</td>
<td>BETHESDA CARES INC</td>
<td>5670 GRANNY WHITE PIKE BRENTWOOD, TN 37027</td>
<td>62-1199355</td>
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<td>9</td>
<td>BETHESDA CHEVY CHASE RESCUE SQUAD INC</td>
<td>7728 WOODMONT AVE BETHESDA, MD 20814</td>
<td>52-1634919</td>
<td>5,250</td>
<td>FMV</td>
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<td>BETHESDA HEALTH CLINIC</td>
<td>5020 BATTERY LN BETHESDA, MD 20814</td>
<td>52-0583872</td>
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<td>11</td>
<td>BETHESDA HOSPITAL FOUNDATION INC</td>
<td>409 W FERGUSON ST TYLER, TX 75702</td>
<td>26-0036674</td>
<td>11,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BETHESDA JEWISH CONGREGATION</td>
<td>2815 S SEACREST BLVD BOYNTON BEACH, FL 3343</td>
<td>59-6137805</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
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<th>Name of the organization</th>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) BETHESDA LUTHERAN COMMUNITIES INC 600 HOFFMANN DR WATERTOWN, WI 53094</td>
<td>39-0806446</td>
<td>501 (c) 3</td>
<td>55,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) BETHESDA LUTHERAN FOUNDATION INC 600 HOFFMANN DR WATERTOWN, WI 53094</td>
<td>39-1336413</td>
<td>501 (c) 3</td>
<td>5,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) BETHESDA MINISTRIES 15475 GLENEAGLE DR COLORADO SPRINGS, CO 809</td>
<td>84-1087689</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) BETHESDA MISSION OF HARRISBURG 2101 N FRONT ST BLDG 1 HARRISBURG, PA 17110</td>
<td>23-1389397</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) BETHESDA PROJECT 1630 SOUTH ST PHILADELPHIA, PA 19146</td>
<td>23-2209338</td>
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<td>124,500</td>
<td>FMV</td>
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<td>(6) BETHESDA UNITED CHURCH OF CHRIST 10010 FERNWOOD RD BETHESA, MD 20817</td>
<td>52-0800253</td>
<td>501 (c) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>(7) BETHESDA-CHEVY CHASE HIGH SCHOOL EDUCATIONAL PO BOX 15062 CHEVY CHASE, MD 20825</td>
<td>52-1948149</td>
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<td>(8) BETHLEHEM BAPTIST CHURCH 720 13TH AVE S MINNEAPOLIS, MN 55415</td>
<td>41-0705831</td>
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<td>FMV</td>
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<tr>
<td>(9) BETHLEHEM BAPTIST CHURCH OF MANSFIELD TEXAS 1188 W BROAD ST MANSFIELD, TX 76063</td>
<td>75-2212107</td>
<td>501 (c) 3</td>
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<td>(10) BETHLEHEM COLLEGE &amp; SEMINARY 720 13TH AVE S MINNEAPOLIS, MN 55415</td>
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<td>70,000</td>
<td>FMV</td>
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<td>(11) BETHLEHEM EVANGELICAL LUTHERAN CHURCH 21 CHURCH RD SCENERY HILL, PA 15360</td>
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<td>52,500</td>
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<td>(12) BETHLEHEM EVANGELICAL LUTHERAN CHURCH 2390 NORTH ROAD LOS ALAMOS, NM 87544</td>
<td>85-6007955</td>
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<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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<table>
<thead>
<tr>
<th>Yes</th>
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<tbody>
<tr>
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<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BETHLEHEM INN 3705 N HIGHWAY 97 BEND, OR 97703</td>
<td>93-1323419</td>
<td>501 (C) 3</td>
<td>40,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BETHLEHEM LUTHERAN CHURCH 526 E 52ND ST INDIANAPOLIS, IN 46777</td>
<td>35-6005681</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BETHLEHEM LUTHERAN CHURCH 559 E 750 N OSSIAN, IN 46205</td>
<td>35-0992006</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) BETHLEHEM LUTHERAN CHURCH TWIN CITIES 4100 LYNDALE AVE S MINNEAPOLIS, MN 55409</td>
<td>81-4494302</td>
<td>501 (C) 3</td>
<td>18,850.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) BETHLEHEM UNITED METHODIST CHURCH 2129 HIGHWAY 43 WARRENTON, NC 27589</td>
<td>56-6133835</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) BETSYS PARK PO BOX 688 HOLDSNESS, NH 3245</td>
<td>84-2584846</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) BETTER BASICS INC 1231 2ND AVE S BIRMINGHAM, AL 35233</td>
<td>63-1106040</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(8) BETTER FUTURE PROJECT INC 30 BOW ST CAMBRIDGE, MA 2138</td>
<td>47-1015198</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) BETTER MARKETS INC 1825 K ST NW 1080 WASHINGTON, DC 20006</td>
<td>27-2227363</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) BETTERF</td>
<td>PO BOX 27 COALMONT, TN 37313</td>
<td>82-3083483</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BETTY FORD ALPINE GARDENS 183 GORE CREEK DR VAIL, CO 81657</td>
<td>74-2395097</td>
<td>501 (C) 3</td>
<td>145,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BEULAH COMMUNITY NURSING HOME 118 22ND ST NE BEULAH, ND 58523</td>
<td>45-0277390</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) BEVERLY FARM FOUNDATION</td>
<td>37-0765971</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
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<tr>
<td>(2) BEVERLY HILLS BAPTIST CHURCH</td>
<td>777 TUNNEL RD ASHEVILLE, NC 28805</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BEYOND EMANCIPATION</td>
<td>675 HEGENBERGER RD STE 100 OAKLAND, CA 9462</td>
<td>501 (C) 3</td>
<td>70,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) BEYOND HUNGER</td>
<td>848 LAKE ST OAK PARK, IL 60301</td>
<td>501 (C) 3</td>
<td>26,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) BHARATIYA TEMPLE INC</td>
<td>23-2959416</td>
<td>501 (C) 3</td>
<td>15,003.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) BIBLE BROADCASTING NETWORK INCORPORATED</td>
<td>11530 CARMEL COMMONS BLVD CHARLOTTE, NC 282</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) BIBLE LEAGUE</td>
<td>3801 EAGLE NEST DR CRETE, IL 60417</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) BIBLE STUDY FELLOWSHIP</td>
<td>19001 HUEBNER RD SAN ANTONIO, TX 78258</td>
<td>501 (C) 3</td>
<td>88,464.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) BIBLE VISUALS INTERNATIONAL INC</td>
<td>650 MAIN ST AKRON, PA 17501</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BIBLEPROJECT</td>
<td>1302 SE ANKENY ST FORTLAND, OR 97214</td>
<td>501 (C) 3</td>
<td>56,111.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BIBLICA INC</td>
<td>1820 JET STREAM DR COLORADO SPRINGS, CO 809</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BIBLICAL HISTORY CENTER INC</td>
<td>PO BOX 2629 LAGRANGE, GA 30241</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

[18674H 1467 V 20-7.21]
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

[X] Yes  [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
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<th>1(d) Amount of cash grant</th>
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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1(BIBLICAL TRAINING ORG) 523 NE EVERETT ST CAMAS, WA 98607</td>
<td>91-2091751</td>
<td>501 (C) 3</td>
<td>25,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2(BICYCLE COALITION OF GREATER PHILADELPHIA 1500 WALNUT ST STE 1107 PHILADELPHIA, PA 19</td>
<td>23-2586631</td>
<td>501 (C) 3</td>
<td>11,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3(BIENVENIDOS OUTREACH INC PO BOX 5873 SANTA FE, NM 87502</td>
<td>85-0375278</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4(BIG BROTHERS &amp; BIG SISTERS SERVICES INC 1707 SUMMIT AVE STE 200 RICHMOND, VA 23230</td>
<td>54-0702502</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5(BIG BROTHERS AND BIG SISTERS OF DANE COUNTY 2059 ATWOOD AVE MADISON, WI 53704</td>
<td>39-1077783</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6(BIG BROTHERS AND BIG SISTERS OF GREATER MIA 550 NW 42ND AVE MIAMI, FL 33126</td>
<td>59-6166904</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7(BIG BROTHERS AND BIG SISTERS OF METROPOLITAN 788 N JEFFERSON ST STE 600 MILWAUKEE, WI 53</td>
<td>39-1239687</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8(BIG BROTHERS AND BIG SISTERS OF NEW YORK CI 40 RECTOR ST FL NEW YORK, NY 10006</td>
<td>13-5600383</td>
<td>501 (C) 3</td>
<td>78,000</td>
<td>FMV</td>
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<td>9(BIG BROTHERS BIG SISTERS INDEPENDENCE REGIO 123 S BROAD ST STE 1050 PHILADELPHIA, PA 19</td>
<td>23-1352034</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>10(BIG BROTHERS BIG SISTERS OF CENTRAL OHIO IN 1855 E DUBLIN GRANVILLE RD COLUMBUS, OH 432</td>
<td>31-4379429</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>11(BIG BROTHERS BIG SISTERS OF GREATER LOS ANG 3150 N SAN FERNANDO RD LOS ANGELES, CA 9006</td>
<td>95-1904857</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>12(BIG BROTHERS BIG SISTERS OF MASSACHUSETTS B 184 HIGH ST BOSTON, MA 2110</td>
<td>06-2074462</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### Part I
#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>BIG BROTHERS BIG SISTERS OF NORTHWESTERN MI</td>
<td>23-7043163</td>
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<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>BIG BROTHERS BIG SISTERS OF ORANGE COUNTY A</td>
<td>95-192702</td>
<td>501 (c) 3</td>
<td>28,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BIG BROTHERS BIG SISTERS OF PUGET SOUND</td>
<td>91-0673185</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BIG BROTHERS BIG SISTERS OF THE BAY AREA</td>
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<td>501 (c) 3</td>
<td>131,199.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BIG BROTHERS BIG SISTERS OF THE SUN COAST I</td>
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<td>BIG BROTHERS BIG SISTERS OF SOUTHWEST IDAHO</td>
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<td>FMV</td>
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<td>BIG BROTHERS-BIG SISTERS OF METROPOLITAN CH</td>
<td>36-2681212</td>
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<td>FMV</td>
<td>N/A</td>
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<td>BIG CAT HABITAT GULF COAST SANCTUARY INC</td>
<td>65-0659177</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BIG DOG RANCH RESCUE INC</td>
<td>26-3184971</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>BIG LIFE FOUNDATION USA</td>
<td>27-3455389</td>
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<td>$22,651.</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>BIG MEDIUM</td>
<td>26-1347501</td>
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<td>$11,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>BIG OAK RANCH INC</td>
<td>23-7413017</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>BIG PICTURE PHILADELPHIA</td>
<td>26-1413610</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>BIG SHOULDER FUND</td>
<td>36-3490557</td>
<td>501 (c) 3</td>
<td>$52,440.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>BIG SISTER ASSOCIATION OF GREATER BOSTON IN</td>
<td>04-2150651</td>
<td>501 (c) 3</td>
<td>$40,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>BIG SUNDAY</td>
<td>42-1765317</td>
<td>501 (c) 3</td>
<td>$10,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>BIG TIMBER LUTHERAN CHURCH</td>
<td>81-0377478</td>
<td>501 (c) 3</td>
<td>$6,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>BIGELOW LABORATORY FOR OCEAN SCIENCES</td>
<td>01-6006001</td>
<td>501 (c) 3</td>
<td>$35,500.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>BIGGER PITCH FOUNDATION INC</td>
<td>46-5422582</td>
<td>501 (c) 3</td>
<td>$15,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>BIKE WORKS SEATTLE</td>
<td>91-1753062</td>
<td>501 (c) 3</td>
<td>$32,000.</td>
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<td>FMV</td>
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<tr>
<td>12</td>
<td>BIKER CHOLIM OF LAKWOOD INC</td>
<td>22-3251871</td>
<td>501 (c) 3</td>
<td>$11,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) BIKUR CHOLIM OF MANHATTAN INC</td>
<td>13-3208366</td>
<td>501 (C) 3</td>
<td>40,540.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BIKUR CHOLIM OF MIAMI BEACH INC</td>
<td>651 W 47TH ST MIAMI BEACH, FL 33140</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) BIKUR CHOLIM OF NY INC</td>
<td>258 HEYWARD ST BROOKLYN, NY 11206</td>
<td>501 (C) 3</td>
<td>38,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) BILL HILLARY &amp; CHELSEA CLINTON FOUNDATION</td>
<td>1200 PRESIDENT CLINTON AVEATTN FINA LITTLE</td>
<td>501 (C) 3</td>
<td>64,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) BILL RICE RANCH INC</td>
<td>627 BILL RICE RANCH RD MURFREESBORO, TN 371</td>
<td>501 (C) 3</td>
<td>85,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) BILL WILSON CENTER</td>
<td>3490 THE ALAMEDA SANTA CLARA, CA 95050</td>
<td>501 (C) 3</td>
<td>62,297.</td>
<td>FMV</td>
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<tr>
<td>(7) BILLY GRAHAM EVANGELISTIC ASSOCIATION</td>
<td>1 BILLY GRAHAM PKWY CHARLOTTE, NC 28201</td>
<td>501 (C) 3</td>
<td>232,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) BILLY GRAHAM EVANGELISTIC ASSOCIATION</td>
<td>1 BILLY GRAHAM PKWY CHARLOTTE, NC 28201</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) BIOLA UNIVERSITY INC</td>
<td>13800 BIOLA AVE LA MIRADA, CA 90639</td>
<td>501 (C) 3</td>
<td>62,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BIRCH FAMILY SERVICES INC</td>
<td>104 W 29TH ST FL 3 NEW YORK, NY 10001</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BIRD &amp; BECKETT CULTURAL LEGACY PROJECT</td>
<td>653 CHERNY ST SAN FRANCISCO, CA 94131</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BIRD RESCUE CENTER</td>
<td>3430 CHANATE RD SANTA ROSA, CA 95404</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Part I**

**General Information on Grants and Assistance**

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>(1) BIRMINGHAM JEWISH FEDERATION</td>
<td>3966 MONTCLAIR RD MOUNTAIN BRK, AL 35213</td>
<td>63-1045456 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BIRMINGHAM UNITED METHODIST CHURCH</td>
<td>75432 MARTHA ROAD FORT WASHINGTON, OH 43837</td>
<td>31-0994055 501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BIRMINGHAM-SOUTHERN COLLEGE</td>
<td>200 ARRADELPRIA RD BIRMINGHAM, AL 35254</td>
<td>63-0288811 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) BIRTH CENTER</td>
<td>918 COUNTY LINE RD BRYN MAWR, PA 19010</td>
<td>23-2080859 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) BIRTH DETROIT INC</td>
<td>17343 MCINTYRE ST DETROIT, MI 48219</td>
<td>84-2980807 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) BIRTHLINE OF SAN DIEGO COUNTY INC</td>
<td>3660 CLAIREMONT DR STE 4 SAN DIEGO, CA 9211</td>
<td>33-0014261 501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) BIRHTRIGHT COUNSELING ST LOUIS</td>
<td>2525 S BRENTWOOD BLVD SAINT LOUIS, MO 63144</td>
<td>23-7189996 501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) BIRHTRIGHT ISRAEL FOUNDATION</td>
<td>711 3RD AVE NEW YORK, NY 10017</td>
<td>13-4092050 501 (C) 3</td>
<td>110,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) BIRHTRIGHT OF GEORGETOWN INC</td>
<td>PO BOX 3455 PAWLEYS ISLAND, SC 29585</td>
<td>57-1133650 501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BISHOP BARAGA CATHOLIC SCHOOL</td>
<td>623 W. LINCOLN AVE CHEBOYGAN, MI 49721</td>
<td>38-1369790 501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BISHOP BRADY HIGH SCHOOL</td>
<td>25 COLUMBUS AVE CONCORD, NH 3301</td>
<td>02-0263534 501 (C) 3</td>
<td>8,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BISHOP DUDLEY HOSPITALITY HOUSE</td>
<td>101 N INDIANA AVE SIoux FALLS, SD 57103</td>
<td>91-1836528 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Part I**

<table>
<thead>
<tr>
<th>Number</th>
<th>Name and Address</th>
<th>EIN</th>
<th>IRC Section</th>
<th>Amount of Cash Grant</th>
<th>Method of Valuation</th>
<th>Description of Noncash Assistance</th>
<th>Purpose of Grant or Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1 Bishop Gadsden Episcopal Retirement Community, 1 Bishop Gadsden Way Charleston, SC 29412</td>
<td>57-0337132</td>
<td>501 (c) 3</td>
<td>33,310.</td>
<td>FMV</td>
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<td>For Recipient's Exem</td>
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<td>2</td>
<td>Bishop Gorman Catholic School, 1405 E SE Loop 323 Tyler, TX 75701</td>
<td>27-2769397</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>3</td>
<td>Bishop Hartley High School, 1285 Zettler Road Columbus, OH 43227</td>
<td>31-4421097</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>4</td>
<td>Bishop Kelly Foundation Inc, 7009 W Franklin Rd Boise, ID 83709</td>
<td>82-0332399</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>5</td>
<td>Bishop Loughlin Memorial High School, 357 Clermont Ave Brooklyn, NY 11238</td>
<td>11-2294328</td>
<td>501 (c) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>6</td>
<td>Bishop Lynch High School, 9750 Ferguson Rd Dallas, TX 75228</td>
<td>75-1450046</td>
<td>501 (c) 3</td>
<td>25,607.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>7</td>
<td>Bishop McGuinness Catholic High, 1725 NC Highway 66 S Kernersville, NC 27284</td>
<td>56-6021668</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>8</td>
<td>Bishop School, 7607 La Jolla Blvd La Jolla, CA 92037</td>
<td>85-1642362</td>
<td>501 (c) 3</td>
<td>16,909.</td>
<td>FMV</td>
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<td>For Recipient's Exem</td>
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<tr>
<td>9</td>
<td>Bishop Sullivan Center Inc 052196</td>
<td>6435 E Truman Rd Kansas City, MO 64126</td>
<td>43-1750848</td>
<td>501 (c) 3</td>
<td>9,500.</td>
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<td>N/A</td>
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<td>10</td>
<td>Bismarck Public Schools Foundation, 806 N Washington St Bismarck, ND 58501</td>
<td>45-0442960</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>11</td>
<td>Bitgive Foundation</td>
<td>1697 Truckee, CA 96160</td>
<td>46-3362563</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>Black Alliance For Just Immigration</td>
<td>1368 Fulton St Ste 311 Brooklyn, NY 11216</td>
<td>27-1911379</td>
<td>501 (c) 3</td>
<td>90,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Part II**

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1.</td>
<td>BLACK AND BROWN FOUNDERS INC</td>
<td>82-2187440</td>
<td>501 (C) 3</td>
<td>101,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>BLACK AND ORANGE CAT FOUNDATION</td>
<td>20-3597894</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>BLACK AND PINK INC</td>
<td>27-3930676</td>
<td>501 (C) 3</td>
<td>17,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>BLACK BELT COMMUNITY FOUNDATION INC</td>
<td>63-12107845</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5.</td>
<td>BLACK CULTURAL ZONE COMMUNITY DEVELOPMENT CENTER</td>
<td>2032 SAN JOSE AVE ALAMEDA, CA 94501</td>
<td>84-3885205</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>BLACK FAIRY GODMOTHER FOUNDATION</td>
<td>86-1228717</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7.</td>
<td>BLACK GIRL VENTURES FOUNDATION</td>
<td>9142 RICHMOND HWY APT 244 FT BELVOIR, VA 22030</td>
<td>83-0935942</td>
<td>501 (C) 3</td>
<td>26,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>BLACK GIRLS CODE INC</td>
<td>45-4930539</td>
<td>501 (C) 3</td>
<td>34,690</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>BLACK GIRLS SMILE</td>
<td>1660 KENMORE ST NW ATLANTA, GA 30311</td>
<td>45-5329568</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>BLACK HILLS STATE UNIVERSITY FOUNDATION</td>
<td>1200 UNIVERSITY ST UNIT 9506 SPEARFISH, SD 57783</td>
<td>23-7428348</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11.</td>
<td>BLACK MEN TEACH</td>
<td>1001 HIGHWAY 170L HOPKINS, MN 55305</td>
<td>83-1629682</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>BLACK ORGANIZING PROJECT INC</td>
<td>46-4578588</td>
<td>501 (C) 3</td>
<td>203,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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</thead>
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<tr>
<td>(1) BLACK PINE CIRCLE INC</td>
<td>94-1700228</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BLACK RIVER GOOD NEIGHBOR SERVICES INC</td>
<td>03-0307817</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>(3) BLACK ROCK CONGREGATIONAL CHURCH</td>
<td>06-0718198</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
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<td>(4) BLACK ROCK FOREST CONSORTIUM INC</td>
<td>13-3536463</td>
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<td>FMV</td>
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<tr>
<td>(5) BLACK ROCK RETREAT</td>
<td>23-1683475</td>
<td>501 (c) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) BLACK UNITED FUND OF OREGON INC</td>
<td>93-0843267</td>
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<td>FMV</td>
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<tr>
<td>(7) BLACK WARRIOR RIVERKEEPER INC</td>
<td>72-1537394</td>
<td>501 (c) 3</td>
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<td>(8) BLACK WOMENS BLUEPRINT</td>
<td>27-1308862</td>
<td>501 (c) 3</td>
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<td>(9) BLACKHAWK EVANGELICAL FREE CHURCH INC</td>
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<td>(10) BLACKHAWK TECHNICAL COLLEGE FOUNDATION INC</td>
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<tr>
<td>(11) BLADDER CANCER ADVOCACY NETWORK INC</td>
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<td>(12) BLAINE COUNTY HUNGER COALITION INC</td>
<td>72-1582755</td>
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</table>

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
2. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [ ]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>3001 24TH AVE SEATTLE, WA 98144</td>
<td>91-0854206</td>
<td>501 (C) 3</td>
<td>15,200</td>
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<td>22-1500475</td>
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<td>27-2384793</td>
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<td>310 NW GLISAN ST PORTLAND, OR 97209</td>
<td>93-0631009</td>
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<td>468 GRAND AVE APT 3A BROOKLYN, NY 11238</td>
<td>81-1440050</td>
<td>501 (C) 3</td>
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<td>PO BOX 164 DAYTON, TN 37321</td>
<td>47-2827642</td>
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<td>56,674</td>
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<td>PO BOX 347 BILOXI, MS 39533</td>
<td>64-0389423</td>
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<td>1427 BRADDOCK ROAD ALEXANDRIA, VA 22302</td>
<td>54-0506447</td>
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<td>PO BOX 619 BURLINGTON, NC 27216</td>
<td>56-6017086</td>
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<td>9,875</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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<th></th>
<th>Name and address of organization or government</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>1</td>
<td>BLESSED TRINITY CATHOLIC HIGH SCHOOL</td>
<td>58-2602641</td>
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<td>FMV</td>
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<td>2</td>
<td>BLESSED TRINITY PARISH</td>
<td>59-1144044</td>
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<td>3</td>
<td>BLESSINGS IN A BACKPACK INC</td>
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<td>4</td>
<td>BLESSINGS OF HOPE</td>
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<td>5</td>
<td>BLESSMAN INTERNATIONAL INC</td>
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<td>6</td>
<td>BLEXIT FOUNDATION INC</td>
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<td>7</td>
<td>BLIND AND VISION REHABILITIZATION SERVICES OF</td>
<td>25-1803195</td>
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<td>BLINKNOW FOUNDATION A NJ NONPROFITCORPORATI</td>
<td>26-0819262</td>
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<td>9</td>
<td>BLINN COLLEGE FOUNDATION INC</td>
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<td>11</td>
<td>BLOCK GIVES BACK CORP</td>
<td>22-2570482</td>
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<td>9,374.</td>
<td>FMV</td>
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<td>FMV</td>
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</table>
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) BLOODWORKS 921 TERRY AVE SEATTLE, WA 98104</td>
<td>91-1019655</td>
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<td>(2) BLOOM MARIN 1557 4TH ST SAN RAFAEL, CA 94901</td>
<td>94-3331026</td>
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<td>FMV</td>
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<tr>
<td>(3) BLOOMER BAPTIST CHURCH, INC. 2620 DUNCAN ROAD BLOOMER, WI 54724</td>
<td>39-1344967</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>(4) BLOOMER SCHOOL DISTRICT 1310 17TH AVENUE BLOOMER, WI 54724</td>
<td>39-1017928</td>
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<td>71,319.</td>
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<tr>
<td>(5) BLOOMING GLEN MENNONITE CHURCH PO BOX 238 BLOOMING GLEN, PA 18911</td>
<td>23-6286441</td>
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<td>FMV</td>
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<td>(6) BLOOMINGDALE SCHOOL OF MUSIC INC 323 W 108TH ST NEW YORK, NY 10025</td>
<td>13-2562192</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>(7) BLOOMINGTON ROTARY FOUNDATION INC PO BOX 2026 BLOOMINGTON, IN 47402</td>
<td>31-1193127</td>
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<td>FMV</td>
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<tr>
<td>(8) BLOOMINGTON THEATRE AND ART CENTER DBA ARTI 1800 W OLD SHAKOPEE RD MINNEAPOLIS, MN 5543</td>
<td>41-1295187</td>
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<td>FMV</td>
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<tr>
<td>(9) BLOSSOM BIRTH SERVICES 290 S CALIFORNIA AVE SUITE A PALO ALTO, CA</td>
<td>77-0506942</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BLOWING ROCK ART &amp; HISTORY MUSEUM INC PO BOX 828 BLOWING ROCK, NC 28605</td>
<td>30-0003315</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<tr>
<td>(11) BLOWING ROCK CIVIC AND RELIGIOUS ASSOCIATION 100 N TRYON ST STE 4700 CHARLOTTE, NC 28202</td>
<td>02-0653104</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>(12) BLOWING ROCK COMMUNITY FOUNDATION INC PO BOX 525 BLOWING ROCK, NC 28605</td>
<td>56-15159818</td>
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<td>FMV</td>
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</table>
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>BLUE BARN THEATRE</td>
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<td>1106 S 10TH ST OMAHA, NE 68108</td>
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<td>200,000.</td>
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<td>2 FORT MASON SAN FRANCISCO, CA 94123</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>PO BOX 387 TILLSON, NY 12486</td>
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<td>BLUE ENGINE INC</td>
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<td>BLUE HILL HERITAGE TRUST INC</td>
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<td>PO BOX 222 BLUE HILL, ME 4614</td>
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<td>2411 NW CARVEN AVE PENDLETON, OK 79801</td>
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<td>501 (C) 3</td>
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<tr>
<td>7 GEORGE ST WALLA WALLA, WA 99362</td>
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<tr>
<td>BLUE OAKS CHURCH</td>
<td>37-1663533</td>
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<td>25,000.</td>
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<tr>
<td>7139 KOLL CENTER PFWY STE 200 PLEASANTON, C</td>
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<tr>
<td>BLUE RIDGE AREA FOOD BANK INC</td>
<td>52-1202644</td>
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<tr>
<td>PO BOX 93796 VERONA, VA 24482</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>9</td>
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<td>20,000.</td>
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<td>34-1563908</td>
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<td>11</td>
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<td>81-3475487</td>
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<td>12</td>
<td>BLUEPATH SERVICE DOGS INC</td>
<td>81-3606565</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I (Form 990) 2020

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>BLUESPHERE FOUNDATION INC 888 7TH AVE FL 30 NEW YORK, NY 10106</td>
<td>46-2746860</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>BLUFFTON JASPER COUNTY VOLUNTEERS IN MEDICINE PO BOX 2653 BLUFFTON, SC 29910</td>
<td>32-0298086</td>
<td>501 (C) 3</td>
<td>85,000.</td>
<td>FMV</td>
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<td>3</td>
<td>BLUFFTON SELF HELP INC PO BOX 2420 BLUFFTON, SC 29910</td>
<td>57-0862658</td>
<td>501 (C) 3</td>
<td>43,000.</td>
<td>FMV</td>
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<td>4</td>
<td>BLUFFTON UNIVERSITY 1 UNIVERSITY DR BLUFFTON, OH 45817</td>
<td>34-4428207</td>
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<td>7,000.</td>
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<td>5</td>
<td>BLYTHEHOLME CHILDREN'S HOSPITAL BRADHURST AVE VALHALLA, NY 10595</td>
<td>13-1739922</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>BLYTHEWOOD PRESBYTERIAN CHURCH PO BOX 789 BLYTHEWOOD, SC 29016</td>
<td>80-0612796</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>7</td>
<td>BNAI ABRAMAM-ZION CONGREGATION 1235 N HARLEM AVE OAK PARK, IL 60302</td>
<td>36-2287537</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>BNAI BRITH YOUTH ORGANIZATION INC 800 8TH ST NW WASHINGTON, DC 20001</td>
<td>31-1794932</td>
<td>501 (C) 3</td>
<td>3,443,000.</td>
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<td>9</td>
<td>BOARD OF JEWISH EDUCATION INC 520 8TH AVE NEW YORK, NY 10018</td>
<td>13-1632519</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>BOARD OF SCHOOL COMMISSIONERS OF MOBILE COUNTY ATTENTION: CFO PO BOX 180069 MOBILE, AL 36602</td>
<td>63-6000774</td>
<td>501 (C) 3</td>
<td>232,000.</td>
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<td>11</td>
<td>BOARD OF THE UNIVERSITY OF ALABAMA PO BOX 807142 TUSCALOOSA, AL 35487</td>
<td>63-6001138</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>BOARD OF TRUSTEES OF THE 330 ELLIS ST SAN FRANCISCO, CA 94102</td>
<td>94-1156481</td>
<td>501 (C) 3</td>
<td>543,472.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>BOARD OF TTEES ST JAMES AMER PROT- ESTANT E</td>
<td>153 E 53RD ST NEW YORK, NY 10022</td>
<td>13-6132268</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>BOAS OBRAS INC</td>
<td>776A ORVIL SMITH RD HARVEST, AL 35749</td>
<td>82-3171964</td>
<td>501 (C) 3</td>
<td>16,900.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BOB BAKER MARIONETTE THEATER</td>
<td>4949 YORK BLVD LOS ANGELES, CA 90042</td>
<td>83-0977614</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOB WOODRUFF FAMILY FOUNDATION INC</td>
<td>1350 BROADWAY RM 905 NEW YORK, NY 10018</td>
<td>26-1441650</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
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<td>26-4289171</td>
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<td>50,000.</td>
<td>FMV</td>
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<td>65-0238234</td>
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<td>6,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BOCA GRANDE HEALTH CLINIC FOUNDATION INC</td>
<td>PO BOX 2340 BOCA GRANDE, FL 33921</td>
<td>57-1160149</td>
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<td>BOCA RATON CHAMPIONS GOLF CHARITIES INC</td>
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<td>800 MEADOWS RD BOCA RATON, FL 33486</td>
<td>59-2406425</td>
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<td>14,300.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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(Form 990)

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I**
General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>2</td>
<td>BOERNE BIBLE EVANGELICAL FREE CHURCH</td>
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<td>3</td>
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<td>72-1315302</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>BOISE RESCUE MISSION</td>
<td>82-0259387</td>
<td>501 (C) 3</td>
<td>104,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>BOISE STATE UNIVERSITY FOUNDATION INC</td>
<td>82-6010706</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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<td>BOISE SUNRISE FOUNDATION</td>
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<td>10,000</td>
<td>FMV</td>
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<td>7</td>
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<td>BOLLES SCHOOL</td>
<td>59-0637814</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9</td>
<td>BON SECOURS RICHMOND HEALTH CARE FOUNDATION</td>
<td>54-1201346</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>BON SECOURS WARWICK HEALTH FOUNDATION</td>
<td>14-1972807</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>BONEI OLAM INC</td>
<td>41-3347357</td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

## Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes  
   - No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### Part II

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BONHOMME PRESBYTERIAN CHURCH INC</td>
<td>14820 CONWAY RD CHESTERFIELD, MO 63017</td>
<td>501 (C) 3</td>
<td>91,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) BONNER COMMUNITY FOOD CENTER</td>
<td>1707 CULVERS DR SANDPOINT, ID 83864</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) BONNER COUNTY HOMELESS TASK FORCE</td>
<td>PO BOX 1696 SANDPOINT, ID 83864</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) BONNIE BRAE</td>
<td>3415 VALLEY RD LIBERTY CORNER, NJ 7938</td>
<td>501 (C) 3</td>
<td>7,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) BOOK BANK FOUNDATION INC</td>
<td>2625 PIEDMONT RD NE STE 56 # 290 ATLANTA, GA</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) BOOK HARVEST</td>
<td>2501 UNIVERSITY DR DURHAM, NC 27707</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) BOOK OF MORMON ARCHAEOLOGICAL FORUM INC</td>
<td>553 E 100 N AMERICAN FORK, UT 84003</td>
<td>501 (C) 3</td>
<td>600,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) BOOK TRUST</td>
<td>789 N SHERMAN ST DENVER, CO 80203</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) BOOKS AND BREAKFAST</td>
<td>419 GREENWOOD ST EVANSTON, IL 60201</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) BOOKS BETWEEN KIDS INC</td>
<td>PO BOX 25072 HOUSTON, TX 77265</td>
<td>501 (C) 3</td>
<td>44,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) BOOKS FOR AFRICA INC</td>
<td>717 PRIOR AVE N STE B ST PAUL, MN 55104</td>
<td>501 (C) 3</td>
<td>164,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) BOONE CENTER INC</td>
<td>200 TRADE CENTER DR W SAINT PETERS, MO 6337</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

### 1 (a) Name and address of organization or government

<table>
<thead>
<tr>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) BOOTHBAY BAPTIST CHURCH  
PO BOX 64 BOOTHBAY, ME 4537  
01-0391436  
501 (C) 3  
6,300.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (2) BOOTHBAY REGION LAND TRUST INC  
60 SAMSOET ROAD BOOTHBAY HARBOR, ME 4538  
01-0371869  
501 (C) 3  
6,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (3) BORDER NETWORK FOR HUMAN RIGHTS  
2115 N PIEDRAS ST EL PASO, TX 79930  
74-2493012  
501 (C) 3  
126,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (4) BOREALIS PHILANTHROPY  
PO BOX 3295 MINNEAPOLIS, MN 55403  
46-4598642  
501 (C) 3  
201,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (5) BORIS HENSON FOUNDATION INC  
2049 CENTURY PARK E STE 1400 LOS ANGELES, CA 90067  
82-3814846  
501 (C) 3  
52,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (6) BORN FREE USA UNITED WITH ANIMAL PROTECTION  
PO BOX 32160 WASHINGTON, DC 20007  
94-6187633  
501 (C) 3  
5,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (7) BOSCO CATHOLIC SCHOOL SYSTEM  
PO BOX 106 405 16TH AVE GILBERTVILLE, IA 50166  
42-0788230  
501 (C) 3  
65,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (8) BOSTON (BEACON HILL) CHURCH OF THE ADVENT  
30 BRIMMER ST BOSTON, MA 2108  
04-2135770  
501 (C) 3  
5,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (9) BOSTON ACADEMY OF THE SACRED HEART INC  
785 CENTRE ST NEWTON, MA 2458  
04-2541393  
501 (C) 3  
13,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (10) BOSTON AREA GLEANERS INC  
240 BEAVER ST WALTHAM, MA 2452  
30-0434755  
501 (C) 3  
6,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (11) BOSTON AREA RAPE CRISIS CENTER INC  
99 BISHOP RICHARD ALLEN DR CAMBRIDGE, MA 2138  
04-2974983  
501 (C) 3  
13,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM
| (12) BOSTON BALLET INC  
19 CLARENDON ST BOSTON, MA 2116  
04-2312734  
501 (C) 3  
11,816.  
FMV  
N/A  
FOR RECIPIENT'S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Attach to Form 990.**

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**Name of the organization**

**Employer identification number**

**SCHEDULE I**

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>BOSTON BAR FOUNDATION INC</td>
<td>04-6111344</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>BOSTON BUILDING MATERIAL COOP CHARITABLE &amp;</td>
<td>04-2749815</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>BOSTON CHINATOWN NEIGHBORHOOD CENTER INC</td>
<td>04-6528581</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>BOSTON COLLABORATIVE INC</td>
<td>82-5139472</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>BOSTON COLLEGE HIGH SCHOOL</td>
<td>04-2103899</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>BOSTON COLLEGE TRUSTEES</td>
<td>04-2103545</td>
<td>501 (C) 3</td>
<td>620,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>BOSTON CYCLISTS UNION</td>
<td>04-1503911</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>BOSTON EARLY MUSIC FESTIVAL INC</td>
<td>80-0579364</td>
<td>501 (C) 3</td>
<td>21,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>BOSTON FOUNDATION INC</td>
<td>04-2004021</td>
<td>501 (C) 3</td>
<td>214,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>BOSTON GLOBE FOUNDATION INC</td>
<td>04-2731195</td>
<td>501 (C) 3</td>
<td>14,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</table>
### Part I | General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</thead>
<tbody>
<tr>
<td>1. BOSTON HEALTH CARE FOR THE HOMELESS PROGRAM</td>
<td>04-3160480</td>
<td>501 (c) 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. BOSTON IMPACT INITIATIVE FUND</td>
<td>82-1543658</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>3. BOSTON LATIN SCHOOL ASSOCIATION</td>
<td>04-6035973</td>
<td>501 (c) 3</td>
<td>14,635.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. BOSTON LYRIC OPERA COMPANY</td>
<td>04-2469627</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. BOSTON MEDICAL CENTER CORPORATION</td>
<td>04-3314093</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>6. BOSTON MODERN ORCHESTRA PROJECT INC</td>
<td>04-3238554</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>7. BOSTON PROJECT MINISTRIES INC</td>
<td>04-3395307</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. BOSTON PUBLIC LIBRARY FUND INC</td>
<td>04-3150560</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. BOSTON RESCUE MISSION INC</td>
<td>04-2104726</td>
<td>501 (c) 3</td>
<td>18,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. BOSTON SYMPHONY ORCHESTRA INC</td>
<td>04-2103550</td>
<td>501 (c) 3</td>
<td>492,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. BOSTON TRINITY ACADEMY INC</td>
<td>04-3580876</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. BOTH HANDS FOUNDATION</td>
<td>26-1879659</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1</td>
<td>BOTTOM LINE INC</td>
<td>50-3351427</td>
<td>C-3</td>
<td>112,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>BOULDER BACH FESTIVAL</td>
<td>84-0861185</td>
<td>C-3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3</td>
<td>BOULDER CHINESE BAPTIST CHURCH</td>
<td>84-1336996</td>
<td>C-3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>BOULDER COMMUNITY BROADCAST ASSOCIATION INC</td>
<td>84-0690097</td>
<td>C-3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>BOULDER COUNTY ARTS ALLIANCE INC</td>
<td>84-0566939</td>
<td>C-3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>6</td>
<td>BOULDER JEWISH COMMUNITY CENTER</td>
<td>84-1322996</td>
<td>C-3</td>
<td>137,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>BOULDER JUNCTION FIRE DEPARTMENT</td>
<td>39-6018408</td>
<td>C-3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>BOULDER OUTDOOR SURVIVAL SCHOOL</td>
<td>82-3344499</td>
<td>C-3</td>
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<td>9</td>
<td>BOULDER SHELTER FOR THE HOMELESS INC</td>
<td>84-1041149</td>
<td>C-3</td>
<td>11,100.</td>
<td>FMV</td>
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<td>10</td>
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<td>C-3</td>
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<td>FMV</td>
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<td>11</td>
<td>BOUNTIFUL COMMUNITY FOOD PANTRY</td>
<td>84-1628459</td>
<td>C-3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>BOWDOIN COLLEGE</td>
<td>5000 COLLEGE STA BRUNSWICK, ME 4011</td>
<td>C-3</td>
<td>236,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

Employee identification number

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) BOWIE CROFTON PREGNANCY CENTER INC</td>
<td>4341 NORTHVIEW DR BOWIE, MD 20716</td>
<td>52-1436787</td>
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<tr>
<td>(2) BOWLING GREEN STATE UNIVERSITY FOUNDATION 1</td>
<td>1851 N RESEARCH DR BOWLING GREEN, OH 43403</td>
<td>36-6007199</td>
<td>501 (C) 3</td>
<td>212,755.</td>
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<td>4000 TERRA DR PALO ALTO, CA 94306</td>
<td>77-0403885</td>
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<td>14,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) BOWMANS HILL WILDFLOWER PRESERVE ASSOCIATI0N</td>
<td>1635 RIVER RD NEW HOPE, PA 18938</td>
<td>23-6262778</td>
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<td>10,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) BOX TURTLE PRESS INC</td>
<td>PO BOX 5548 STATELINE, NV 89449</td>
<td>85-4155414</td>
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<td>(6) BOY SCOUTS OF AMERICA</td>
<td>60 WELLESLEY RD MILFORD, CA 94404</td>
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<td>(7) BOY SCOUTS OF AMERICA</td>
<td>475 RIVERSIDE DR STE 600 NEW YORK, NC 27604</td>
<td>13-1624015</td>
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<td>54,500.</td>
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<td>(8) BOY SCOUTS OF AMERICA</td>
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<td>53-0204610</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>(11) BOY SCOUTS OF AMERICA</td>
<td>3231 ATLANTIC AVE RALEIGH, IL 60601</td>
<td>56-1788551</td>
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<td>64,000.</td>
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<td>(12) BOY SCOUTS OF AMERICA</td>
<td>1222 E FRANKLIN BLVD GASTONIA, OH 43623</td>
<td>56-0529991</td>
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<td>25,000.</td>
<td>FMV</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>BOY SCOUTS OF AMERICA 1800 CIRCLE 75 NWY SE ATLANTA, PA 19341</td>
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<td>BOY SCOUTS OF AMERICA PO BOX 399 JEFFERSON, NC 28054</td>
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<td>BOY SCOUTS OF AMERICA 516 LIBERTY NWY VESTAVIA, MN 55111</td>
<td>62-0302107</td>
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<td>BOY SCOUTS OF AMERICA PO BOX 8728 TOLEDO, VA 23230</td>
<td>34-4429745</td>
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<td>FMV</td>
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<td>BOY SCOUTS OF AMERICA 850 FOREST EDGE DR VERNON HILLS, CA 90026</td>
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<td>43-0652676</td>
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<td>BOY SCOUTS OF AMERICA 10210 HOLMES RD KANSAS CITY, IN 64256</td>
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<td>BOY SCOUTS OF AMERICA 2333 SCOUT WAY LOS ANGELES, CA 90026</td>
<td>95-1643982</td>
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<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>3</td>
<td>BOYCE L ANSLEY SCHOOL INC</td>
<td>120 RALPH MCGILL BLVD BLDG 3 STE B1 ATLANTA, GA 30307</td>
<td>82-3440705</td>
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<td>$23,500.</td>
<td>FMV</td>
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<td>4</td>
<td>BOYER CHILDREN'S CLINIC</td>
<td>1850 BOYER AVE E SEATTLE, WA 98112</td>
<td>91-1316029</td>
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<td>FMV</td>
<td>N/A</td>
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<td>BOYLAN CENTRAL CATHOLIC HIGH SCHOOL</td>
<td>4000 SAINT FRANCIS DR ROCKFORD, IL 61013</td>
<td>36-2435617</td>
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<td>$261,700.</td>
<td>FMV</td>
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<td>BOYS &amp; GIRLS CLUB FOX VALLEY INC</td>
<td>160 S BADGER AVE APPLETON, WI 54914</td>
<td>39-1225709</td>
<td>501 (C) 3</td>
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<td>95-6194547</td>
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<td>22-1589377</td>
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<td>11</td>
<td>BOYS &amp; GIRLS CLUB OF EASTON INC</td>
<td>PO BOX 741 EASTON, PA 18044</td>
<td>23-1941228</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>70 NICK COSMOS WAY HOLYOKE, MA 1040</td>
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<td>$15,000.</td>
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Schedule I (Form 990) 2020
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️ No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) BOYS &amp; GIRLS CLUB OF GREENWICH INC</td>
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<td>(3) BOYS &amp; GIRLS CLUB OF MARSHFIELD INC</td>
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<td>FMV</td>
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<tr>
<td>(4) BOYS &amp; GIRLS CLUB OF MARTIN COUNTY INC</td>
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<td>(6) BOYS &amp; GIRLS CLUB OF SOUTHEAST GEORGIA INC</td>
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<td>(7) BOYS &amp; GIRLS CLUB OF ST LUCIE COUNTY INC</td>
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<td>(8) BOYS &amp; GIRLS CLUB OF THE CENTRAL COAST</td>
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<td>(9) BOYS &amp; GIRLS CLUB OF THE NORTHERN PLAINS IN</td>
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<td>FMV</td>
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<td>(11) BOYS &amp; GIRLS CLUB OF THE UMPQUA VALLEY</td>
<td>91-1788798</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) BOYS &amp; GIRLS CLUB OF TOLEDO</td>
<td>34-4427933</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☒  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOYS &amp; GIRLS CLUB OF TUCSON</td>
<td>86-0172257</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BOYS &amp; GIRLS CLUBS FOUNDATION OF INDIAN RIV</td>
<td>45-3200101</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS INC</td>
<td>61-0568789</td>
<td>501 (c) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>BOYS &amp; GIRLS CLUBS OF AMERICA</td>
<td>13-5562976</td>
<td>501 (c) 3</td>
<td>408,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF ANNAPOLIS &amp; ANN ARUN</td>
<td>52-1736346</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF BENTON AND FRANKLIN C</td>
<td>91-1673327</td>
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<td>70,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF CENTRAL VIRGINIA</td>
<td>54-1602004</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF CHICAGO INC</td>
<td>36-2166997</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF GENEVA INC</td>
<td>16-1481026</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF GREATER DALLAS INC</td>
<td>75-1152657</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF GREATER SALT LAKE</td>
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<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BOYS &amp; GIRLS CLUBS OF GREATER WASHINGTON IN</td>
<td>53-0236759</td>
<td>501 (c) 3</td>
<td>97,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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Schedule I (Form 990) 2020

JSA

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   [ ] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) BOYS &amp; GIRLS CLUBS OF SOUTH PUGET SOUND</td>
<td>91-0759832</td>
<td>501 (C) 3</td>
<td>91,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3875 S 66TH ST STE 101 TACOMA, WA 98409</td>
<td></td>
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<td></td>
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<tr>
<td>(2) BOYS &amp; GIRLS CLUBS OF SOUTH PUGET SOUND</td>
<td>91-1597689</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3875 S 66TH ST TACOMA, WA 98409</td>
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<tr>
<td>(3) BOYS &amp; GIRLS CLUBS OF SOUTHERN MAINE</td>
<td>01-0211543</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>277 CUMBERLAND AVE PORTLAND, ME 4101</td>
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<tr>
<td>(4) BOYS &amp; GIRLS CLUBS OF ST HELENA &amp; CALISTOGA</td>
<td>68-0226714</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1420 TAINTER ST SAINT HELENA, CA 94574</td>
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<tr>
<td>(5) BOYS &amp; GIRLS CLUBS OF THE COASTAL PLAIN INC</td>
<td>56-0927694</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>621 W FIRE TOWER RD WINTERVILLE, NC 28590</td>
<td></td>
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<tr>
<td>(6) BOYS &amp; GIRLS CLUBS OF THE DANVILLE AREA</td>
<td>54-1880308</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>123 FOSTER ST DANVILLE, VA 24541</td>
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<td></td>
</tr>
<tr>
<td>(7) BOYS AND GIRLS CLUB OF CARLSBAD</td>
<td>95-2131503</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2730 BRENNI RANCH WAY CARLSBAD, CA 92009</td>
<td></td>
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<tr>
<td>(8) BOYS AND GIRLS CLUB OF DANE COUNTY INC</td>
<td>39-1925617</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1818 W BELTLINE HWY MADISON, WI 53713</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(9) BOYS AND GIRLS CLUB OF EVANSVILLE INC</td>
<td>35-1007558</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 6311 EVANSVILLE, IN 47719</td>
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<td>(10) BOYS AND GIRLS CLUB OF FAUQUIER INC</td>
<td>54-1815587</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>169 KEITH ST WARRENTON, VA 20186</td>
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<tr>
<td>(11) BOYS AND GIRLS CLUB OF GREATER MILWAUKEE IN</td>
<td>39-0806292</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1558 N 6TH ST MILWAUKEE, WI 53212</td>
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<tr>
<td>(12) BOYS AND GIRLS CLUB OF GREATER SALEM INC</td>
<td>02-6017326</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 GERMONTY DR SALEM, NH 3079</td>
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<td></td>
<td></td>
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<td></td>
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<tr>
<td>(1) BOYS AND GIRLS CLUB OF KENOSHA INC</td>
<td>1330 52ND ST KENOSHA, WI 53140</td>
<td>39-1732935</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) BOYS AND GIRLS CLUB OF LAGUNA BEACH</td>
<td>1085 LAGUNA BEACH CANYON ROAD LAGUNA BEACH,</td>
<td>95-1878822</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BOYS AND GIRLS CLUB OF LAKE COUNTY</td>
<td>1801 SHERIDAN RD STE 202 NORTH CHICAGO, IL</td>
<td>36-4266009</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) BOYS AND GIRLS CLUB OF LAKE TAHOE</td>
<td>PO BOX 17846 SOUTH LAKE TAHOE, CA 96151</td>
<td>68-0241891</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) BOYS AND GIRLS CLUB OF LANGLADE COUNTY INC</td>
<td>411 SUPERIOR ST ANTIGO, WI 54409</td>
<td>39-1980025</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) BOYS AND GIRLS CLUB OF NEW ROCHELLE INC</td>
<td>79 SEVENTH ST NEW ROCHELLE, NY 10801</td>
<td>13-1943644</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) BOYS AND GIRLS CLUB OF PATerson and PASSAIC</td>
<td>264 21ST AVE PATerson, NJ 7501</td>
<td>22-1726665</td>
<td>501 (C) 3</td>
<td>444,620.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) BOYS AND GIRLS CLUB of SANTA CLARA VALLEY</td>
<td>PO BOX 152 SANTA PAULA, CA 93061</td>
<td>85-2497853</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) BOYS AND GIRLS CLUB of ST MARYs INC</td>
<td>25 N SAINT MARYs ST SAINT MARYs, PA 15857</td>
<td>25-0965253</td>
<td>501 (C) 3</td>
<td>7,679.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) BOYS AND GIRLS CLUB of THE BEMIDJI AREA</td>
<td>PO BOX 191 BEMIDJI, MN 56619</td>
<td>81-0599601</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) BOYS AND GIRLS CLUB of THE BIG ISLAND</td>
<td>100 KAMAKAHONU ST HILO, HI 96720</td>
<td>81-0575345</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) BOYS AND GIRLS CLUB of THE GREATER SANTIAM</td>
<td>305 S 5TH ST LEBANON, OR 97355</td>
<td>52-1043668</td>
<td>501 (C) 3</td>
<td>155,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - Yes ☑️  
   - No ☐

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1.</td>
<td>BOYS AND GIRLS CLUB OF THE WISCONSIN RAPIDS</td>
<td>501 W GRAND AVE MISC RAPIDS, WI 54495</td>
<td>39-1745942</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2.</td>
<td>BOYS AND GIRLS CLUB OF TRANSYLVANIA COUNTY</td>
<td>11 GALLIMORE RD BREVARD, NC 28712</td>
<td>56-2142829</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>BOYS AND GIRLS CLUB OF VENICE INC</td>
<td>2232 LINCOLN BLVD VENICE, CA 90291</td>
<td>95-6209203</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>BOYS AND GIRLS CLUB OF VISTA INC</td>
<td>410 W CALIFORNIA AVE VISTA, CA 92083</td>
<td>95-2266749</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>BOYS AND GIRLS CLUBS OF ALBANY INC</td>
<td>21 DELAWARE AVE ALBANY, NY 12210</td>
<td>14-1338303</td>
<td>501 (C) 3</td>
<td>22,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>BOYS AND GIRLS CLUBS OF BOSTON INC</td>
<td>200 HIGH ST LBBY 3 BOSTON, MA 2110</td>
<td>04-2103922</td>
<td>501 (C) 3</td>
<td>187,250</td>
<td>FMV</td>
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<td>7.</td>
<td>BOYS AND GIRLS CLUBS OF CHAFFEE COUNTY</td>
<td>PO BOX 1430 SALIDA, CO 81201</td>
<td>55-0907901</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<td>8.</td>
<td>BOYS AND GIRLS CLUBS OF CLEVELAND</td>
<td>6114 BROADWAY AVE CLEVELAND, OH 44127</td>
<td>34-0370686</td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>BOYS AND GIRLS CLUBS OF DORCHESTER INC</td>
<td>1135 DORCHESTER AVE DORCHESTER, MA 2125</td>
<td>23-7076465</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<td>10.</td>
<td>BOYS AND GIRLS CLUBS OF GREATER HOUSTON INC</td>
<td>815 CROSBY ST HOUSTON, TX 77019</td>
<td>76-0270942</td>
<td>501 (C) 3</td>
<td>13,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11.</td>
<td>BOYS AND GIRLS CLUBS OF HARTFORD INC</td>
<td>170 SIGOURNEY ST HARTFORD, CT 6105</td>
<td>06-6026005</td>
<td>501 (C) 3</td>
<td>72,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12.</td>
<td>BOYS AND GIRLS CLUBS OF KING COUNTY</td>
<td>603 STEWART ST STE 300 SEATTLE, WA 98101</td>
<td>91-0532600</td>
<td>501 (C) 3</td>
<td>59,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

I Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ......................................................... X Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BOYS AND GIRLS CLUBS OF LOWCOUNTRY INC</td>
<td>57-0811876</td>
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<tr>
<td>10 PICKNEY COLONY ROAD BLUFFTON, SC 29909</td>
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<td>(2) BOYS AND GIRLS CLUBS OF NORTHEAST FLORIDA I</td>
<td>59-6167630</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>555 W 25TH ST JACKSONVILLE, FL 32206</td>
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<td>(3) BOYS AND GIRLS CLUBS OF PALM BEACH COUNTY I</td>
<td>23-7060561</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>800 NORTHPOINT PKWY FL WEST PALM BEACH, FL</td>
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<tr>
<td>(4) BOYS AND GIRLS CLUBS OF SANTA CRUZ COUNTY</td>
<td>94-6129075</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>543 CENTER ST SANTA CRUZ, CA 95060</td>
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<tr>
<td>(5) BOYS AND GIRLS CLUBS OF THE LOS ANGELES BAR</td>
<td>95-1661682</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1200 S CABRILLO AVE SAN PEDRO, CA 90731</td>
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<tr>
<td>(6) BOYS AND GIRLS CLUBS OF THE TWIN CITIES</td>
<td>41-0842657</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>690 JACKSON ST SAINT PAUL, MN 55130</td>
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<tr>
<td>(7) BOYS AND GIRLS OF NORTH LAKE TAHOE</td>
<td>31-1549603</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1617 KINGS BEACH, CA 96143</td>
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<tr>
<td>(8) BOYS CLUB OF EAST AURORA INC</td>
<td>16-0755732</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>24 FAINE ST EAST AURORA, NY 14052</td>
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<tr>
<td>(9) BOYS CLUB OF MOUNT KISCO INC</td>
<td>13-1739924</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>351 MAIN ST MOUNT KISCO, NY 10549</td>
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<tr>
<td>(10) BOYS CLUB OF NEW YORK INC</td>
<td>13-5591750</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>287 E 10TH ST NEW YORK, NY 10009</td>
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<tr>
<td>(11) BOYS CLUBS &amp; GIRLS CLUBS OF NEWPORT COUNTY</td>
<td>05-0281572</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>95 CHURCH ST NEWPORT, RI 2840</td>
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<td>(12) BOYS FARM INC</td>
<td>57-0446897</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6655 SC HWY 121-34 NEWBERRY, SC 29108</td>
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</tbody>
</table>

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3 Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020

JSA 081288 1.000
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) BOYS GIRLS OF GREATER CINCINNATI INC</td>
<td>600 DALTON AVE CINCINNATI, OH 45203</td>
<td>31-0536965 501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) BOYS HOME INCORPORATED</td>
<td>414 BOYS HOME RD COVINGTON, VA 24426</td>
<td>54-0505870 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BOYS HOPE GIRLS HOPE</td>
<td>367 CLEMONT AVE BROOKLYN, CA 92614</td>
<td>13-2990982 501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) BOYS HOPE GIRLS HOPE</td>
<td>9619 GARFIELD BLVD CLEVELAND, NY 11238</td>
<td>34-1534921 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) BOYS HOPE GIRLS HOPE</td>
<td>2400 READING RD STE 139 CINCINNATI, OH 4412</td>
<td>31-1054816 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) BOYS HOPE GIRLS HOPE</td>
<td>12120 BRIDGETON SQ BRIDGETON, MO 63044</td>
<td>51-0182614 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) BOYS HOPE GIRLS HOPE</td>
<td>17701 COWAN ST 150 IRVINE, OH 45202</td>
<td>36-3734433 501 (C) 3</td>
<td>116,220.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) BOYS LATIN OF PHILADELPHIA CHARTER SCHOOL</td>
<td>CHARTER SCHOOL 5501 CEDAR AVENUE PHILADELPH</td>
<td>20-3597185 501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) BOYS LATIN SCHOOL OF MARYLAND INCORPORATED</td>
<td>822 W LAKE AVE BALTIMORE, MD 21210</td>
<td>52-0735085 501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BOYS TOWN JERUSALEM FOUNDATION OF AMERICA I</td>
<td>1 PENN PLZ STE 6250 NEW YORK, NY 10119</td>
<td>11-5324002 501 (C) 3</td>
<td>24,720.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BRAC USA INC</td>
<td>110 WILLIAM STREET 29TH FLOOR NEW YORK, NY</td>
<td>20-8456741 501 (C) 3</td>
<td>32,571.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BRACKENRIDGE PARK CONSERVANCY</td>
<td>531 BRACKENRIDGE AVE SAN ANTONIO, TX 78209</td>
<td>26-3416330 501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020

VANGUARD CHARITABLE ENDOWMENT PROGRAM 23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>1</td>
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<td>51,500.</td>
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<td>2</td>
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<td>37-0661494</td>
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<td>3</td>
<td>BRADLEY WESLEY UNITED METHODIST CHURCH</td>
<td>36-2614818</td>
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<td>FMV</td>
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<td>4</td>
<td>BRADLEY CENTER TO PREVENT GUN VIOLENCE</td>
<td>52-1285097</td>
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<td>70,640.</td>
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<td>5</td>
<td>BRAHMANANDA SARASWATI YAGYA FOUNDATION</td>
<td>46-3250017</td>
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<td>FMV</td>
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<td>6</td>
<td>BRAIN EDUCATION STRATEGIES AND TECHNOLOGY</td>
<td>81-4352961</td>
<td>501 (C) 3</td>
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<td>7</td>
<td>BRANDERIS UNIVERSITY</td>
<td>04-2103552</td>
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<td>8</td>
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<td>61-0925891</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>BRANDON LUTHERAN CHURCH</td>
<td>46-6034467</td>
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<td>FMV</td>
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<td>10</td>
<td>BRANDYWINE CONSERVANCY &amp; MUSEUM OF ART</td>
<td>51-6020908</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>BRANDYWINE VALLEY SOCIETY FOR THE PREVENTION</td>
<td>23-1381030</td>
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<td>12</td>
<td>BRENFOOD COMMUNITY FOUNDATION</td>
<td>06-1032832</td>
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<td>FMV</td>
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</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(4) BRAVO COLORADO AT VAIL-BEAVER CREEK</td>
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<td>2271 N FRONTAGE RD W STE C VAIL, CO 81657</td>
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<td>(5) BRAWL FOR A CAUSE INC</td>
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<td>318 4TH ST NE ATLANTA, GA 30308</td>
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<td>345 7TH AVE RM 1401 NEW YORK, NY 10001</td>
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<td>(7) BRAZORIA COUNTY HISTORICAL MUSEUM INC</td>
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<td>501 (c) 3</td>
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<td>76-0321913</td>
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<td>(10) BRAZOS VALLEY FOOD BANK INC</td>
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<td></td>
<td>PO BOX 74 BRYAN, TX 77806</td>
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<td>(11) BREAD &amp; ROSES COMMUNITY FUND</td>
<td>23-2047297</td>
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<td>100 S BROAD ST STE 1600 PHILADELPHIA, PA 19</td>
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<td>1525 7TH ST NW WASHINGTON, DC 20001</td>
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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) BREAD FOR THE WORLD INSTITUTE INC</td>
<td>425 3RD ST SW STE 1200 WASHINGTON, DC 20024</td>
<td>51-0175550</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) BREAD LINE INC</td>
<td>PO BOX 73715 FAIRBANKS, AK 99707</td>
<td>92-0111082</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) BREAD OF LIFE ANGLICAN CHURCH - ITHACA, NY</td>
<td>408 WEST STATE STREET ITHACA, NY 14850</td>
<td>46-1380087</td>
<td>501 (c) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) BREAD OF THE MIGHTY FOOD BANK INC</td>
<td>325 NW 10TH AVE GAINESVILLE, FL 32601</td>
<td>59-2805577</td>
<td>501 (c) 3</td>
<td>243,200.</td>
<td>FMV</td>
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<tr>
<td>(5) BREAKTHROUGH</td>
<td>1050 E 11TH ST STE 350 AUSTIN, TX 78702</td>
<td>74-2991346</td>
<td>501 (c) 3</td>
<td>37,000.</td>
<td>FMV</td>
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<tr>
<td>(6) BREAKTHROUGH NEW YORK INC</td>
<td>123 WILLIAM ST FL NEW NEW YORK, NY 10038</td>
<td>27-0628927</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>(7) BREAKTHROUGH OF GREATER PHILADELPHIA INC</td>
<td>34 W COULTER ST PHILADELPHIA, PA 19144</td>
<td>23-2789601</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>(8) BREAKTHROUGH SILICON VALLEY</td>
<td>1635 PARK AVE SAN JOSE, CA 95126</td>
<td>26-2168102</td>
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<td>30,500.</td>
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<td>(9) BREAKTHROUGH URBAN MINISTRIES INC</td>
<td>402 N SAINT LOUIS AVE CHICAGO, IL 60624</td>
<td>36-3810924</td>
<td>501 (c) 3</td>
<td>79,500.</td>
<td>FMV</td>
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<td>(10) BREAKWATER LEARNING</td>
<td>856 BRIGHTON AVE PORTLAND, ME 4102</td>
<td>01-0249577</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BREARLEY SCHOOL</td>
<td>610 E 83RD ST NEW YORK, NY 10028</td>
<td>13-1623915</td>
<td>501 (c) 3</td>
<td>189,200.</td>
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<td>N/A</td>
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<td>(12) BREAST CANCER ACTION</td>
<td>548 MARKET ST FMB 17179 SAN FRANCISCO, CA 9</td>
<td>94-3138992</td>
<td>501 (c) 3</td>
<td>91,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  
2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) BREAST CANCER ALLIANCE INC 48 MAPLE AVE GREENWICH, CT 6830 06-1453500 501 (C) 3 38,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(2) BREAST CANCER RESEARCH FOUNDATION INC 25 W 43RD ST STE 609 NEW YORK, NY 10036 13-3727250 501 (C) 3 467,780. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>23-2888152</td>
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<td>(3) BREAST CANCER RESOURCE CENTER 4807 SPICEWOOD SPRINGS RD AUSTIN, TX 78759 74-2743333 501 (C) 3 6,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(7) BREHEUF JESUIT PREPARATORY SCHOOL INC 2801 W 86TH ST INDIANAPOLIS, IN 46268 35-1062640 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(8) BRECK SCHOOL 123 OTTAWA AVE N MINNEAPOLIS, MN 55422 41-0693894 501 (C) 3 19,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(10) BREMEN CONSERVATION CLUB INC 8745 N SHORE DR BREMEN, IN 46506 35-1563265 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) BREMERTON SYMPHONY ASSOCIATION INC 532 5TH ST STE 16 BREMERTON, WA 98337 91-0836954 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(12) BRENT ELEY FOUNDATION 11980 E 16TH AVE AURORA, CO 80010 84-1387528 501 (C) 3 17,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..........................................................  
3. Enter total number of other organizations listed in the line 1 table: ........................................................................................................  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Brentwood Baptist Church - Brentwood, TN
7777 Concord Road Brentwood, TN 37027
62-0945312 501 (c) 3 39,600. FMV N/A FOR RECIPIENT'S EXEM

Brentwood Country Club Employee Scholarship
590 S Burlingame Ave Los Angeles, CA 90049
82-322354 501 (c) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM

Brentwood School
100 S Barrington Pl Los Angeles, CA 90049
95-1426236 501 (c) 3 33,500. FMV N/A FOR RECIPIENT'S EXEM

Brentwood United Methodist Church
Church Financial Office 309 Franklin Road B Brentwood, TN 37027
62-0546034 501 (c) 3 39,000. FMV N/A FOR RECIPIENT'S EXEM

Brentwood United Methodist Church
309 Franklin Road Brentwood, TN 37027
62-0546034 501 (c) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM

Brentwood United Methodist Church
1701 K St NW Ste 950 Washington, DC 20006
52-1372430 501 (c) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM

Brevard College Corporation
1 Brevard College Dr Brevard, NC 28712
56-0532297 501 (c) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM

Brevard Music Center Incorporated
PO Box 312 Brevard, NC 28712
56-0193935 501 (c) 3 125,000. FMV N/A FOR RECIPIENT'S EXEM

Brian Muha Memorial Foundation Inc
874 Helenhurst Ct Westerville, OH 43081
14-1920357 501 (c) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM

Briar University
3000 Rebeccaw St Sioux City, IA 51104
42-0707124 501 (c) 3 40,500. FMV N/A FOR RECIPIENT'S EXEM

Briarwood Presbyterian Church
2200 Briarwood Way Birmingham, AL 35243
63-0653634 501 (c) 3 6,900. FMV N/A FOR RECIPIENT'S EXEM

Brick by Brick Partners
232 7th St Brooklyn, NY 11215
56-2470061 501 (c) 3 250,000. FMV N/A FOR RECIPIENT'S EXEM

1 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
2 Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
**SCHEDULE I**
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
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**Part I**
**General Information on Grants and Assistance**
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
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<td>BRIDGE ACADEMY INC</td>
<td>02-0694031</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>BRIDGE BIBLE CHURCH OF THE MENNONITE BRETHR</td>
<td>20-0643904</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
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<tr>
<td>BRIDGE BOSTON FOUNDATION INC</td>
<td>27-5256986</td>
<td>501 (C) 3</td>
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<tr>
<td>BRIDGE CHURCH FREDERICKSBURG INC</td>
<td>83-3792693</td>
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<td>BRIDGE COMMUNITIES INC</td>
<td>36-3705951</td>
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<td>BRIDGE FUND</td>
<td>45-4745677</td>
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<td>BRIDGE FUND OF NEW YORK INC</td>
<td>13-3824852</td>
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<td>BRIDGE HOUSE</td>
<td>84-1440292</td>
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<td>BRIDGE HOUSING CORPORATION</td>
<td>94-2827909</td>
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<td>BRIDGE MINISTRIES OF BRYAN TEXAS</td>
<td>27-2067302</td>
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<td>BRIDGE OF COMMUNITY AND HOPE</td>
<td>26-2821107</td>
<td>501 (C) 3</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. ▶

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................. ▶

JSA
OE1288 1,000

18674H 1467 V 20-7.21
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?   
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>BRIDGE OVER TROUBLED WATERS INC</td>
<td>68</td>
<td>501 (C) 3</td>
<td>60,200.</td>
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<td>BRIDGE STREET HOUSE OF PRAYER</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRIDGE THE GAP COLLEGE PREP</td>
<td>BRIDGE TO A CURE FOUNDATION INC</td>
<td>501 (C) 3</td>
<td>36,250.</td>
<td>FMV</td>
<td>N/A</td>
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<td>BRIDGE TO A CURE FOUNDATION INC</td>
<td>2031</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BRIDGEHAMPTON CHILD CARE &amp; RECREATIONAL CEN</td>
<td>BRIDGEPOINT CHURCH INC</td>
<td>13277</td>
<td>1334355</td>
<td>173,400.</td>
<td>FMV</td>
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<td>FMV</td>
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<tr>
<td>BRIDGEPORT HOSPITAL FOUNDATION INC</td>
<td>1267</td>
<td>501 (C) 3</td>
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<tr>
<td>BRIDGEPORT RESCUE MISSION INC</td>
<td>BRIDGEPORT ROMAN CATHOLIC DIOCESAN CORPORAT</td>
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<td>BRIDGEPORT ROMAN CATHOLIC DIOCESAN CORPORAT</td>
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<td>BRIDGEPORT ROTARY CLUB FOUNDATION INC</td>
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<td>BRIDGECARE</td>
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<td>8,120.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

2. Enter total number of other organizations listed in the line 1 table
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ........................................................................... Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>BRIDGES FROM SCHOOL TO WORK INC</td>
<td>52-1655740</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRIDGES OF HOPE</td>
<td>72-1538846</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BRIDGECITY CHURCH</td>
<td>81-1992757</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRIDGEWATER COLLEGE</td>
<td>54-0506306</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRIDGEWAY HUMAN SERVICES INC</td>
<td>84-1390391</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BRIDGETOWN CHURCH</td>
<td>41-1725396</td>
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<td>N/A</td>
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<tr>
<td>BRIGHAM YOUNG UNIVERSITY</td>
<td>87-0217280</td>
<td>501 (C) 3</td>
<td>275,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRIGHT BEGINNINGS COMMUNITY DEVELOPMENT COR</td>
<td>83-2738452</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>BRIGHT BEGINNINGS INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>BRIGHT FUNDS FOUNDATION</td>
<td>46-2109112</td>
<td>501 (C) 3</td>
<td>14,584,376.</td>
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<tr>
<td>BRIGHT PROSPER</td>
<td>52-2363234</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>739 WESTVIEW ST PHILADELPHIA, PA 19119</td>
<td>83-0995509</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ![Yes](true) ![No](false)

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>BRIGHTFOCUS FOUNDATION</td>
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<td>BRIGHTON CENTER INC</td>
<td>61-0673886</td>
<td>501 (C) 3</td>
<td>75,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BRIDGID ALLIANCE INC</td>
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<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BRINNER &amp; MAY SCHOOL</td>
<td>04-2103935</td>
<td>501 (C) 3</td>
<td>11,250.</td>
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<td>BRING CHANGE 2 MIND</td>
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<td>BRINGING HOPE HOME INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BRITEPATHS INC</td>
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<td>16,500.</td>
<td>FMV</td>
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<td>BRITH SHalom BETH ISRAEL CONGREGATION - CHA</td>
<td>57-0364109</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BRITISH SCHOOLS AND UNIVERSITIES FOUNDATION</td>
<td>92-3843989</td>
<td>501 (C) 3</td>
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<td>BROAD INSTITUTE INC</td>
<td>13-6161189</td>
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<td>5,841,500.</td>
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<td>BROAD STREET MINISTRY</td>
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<td>233,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<tbody>
<tr>
<td>BROADCASTERS FOUNDATION OF AMERICA 125 W 55TH ST FL 4 NEW YORK, NY 10019 13-1975618 501 (C) 3</td>
<td>21,000</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BROADFUTURES INC 2013 H ST NW FL 5 WASHINGTON, DC 20006 46-3344842 501 (C) 3</td>
<td>101,500</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BROADWAY CARES-EQUITY FIGHTS AIDS INC 165 W 46TH ST STE 1300 NEW YORK, NY 10036 13-3458820 501 (C) 3</td>
<td>112,425</td>
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<td>BROADWAY CHRISTIAN CHURCH INC 910 BROADWAY FORT WAYNE, IN 46802 35-1308913 501 (C) 3</td>
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<td>FMV</td>
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<td>BROADWAY CHRISTIAN CHURCH OF MESA ARIZONA 7335 E BROADWAY RD MESA, AZ 85208 94-2598831 501 (C) 3</td>
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<tr>
<td>BROADWAYS BABIES FUND INC 336 W 37TH ST RM 500 NEW YORK, NY 10018 82-4317611 501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BROKEN STRENGTH 1121 LOIS CT SAINT PAUL, MN 55126 01-0966296 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BROKEN WALL PROJECT 5521 MEDWICK GARTH S CATONSVILLE, MD 21228 47-1865416 501 (C) 3</td>
<td>40,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BRONCO ATHLETIC ASSOCIATION INC 1910 UNIVERSITY DR BOISE, ID 83725 82-6026578 501 (C) 3</td>
<td>50,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>BRONFMAN YOUTH FELLOWSHIPS IN ISRAEL INC 418 BROADWAY STE 2 ALBANY, NY 12207 14-1836083 501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>BRONX COMMUNITY CHARTER SCHOOL 3170 WEBSTER AVE BRONX, NY 10467 61-1551201 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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</tr>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   [ ] Yes  [ ] No

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<tbody>
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<td>81-1023499</td>
<td>501 (C) 3</td>
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<tr>
<td>1202 Lexington Ave New York, NY 10028</td>
<td>81-1023499</td>
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<td>FMV</td>
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<td>13-3079387</td>
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<td>Bronx Overall Economic Development Corporat</td>
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<td>177 Pondfield Rd Bronxville, NY 10708</td>
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<td>Bronxville School Foundation Inc</td>
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<td>60 E Tremont Ave Bronx, NY 10453</td>
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<td>Brooke USA Inc</td>
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<td>18500 W Burleigh Rd Brookfield, WI 53045</td>
<td>39-6031643</td>
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<td>Brookhaven SDA School</td>
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<td>4658 Reedy Branch Rd Winterville, NC 28590</td>
<td>56-1956531</td>
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<td>Brookings Institution</td>
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<td>1775 Mass Ave NW Washington, DC 20036</td>
<td>53-0196577</td>
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<td>560,500.</td>
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<tr>
<td>Brookline Community Foundation Inc</td>
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<tr>
<td>40 Webster Pl Brookline, MA 2445</td>
<td>04-2103944</td>
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<tr>
<td>Brookline Community Managed Health Center Inc</td>
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<td>41 Garrison Rd Brookline, MA 2445</td>
<td>04-2263744</td>
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<td>FMV</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  .................................................................  X Yes  No

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>BROOKLINE FOOD PANTRY INC</td>
<td>47-2541926</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>BROOKLYN 2 NY FOURSQUARE CHURCH</td>
<td>81-4324859</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>BROOKLYN ACADEMY OF MUSIC INC</td>
<td>11-2201344</td>
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<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>BROOKLYN BAR ASSOCIATION VOLUNTEER LAWYERS</td>
<td>11-3155182</td>
<td>501 (C) 3</td>
<td>7,998.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>BROOKLYN BOTANIC GARDEN CORPORATION</td>
<td>11-2417338</td>
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<tr>
<td>6</td>
<td>BROOKLYN BRIDGE PARK CONSERVANCY INC</td>
<td>13-3277651</td>
<td>501 (C) 3</td>
<td>36,000.</td>
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<td>7</td>
<td>BROOKLYN BUREAU OF COMMUNITY SERVICE</td>
<td>11-1630780</td>
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<td>FMV</td>
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<td>8</td>
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<td>11-1904329</td>
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<td>FMV</td>
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<td>9</td>
<td>BROOKLYN COMMUNITY BAIL FUND INC</td>
<td>11-1014588</td>
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<td>11</td>
<td>BROOKLYN COMMUNITY HOUSING AND SERVICES INC</td>
<td>11-2549027</td>
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<td>16,000.</td>
<td>FMV</td>
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<td>12</td>
<td>BROOKLYN FRIENDS SCHOOL</td>
<td>11-1630751</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..................................................

2. Enter total number of other organizations listed in the line 1 table ..................................................

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. BROOKLYN HEIGHTS ASSOCIATION INC</td>
<td>11-1504005</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2. BROOKLYN HEIGHTS SYNAGOGUE</td>
<td>11-2404508</td>
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<td>N/A</td>
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<td>3. BROOKLYN INSTITUTE OF ARTS AND SCIENCES</td>
<td>11-1672743</td>
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<td>4. BROOKLYN JESUIT PREP</td>
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<td>5. BROOKLYN PARK EVANGELICAL FREE CHURCH</td>
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<td>8. BROOME ANIMAL SANCTUARY &amp; FARM INCORPORATED</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ______________________________________________________________

3. Enter total number of other organizations listed in the line 1 table: ______________________________________________________________

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>2. BROTHER RICE HIGH SCHOOL</td>
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<td>3. BROTHER WOLF ANIMAL RESCUE INC</td>
<td>20-8787719</td>
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<td>4. BROTHERHOOD OF HOPE INC</td>
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<td>6. BROTHERS BROTHER FOUNDATION</td>
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<td>7. BROTHERS FOR LIFE</td>
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<td>14,041.</td>
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<td>8. BROWARD EDUCATION FOUNDATION INC</td>
<td>59-2359433</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>9. BROWN UNIVERSITY OF PROVIDENCE</td>
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<td>1873 PROVIDENCE</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>10. BROWNCROFT COMMUNITY CHURCH INC</td>
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<td>11. BROWNING SCHOOL</td>
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<tr>
<td>12. BROWNSON MEMORIAL PRESBYTERIAN CHURCH</td>
<td>56-0681836</td>
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<td>26,000.</td>
<td>FMV</td>
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</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

**1.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
- Yes ☑
- No ☐

**2.** Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) BRUCE MUSEUM INC 1 MUSEUM DR GREENWICH, CT 6830</td>
<td>23-7105904</td>
<td>501 (C) 3</td>
<td>76,500</td>
<td>FMV</td>
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<tr>
<td>(2) BRUCE NIXON LIFE CHARITIES 536 E DUNLAP AVE PHOENIX, AZ 85020</td>
<td>82-1341410</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) BRUMBY ELEMENTARY SCHOOL FOUNDATION INC 815 TERRELL MILL RD SE MARIETTA, GA 30067</td>
<td>20-0288747</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) BRUNSWICK FAMILY ASSISTANCE AGENCY INC PO BOX 1551 SHALLOTTE, NC 28459</td>
<td>56-1309961</td>
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<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>(5) BRUNSWICK SCHOOL INC 100 MAHER AVE GREENWICH, CT 6830</td>
<td>06-0646562</td>
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<td>FMV</td>
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<td>(6) BRUSHWOOD CENTER AT RYERSON WOODS 21850 N RIVERWOODS RD RIVERWOODS, IL 60015</td>
<td>36-3715155</td>
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<td>(7) BRYAN COLLEGE 721 BRYAN DR DAYTON, TN 37321</td>
<td>62-0528217</td>
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<td>(8) BRYN ATHYN CHURCH OF THE NEW JERUSALEM PO BOX 277 BRYN ATHYN, PA 19009</td>
<td>23-1446512</td>
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<td>(9) BRYN MAWR COLLEGE 101 N MERION AVE BRYN MAWR, PA 19010</td>
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<td>(11) BRYN MAWR PRESBYTERIAN CHURCH 625 MONTGOMERY AVE BRYN MAWR, PA 19010</td>
<td>23-1352374</td>
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<td>(12) BRYN MAWR PRESBYTERIAN CHURCH FOUNDATION 625 MONTGOMERY AVE BRYN MAWR, PA 19010</td>
<td>23-2884108</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..................................................  
3. Enter total number of other organizations listed in the line 1 table ..................................................
### SCHEDULE I

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - [x] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>2. BRYN MAWR SCHOOL FOR GIRLS OF BALTIMORE CIT</td>
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<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. BUCK HILL COMMUNITY SERVICES COMMITTEE</td>
<td>23-6295968</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>16-6001555</td>
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<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (Yes) [ ] (No) [x]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>2. BUFFALO GENESEE CAMP MEETING ASSN</td>
<td>9574 SOMERSET DR BARKER, NY 14012</td>
<td>16-1101918</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
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<tr>
<td>3. BUFFALO NIAGARA CONVENTION &amp; VISITORS BUREA</td>
<td>403 MAIN ST STE 630 BUFFALO, NY 14203</td>
<td>10-0001221</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>4. BUFFALO PHILHARMONIC ORCHESTRA SOCIETY INC</td>
<td>786 DELAMARE AVE BUFFALO, NY 14209</td>
<td>16-0755739</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>5. BUFFALO SOCIETY OF NATURAL SCIENCES</td>
<td>1020 HUMBOLDT PKW BUFFALO, NY 14211</td>
<td>16-60000178</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<tr>
<td>6. BUILDING BRIDGES ACROSS THE RIVER</td>
<td>1901 MS AVE SE STE 101 WASHINGTON, DC 20020</td>
<td>52-2013526</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>7. BUILDING FOR THE ARTS NY INC</td>
<td>412 W 42ND ST FL 5 NEW YORK, NY 10036</td>
<td>13-2852371</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
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<td>8. BUILDING GOODNESS FOUNDATION</td>
<td>128 CARLTON RD CHARLOTTESVILLE, VA 22902</td>
<td>54-1956136</td>
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<td>37,500.</td>
<td>FMV</td>
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<td>9. BUILDING ONE COMMUNITY CORP</td>
<td>75 SELLECK ST STAMFORD, CT 6902</td>
<td>27-5024317</td>
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<td>10. BUILDING PROMISE USA</td>
<td>1110 CRIPPLE CREEK DR AUSTIN, TX 78758</td>
<td>83-3588856</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>11. BULLDOZ INC</td>
<td>1111 SUMMER ST STAMFORD, CT 6905</td>
<td>22-3128648</td>
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<td>100,992.</td>
<td>FMV</td>
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<tr>
<td>12. BUKAS LOOB SA DIYOS CLEVELAND</td>
<td>5027 BOULDER CREEK DR SOLON, OH 44139</td>
<td>34-1924343</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>13. BULLIS SCHOOL INC</td>
<td>10601 FALLS RD POTOMAC, MD 20854</td>
<td>52-0635080</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
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<tr>
<td>(1) BULLIS-PURISSIMA ELEMENTARY SCHOOL FOUNDATION</td>
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<td>48-1298690</td>
<td>501 (C) 3</td>
<td>224,334.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) BUNCOMBE STREET UNITED METHODIST CHURCH</td>
<td>PO BOX 1988 GREENVILLE, SC 29602</td>
<td>58-2289547</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) BUNKER HILL BAPTIST CHURCH</td>
<td>63 BUNKER HILL ROAD COLOMBIA, MS 39429</td>
<td>64-0626713</td>
<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) BUNNY BUNCH</td>
<td>PO BOX 2583 CHINO, CA 91708</td>
<td>33-0893379</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) BUONICONTI FUND TO CURE PARALYSIS INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) BUR OAK LAND TRUST</td>
<td>PO BOX 2523 IOWA CITY, IA 52244</td>
<td>42-1104058</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) BURIED TREASURES HOME INC</td>
<td>PO BOX 720672 BYRAM, MS 39272</td>
<td>64-0931808</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) BURKE COMMUNITY CHURCH</td>
<td>9900 OLD KEENE MILL RD BURKE, VA 22015</td>
<td>54-0992705</td>
<td>501 (C) 3</td>
<td>12,850</td>
<td>FMV</td>
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<tr>
<td>(9) BURKE MUSEUM ASSOCIATION</td>
<td>PO BOX 353010 SEATTLE, WA 98195</td>
<td>91-2151686</td>
<td>501 (C) 3</td>
<td>41,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) BURLINGAME COMMUNITY FOR EDUCATION FOUNDATION</td>
<td>PO BOX 117730 BURLINGAME, CA 94011</td>
<td>94-2722072</td>
<td>501 (C) 3</td>
<td>28,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) BURLINGAME GIRLS SOFTBALL ASSOCIATION</td>
<td>PO BOX 4532 BURLINGAME, CA 94010</td>
<td>94-331196</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) BURLINGTON COUNTY ANIMAL ALLIANCE</td>
<td>7 PIONEER LN WILMINGTON, NJ 0846</td>
<td>22-3691757</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

I Attach to Form 990.

---

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
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<td>20-0283432</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>BURMESE ROHINGYA COMMUNITY OF WISCONSIN INC</td>
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<td>263,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>BURNING HOPE BAPTIST CHURCH</td>
<td>75-2944784</td>
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<td>BUSINESSES UNITED IN INVESTING LENDING AND</td>
<td>94-3386695</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>BUTLER CATHOLIC SCHOOL</td>
<td>94-3386695</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990. 

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>BUTLER UNIVERSITY</td>
<td>35-0867977</td>
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<td>2</td>
<td>BUTLER VALLEY INCORPORATED</td>
<td>94-2650840</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>BUTTERFLY HOUSE &amp; AQUARIUM INC</td>
<td>52-2370420</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>4</td>
<td>BUXTON SCHOOL INC</td>
<td>04-2219425</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>5</td>
<td>BUZZARDS BAY COALITION INC</td>
<td>04-2971978</td>
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<td>654,500.</td>
<td>FMV</td>
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<td>6</td>
<td>BVM CAPACITY BUILDING INSTITUTE INC</td>
<td>82-3835203</td>
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<td>BY THE HAND CLUB FOR KIDS</td>
<td>20-3144284</td>
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<td>8</td>
<td>BYERSCHOOL FOUNDATION</td>
<td>25-1867607</td>
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<td>FMV</td>
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<td>BYP100 EDUCATION FUND</td>
<td>81-0975889</td>
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<td>11</td>
<td>BYRD BARR PLACE</td>
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<td>N/A</td>
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<td>12</td>
<td>CAR E 4 PAWS INC</td>
<td>27-0207473</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Form 990**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>C H S NETWORK INC 7 BIRCH LN HACKETTSTOWN, NJ 7840</td>
<td>22-3634814</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>C L C INC 555 N GRANTS LN FORT WORTH, TX 76108</td>
<td>75-2866735</td>
<td>501 (C) 3</td>
<td>40,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>C R L A FOUNDATION 2210 K ST STE 200 SACRAMENTO, CA 95816</td>
<td>94-2800442</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>C S LEWIS INSTITUTE INC 8001 BRADDOCK RD STE 301 SPRINGFIELD, VA 22</td>
<td>54-1802015</td>
<td>501 (C) 3</td>
<td>91,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>C &amp; O CANAL TRUST INC 1850 DUAL HWY STE 100 HAGERSTOWN, MD 21740</td>
<td>30-0401642</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>C &amp; S PATIENT EDUCATION FOUNDATION 320 OSPREY CT WEXFORD, PA 15090</td>
<td>20-0904691</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>C &amp; G CHURCH SILICON VALLEY INC 910 SAN ANTONIO RD PALO ALTO, CA 94303</td>
<td>46-1597084</td>
<td>501 (C) 3</td>
<td>125,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>C &amp; R RECOVERY FOUNDATION 414 RIDGE ST ALGONQUIN, IL 60102</td>
<td>81-5464910</td>
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<tr>
<td>9</td>
<td>C &amp; A HAITI MISSION INC 2700 UNIVERSITY BLVD S JACKSONVILLE, FL 322</td>
<td>47-1880469</td>
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<td>100,000</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>C &amp; R COOPERATIVE CHRISTIAN MINISTRY INC PO BOX 1717 CONCORD, NC 28026</td>
<td>56-1320818</td>
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<td>11</td>
<td>C &amp; R MOUNTAIN BIBLE CHURCH - TROUT CREEK PO BOX 1475 TROUT CREEK, MT 59874</td>
<td>26-4185791</td>
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<td>18,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>C &amp; R ENGLISH CHURCH INC 2215 PASEO DE LAS AMERICAS 25 M119 SAN DIEGO</td>
<td>20-3743267</td>
<td>501 (C) 3</td>
<td>40,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</table>

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**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I — General Information on Grants and Assistance**

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   - Yes ☑ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II — Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(b)</th>
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<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
<th>(h)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and address of organization or government</td>
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<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of non-cash assistance</td>
<td>Purpose of grant or assistance</td>
</tr>
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<tr>
<td>CABRILLO COLLEGE FOUNDATION</td>
<td>6500 SOQUEL DR APTOS, CA 95003</td>
<td>94-6121953</td>
<td>501 (C) 3</td>
<td>12,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CABRINI UNIVERSITY</td>
<td>610 KING OF FRUSSIA RD WAYNE, PA 19087</td>
<td>23-1526668</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CARRINI-GREEN LEGAL AID CLINIC INC</td>
<td>6 S CLARK ST STE 200 CHICAGO, IL 60603</td>
<td>36-2775706</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CACHE HUMANE SOCIETY</td>
<td>2370 W 200 N LOGAN, UT 84321</td>
<td>51-0187825</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CADENCE INTERNATIONAL</td>
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<td>84-6027655</td>
<td>501 (C) 3</td>
<td>28,300.</td>
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<td>58-2619416</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
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<td>CAFE MOMENTUM</td>
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<td>32-0384561</td>
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<td>17,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CAFE OF LIFE INC</td>
<td>PO BOX 367794 BONITA SPRINGS, FL 34136</td>
<td>65-0832961</td>
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<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CAHN FELLOWS PROGRAMS CORPORATION</td>
<td>525 W 120TH ST NEW YORK, NY 10027</td>
<td>85-3619218</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CAIR FOUNDATION INC</td>
<td>50 E ST SE WASHINGTON, DC 20003</td>
<td>77-0646756</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CAL PARLEYS BOYS RANCH</td>
<td>600 SW 11TH AVE AMARILLO, TX 79101</td>
<td>75-0808768</td>
<td>501 (C) 3</td>
<td>133,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CAL POLY POMONA PHILANTHROPIC FOUNDATION</td>
<td>3801 W TEMPLE AVE POMONA, CA 91768</td>
<td>83-2300241</td>
<td>501 (C) 3</td>
<td>48,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020

JSA

0E1288 1.000

18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAL STATE FULLERTON PHILANTHROPIC FOUNDATION 2600 NUTWOOD AVE STE 850 FULLERTON, CA 92833-3057945 501 (C) 3 40,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>23930 CRAFTSMAN RD CALABASAS, CA 91302 94-4501126 501 (C) 3 5,600. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALWOUN CITY SCHOOLS 334 SOUTH WALL STREET CALHOUN, GA 30701 58-6000138 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALHOUN SCHOOL INC 433 W END AVE NEW YORK, NY 10024 13-6123919 501 (C) 3 60,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALIBER PUBLIC SCHOOLS PO BOX 5282 RICHMOND, CA 94805 46-1219795 501 (C) 3 27,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE DR SAN FRANCISCO, CA 941 94-1156258 501 (C) 3 228,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALIFORNIA ALUMNI ASSOCIATION UNIVERSITY OF CALIFORNIA BERKELEY, CA 94720 94-1007751 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>CALIFORNIA ASSOCIATION OF FOOD BANKS 1624 FRANKLIN ST STE 722 OAKLAND, CA 94612 68-0392816 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CALIFORNIA BLACK WOMENS HEALTH PROJECT</td>
<td>95-4702923</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CALIFORNIA COMMUNITY FOUNDATION</td>
<td>211 S FIGUEROA ST LOS ANGELES, CA 90012</td>
<td>95-3510055</td>
<td>501 (C) 3</td>
<td>6,639,402.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CALIFORNIA COUNCIL ON SCIENCE AND TECHNOLOGY</td>
<td>1017 L ST # 438 SACRAMENTO, CA 95814</td>
<td>94-3093624</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CALIFORNIA FARMLINK</td>
<td>335 SPRECKELS DR STE F APTOS, CA 95003</td>
<td>94-3332630</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CALIFORNIA FEDERATION OF WOMENS CLUBS</td>
<td>PO BOX 612 PICO RIVERA, CA 90660</td>
<td>95-6226541</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>CALIFORNIA FILM INSTITUTE</td>
<td>1001 LOTTENS PL STE 220 SAN RAFAEL, CA 94901</td>
<td>94-2498062</td>
<td>501 (C) 3</td>
<td>24,125.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>CALIFORNIA FIRE FOUNDATION</td>
<td>1780 CREEKSIDE OAKS DR SACRAMENTO, CA 95833</td>
<td>68-0118991</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>CALIFORNIA INSTITUTE OF TECHNOLOGY</td>
<td>1200 E CALIFORNIA BLVD # 234-6 PASADENA, CA 91101</td>
<td>95-1643307</td>
<td>501 (C) 3</td>
<td>3,385,690.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>CALIFORNIA LUTHERAN UNIVERSITY</td>
<td>60 W OLSEN RD THOUSAND OAKS, CA 91360</td>
<td>95-2962604</td>
<td>501 (C) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>CALIFORNIA NATIVE PLANT SOCIETY</td>
<td>2707 K ST STE 1 SACRAMENTO, CA 95816</td>
<td>94-6116403</td>
<td>501 (C) 3</td>
<td>30,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CALIFORNIA PACIFIC MEDICAL CENTER FOUNDATION</td>
<td>C/O SH TAX 2200 RIVER PLAZA DR SACRAMENTO,</td>
<td>94-2728423</td>
<td>501 (C) 3</td>
<td>331,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CALIFORNIA POLYTECHNIC STATE UNIVERSITY FOUNDATION</td>
<td>1 GRAND AVE BLDG 117 # 208 SAN LUIS OBISPO, CA 93401</td>
<td>20-4927897</td>
<td>501 (C) 3</td>
<td>40,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

**Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.**

---

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ⚜ Yes ✗ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1 CALIFORNIA SCIENCE CENTER FOUNDATION</td>
<td>95-2210527</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 CALIFORNIA SHAKESPEARE THEATER</td>
<td>51-0169452</td>
<td>501 (C) 3</td>
<td>15,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 CALIFORNIA SOUTHERN BAPTIST CONVENTION</td>
<td>94-1347058</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 CALIFORNIA STATE PARKS FOUNDATION</td>
<td>94-1707583</td>
<td>501 (C) 3</td>
<td>52,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 CALIFORNIA STATE UNIVERSITY – NORTHRIDGE FO</td>
<td>95-6196006</td>
<td>501 (C) 3</td>
<td>403,187.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 CALIFORNIA STATE UNIVERSITY DOMINGUEZ HILLS</td>
<td>95-2543028</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 CALIFORNIA STATE UNIVERSITY LOS ANGELES FOU</td>
<td>95-4044252</td>
<td>501 (C) 3</td>
<td>16,530.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8 CALIFORNIA TABLE TENNIS</td>
<td>44-2610205</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9 CALIFORNIA TROUT</td>
<td>23-7097680</td>
<td>501 (C) 3</td>
<td>347,033.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 CALIFORNIA WESTERN SCHOOL OF LAW</td>
<td>95-2944594</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 CALL OF LOVE INC</td>
<td>36-4490081</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 CALL TO FREEDOM INC</td>
<td>47-5469817</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..............................................

3. Enter total number of other organizations listed in the line 1 table: ..............................................

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

**Schedule I (Form 990) 2020**

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*JSA 0E1288 1.000*

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*18674H 1467 V 20-7.21*
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

Employer identification number

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CALLAWAY UNITED METHODIST CHURCH</td>
<td>47-0463269</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CALLED TO SERVE AS CHRIST CAMPAIGN FUND</td>
<td>82-3280388</td>
<td>501 (C) 3</td>
<td>12,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>3</td>
<td>CALLING ALL CROWS</td>
<td>26-3763300</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>CALMATTERS</td>
<td>1017 L ST SACRAMENTO, CA 95814</td>
<td>47-2474086</td>
<td>501 (C) 3</td>
<td>123,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>CALVARY ASSEMBLY OF GOD INC</td>
<td>63-0868020</td>
<td>501 (C) 3</td>
<td>8,345.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>CALVARY BAPTIST CHURCH</td>
<td>3740 EAGLES NEST ROAD FRUITLAND PARK, FL 34</td>
<td>59-6168274</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7</td>
<td>CALVARY BAPTIST CHURCH</td>
<td>150 E HIGH ST LEXINGTON, MN 55408</td>
<td>61-0464952</td>
<td>501 (C) 3</td>
<td>7,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>8</td>
<td>CALVARY BAPTIST CHURCH</td>
<td>517 W. 32ND ST. HOLLAND, CA 95032</td>
<td>38-2060154</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>9</td>
<td>CALVARY BAPTIST CHURCH</td>
<td>2608 BLAISELL AVE MINNEAPOLIS, MI 49423</td>
<td>41-0843071</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>CALVARY BAPTIST CHURCH</td>
<td>16330 LOS GATOS BLVD LOS GATOS, KY 40507</td>
<td>94-1254631</td>
<td>501 (C) 3</td>
<td>20,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>CALVARY BAPTIST CHURCH INC</td>
<td>646 76TH STREET OCEAN MARATHON, FL 33050</td>
<td>65-0228786</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>CALVARY BAPTIST CHURCH OF CONROE</td>
<td>3401 N. FRAZIER ST. CONROE, TX 77303</td>
<td>74-1910604</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) CALVARY BAPTIST CHURCH OF SAINT PAUL MN</td>
<td>41-0914699</td>
<td>501 (C) 3</td>
<td>30,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) CALVARY BIBLE CHURCH</td>
<td>22-2204396</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
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<td>82-3840626</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) CALVARY CHAPEL OF COSTA MESA</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) CALVARY CHAPEL OF SANTA BARBARA</td>
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<td>1 N CALLE CESAR CHAVEZ STE 21 SANTA BARBARA</td>
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<td>31612 EL CAMINO REAL SAN JUAN CAPISTRANO, C</td>
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<td>8235 AGORA PKWY STE 111-564 SELMA, TX 78154</td>
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<td>820 ROUTE 113 SOUDERTON, IL 60564</td>
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<td>P.O. BOX 58 RYDER, NC 28226</td>
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<td>(11) CALVARY CHURCH OF PACIFIC PALISADES</td>
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<td>701 PALISADES DR PACIFIC PALISADES, CA 9027</td>
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<td>95-3222271</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: **18674H 1467**

3. Enter total number of other organizations listed in the line 1 table: **18674H 7.21**
Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [X]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>ATTN: FINANCE DEPARTMENT 31 WOODLAND AVENUE</td>
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<td>(3) CALVARY EPISCOPAL PRESCHOOL</td>
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<tr>
<td>PO BOX 616 EASTROP, TX 78602</td>
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<td>(5) CALVARY FELLOWSHIP GIG HARBOR</td>
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<tr>
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<td>(6) CALVARY FELLOWSHIP OF SEATTLE AND MARANATHA</td>
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<td>23302 56TH AVE W MOUNTLAKE TERRACE WA 9804</td>
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<td>424 VIA DE LA VALLE SOLANA BEACH, CA 92075</td>
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<td>7520 GOLDEN VALLEY RD MINNEAPOLIS, MN 55427</td>
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<td>(10) CALVARY MEMORIAL CHURCH OF OAK PARK ILLINOI</td>
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<td>931 LAKE ST OAK PARK, IL 62301</td>
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<td>150 KEMPsville RD NORFOLK, CA 94115</td>
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<tr>
<td>2515 FILMORE ST SAN FRANCISCO, VA 23502</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ............................................................

3. Enter total number of other organizations listed in the line 1 table. .................................................................................................................................
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>CALVARY TEMPLE FULL GOSPEL CHURCH INC</td>
<td>6350 E STATE HIGHWAY 86 BLUE EYE, MD 20611</td>
<td>43-1639620</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>38-3071514</td>
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<td>21,250.</td>
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<td>4</td>
<td>CALVIN COOLIDGE PRESIDENTIAL FOUNDATION INC</td>
<td>PO BOX 97 PLYMOUTH, VT 5056</td>
<td>03-6009701</td>
<td>501 (C) 3</td>
<td>121,500.</td>
<td>FMV</td>
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<td>CALPAO EQUESTRIAN</td>
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<td>98-1420729</td>
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<td>500,000.</td>
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<td>CAMALDOLSEAN HERMITS OF AMERICA</td>
<td>624775 HIGHWAY 1 BIG SUR, CA 93920</td>
<td>94-6050278</td>
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<td>20,000.</td>
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<td>CAMANO ANIMAL SHELTER ASSOCIATION</td>
<td>PO BOX 1726 STANWOOD, WA 98292</td>
<td>91-1913293</td>
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<td>11,000.</td>
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<td>9</td>
<td>CAMBA INC</td>
<td>1720 E VETERANS AVE BROADWAY, NY 11226</td>
<td>11-2480339</td>
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<td>11,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1 (a)</td>
<td>2500 BROADWAY STE F125 SANTA MONICA, CA 904</td>
<td>20-0764162</td>
<td>501 (C) 3</td>
<td>60,394.</td>
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<td>1 (b)</td>
<td>CAMBODIAN CHILDREN'S FUND</td>
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<td>2</td>
<td>PO BOX 1195 NEW YORK, NY 10028</td>
<td>32-0274553</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>2 (a)</td>
<td>CAMBODIAN COMMUNITY DREAM</td>
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<tr>
<td>3</td>
<td>PO BOX 486 CAMBRIA, CA 93928</td>
<td>77-0010811</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3 (a)</td>
<td>CAMBRIA COMMUNITY COUNCIL INC</td>
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<td>4</td>
<td>234 FRANKLIN ST CAMBRIDGE, MA 2139</td>
<td>04-3407319</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
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<td>4 (a)</td>
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<td>99 BISHOP RICHARD ALLEN DR CAMBRIDGE, MA 21</td>
<td>04-6012492</td>
<td>501 (C) 3</td>
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<td>5 (a)</td>
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<td>1120 AVE OF THE AMERICAS 17TH FL NEW YORK, NY 10036</td>
<td>20-0121299</td>
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<td>161 GARDEN ST CAMBRIDGE, MA 2138</td>
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<td>7 (a)</td>
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<td>45 GEORGIAN RD WESTON, MA 2493</td>
<td>04-2103964</td>
<td>501 (C) 3</td>
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<td>8 (a)</td>
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<tr>
<td>9</td>
<td>PO BOX 72 CAMBRIDGE, MA 21816</td>
<td>01-063328</td>
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<td>300 CUTHBERT RD CHERRY HILL, NJ 8002</td>
<td>21-0734617</td>
<td>501 (C) 3</td>
<td>77,500.</td>
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<td>10 (a)</td>
<td>CAMDEN CATHOLIC HIGH SCHOOL</td>
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<td>51 THIRD ST CAMDEN, NJ 3316</td>
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<td>15-0544385</td>
<td>501 (C) 3</td>
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<td>12 (a)</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

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<tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1)</td>
<td>CAMDEN UNITED METHODIST CHURCH</td>
<td>63-0865834</td>
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<td>(2)</td>
<td>CAMERATA SAN ANTONIO</td>
<td>56-2382185</td>
<td>501 (C) 3</td>
<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>CAMERON PARK ZOOLOGICAL &amp; BOTANICAL SOCIETY</td>
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<td>35,000.</td>
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<td>(4)</td>
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<td>(6)</td>
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<td>(9)</td>
<td>CAMP ACAICIA INC</td>
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<td>(10)</td>
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<td>(11)</td>
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<td>FMV</td>
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<td>(12)</td>
<td>CAMP AVODA INC</td>
<td>06-6002095</td>
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<td>13,333.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✔ Yes  ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<td>33-1122930</td>
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<td>3</td>
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<td>23-7210932</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>1. CAMP KUDUI INC 5885 GLENRIDGE DR STE 160 ATLANTA, GA 30328 58-2449646 501 (C) 3</td>
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<td>2. CAMP O-AT-KA INC 593 SEBAGO RD SEBAGO, ME 04029 01-0211538 501 (C) 3</td>
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<td>4. CAMP PASQUANEY 19 PASQUANEY LN HEBRON, NH 3241 02-0227848 501 (C) 3</td>
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<td>FMV</td>
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<td>5. CAMP PENIEL INC 397 PENIEL PAH MARBLE FALLS, TX 78654 74-1949630 501 (C) 3</td>
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<td>FMV</td>
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<td>6. CAMP PHOENIX 10974 STAR CT OAKLAND, CA 94603 46-1470903 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7. CAMP RAMAR IN NEW ENGLAND 1206 BOSTON PROVIDENCE HIGHWAY 201 NORWOOD, 04-3035964 501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
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<tr>
<td>8. CAMP RAMAR IN THE BERKSHIRES INC 25 ROCKWOOD PL STE 345 ENGLEWOOD, NJ 7631 13-1997276 501 (C) 3</td>
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<tr>
<td>9. CAMP RUGGLES INC PO BOX 353 CHEPACHET, RI 2814 23-7448135 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td>10. CAMP SOLOMON SCHECHTER INC 117 E LOUISA ST # 110 SEATTLE, WA 98102 93-0572590 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. CAMP Sunshine PO BOX 48 AURORA, OH 44202 27-0593509 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. CAMP SUNSHINE AT SEBAGO LAKE INC 35 ACADIA RD CASCO, ME 4015 22-2582877 501 (C) 3</td>
<td>26,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

### SCHEDULE I
(Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
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### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>CAMP WOJTYLA INC</td>
<td>47-4202980</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPAGNA CENTER INC</td>
<td>54-0534609</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CAMPAIGN LEGAL CENTER INC</td>
<td>04-3608387</td>
<td>501 (C) 3</td>
<td>169,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPANILE FOUNDATION</td>
<td>33-0868418</td>
<td>501 (C) 3</td>
<td>35,353.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPBELL HALL -EPISCOPAL-</td>
<td>95-1716787</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CAMPBELL SOLTANK</td>
<td>23-6421082</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPBELL VILLAGE KIMBERTON HILLS INC</td>
<td>22-2856588</td>
<td>501 (C) 3</td>
<td>5,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPING UNLIMITED FOR THE DEVELOPMENTALLY D</td>
<td>23-2258345</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>102 BROOK LN BOULDER CREEK, CA 95006</td>
<td>94-6104601</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPUS CRUSADE FOR CHRIST</td>
<td>26-4068192</td>
<td>501 (C) 3</td>
<td>6,825.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CAMPUS CRUSADE FOR CHRIST INC</td>
<td>95-6006173</td>
<td>501 (C) 3</td>
<td>1,324,596.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPUS ELECTION ENGAGEMENT PROJECT INC</td>
<td>156192 COASTAL HWY LEWES, DE 19958</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPUS EVANGELICAL FELLOWSHIP INC 365 DU PAHZE ST NAPERVILLE, IL 60565</td>
<td>36-29114086</td>
<td>501 (C) 3</td>
<td>30,202.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPUS FAITH CLUBS PO BOX 863 LAKEVILLE, MN 55044</td>
<td>26-2778378</td>
<td>501 (C) 3</td>
<td>21,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CAMPUS OUTREACH SERVE INC 4958 VALLEYDALE RD STE 251 HOOVER, AL 35242</td>
<td>46-2662312</td>
<td>501 (C) 3</td>
<td>34,700.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CAN DO CANINES 9440 SCIENCE CENTER DR MINNEAPOLIS, MN 5542</td>
<td>41-1594165</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANAL ALLIANCE 91 LARKSPUR ST SAN RAFAEL, CA 94901</td>
<td>94-2832648</td>
<td>501 (C) 3</td>
<td>19,500.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER ASSOCIATION OF ANDERSON 215 E CALHOUN ST ANDERSON, SC 29621</td>
<td>54-20988883</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER AWARENESS THROUGH RESEARCH AND EDUCATION PO BOX 3740 CAREFREE, AZ 85377</td>
<td>20-3771288</td>
<td>501 (C) 3</td>
<td>31,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER CARE INC 275 7TH AVE NEW YORK, NY 10001</td>
<td>13-1825919</td>
<td>501 (C) 3</td>
<td>21,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER CAREPOINT INC 2505 SAMARITAN DR SAN JOSE, CA 95124</td>
<td>27-3029691</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CANCER COMONS 650 CASTRO ST STE 120 PMC 522 MOUNTAIN VIEW</td>
<td>45-3266802</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER PATHWAYS 1400 BROADWAY SEATTLE, WA 98122</td>
<td>91-1742315</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CANCER PATIENTS ALLIANCE 312 1/2 FOUNTAIN AVE PACIFIC GROVE, CA 9395</td>
<td>77-0569948</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>CANCER RESEARCH AMERICA NFOCR</td>
<td>5515 SECURITY LN STE 1105 ROCKVILLE, MD 2088 04-2531031</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CANCER RESEARCH FUND OF THE DAMON RUNYON-WALSH</td>
<td>1 EXCHANGE PLZ STE 302 NEW YORK, NY 10006 13-1933825</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CANCER RESEARCH INSTITUTE INC</td>
<td>29 BROADWAY PL 4 NEW YORK, NY 10006 13-1937442</td>
<td>501 (C) 3</td>
<td>141,722.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CANCER SUPPORT CENTER OF MAINE</td>
<td>337 COMMON RD UNION, ME 04862 26-0673650</td>
<td>501 (C) 3</td>
<td>5,188.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CANCER SUPPORT COMMUNITY</td>
<td>5614 CT AVE NW 280 WASHINGTON, DC 20015 95-4163931</td>
<td>501 (C) 3</td>
<td>51,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>CANCER SUPPORT COMMUNITY OF GREATER ANN ARB</td>
<td>2010 HOGBACK RD STE 3 ANN ARBOR, MI 48105 05-0597871</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>CANCER SUPPORT COMMUNITY SAN FRANCISCO BAY</td>
<td>3276 MCNUTT AVE WALNUT CREEK, CA 95497 68-0157858</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>CANCER SUPPORT COMMUNITY-CALIFORNIA CENTRAL</td>
<td>1051 LAS TABLAS RD TEMPLETON, CA 93465 26-4659006</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CANCER WELLNESS CENTER</td>
<td>215 REVERE DR NORTH BROOK, IL 6062 36-3604463</td>
<td>501 (C) 3</td>
<td>15,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CANEY CREEK COMMUNITY CENTER</td>
<td>100 PURPOSE RD FIPPA PASS, KS 6126 04-492351</td>
<td>501 (C) 3</td>
<td>19,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CANINE COMPANIONS FOR INDEPENDENCE</td>
<td>2965 DUTTON AVE SANTA ROSA, CA 95407 94-2494324</td>
<td>501 (C) 3</td>
<td>178,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CANINE PARTNERS FOR LIFE</td>
<td>334 FAGGS MANOR RD COCHERANVILLE, PA 19330 23-2580658</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1</td>
<td>CANINE THERAPY CORPS INC 3918 W FULLERTON AVE CHICAGO, IL 60647</td>
<td>36-3821587</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CANISIUS COLLEGE 2001 MAIN ST BUFFALO, NY 14208</td>
<td>16-0743942</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CANISIUS HIGH SCHOOL 1180 DELAMARE AVE BUFFALO, NY 14209</td>
<td>16-0743943</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CANOPY CANOPY CANOPY INC 264 CANAL ST STE 3W NEW YORK, NY 10013</td>
<td>30-0537058</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CANTERBURY SHAKER VILLAGE INC 288 SHAKER RD CANTERBURY, NH 03224</td>
<td>23-7035275</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>CANTERBURY UNITED METHODIST CHURCH FINANCE OFFICE PDO BOX 130699 BIRMINGHAM, AL 63-0329624</td>
<td>63-0329624</td>
<td>501 (C) 3</td>
<td>51,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CANTICLE FARM 1968 36TH AVE OAKLAND, CA 94601</td>
<td>46-1484633</td>
<td>501 (C) 3</td>
<td>107,045.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>CANTON JEWISH COMMUNITY FEDERATION 432 30TH ST NW CANTON, OH 44709</td>
<td>23-7084946</td>
<td>501 (C) 3</td>
<td>16,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CANYON CREEK PRESBYTERIAN CHURCH 9015 S GALE RIDGE RD SAN RAMON, CA 94582</td>
<td>68-0152944</td>
<td>501 (C) 3</td>
<td>41,275.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CANYON HILLS COMMUNITY CHURCH 22027 17TH AVE SE BOTHELL, WA 98021</td>
<td>91-1685866</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>CANYON LAKE ANIMAL SHELTER SOCIETY 2170 OLD SATTLER RD CANYON LAKE, TX 78133</td>
<td>74-2889260</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>CANYON RIDGE CHRISTIAN CHURCH INC 6200 W LONE MOUNTAIN RD LAS VEGAS, NV 89130</td>
<td>88-0293688</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**Part I**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>CANYON VIEW VINEYARD CHURCH INC</td>
<td>736 24 1/2 RD GRAND JUNCTION, CO 81505</td>
<td>84-0768957</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2)</td>
<td>CANYON'S CHURCH</td>
<td>PO BOX 71399 SALT LAKE CITY, UT 84171</td>
<td>87-0366716</td>
<td>501 (C) 3</td>
<td>13,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>CAPE ANN MUSEUM INC</td>
<td>27 PLEASANT ST GLOUCESTER, MA 02330-0366</td>
<td>04-2143545</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>CAPE COD CENTER FOR THE ARTS INC</td>
<td>PO BOX 2001 DENNIS, MA 02638</td>
<td>04-3334834</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>CAPE COD FOUNDATION INC</td>
<td>261 WHITES PATH STE 2 S YARMOUTH, MA 02664</td>
<td>51-0140462</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>CAPE COD HEALTHCARE INC</td>
<td>297 NORTH ST BLDG 3 HYANNIS, MA 02601</td>
<td>04-3475950</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>CAPE COD REPERTORY THEATRE COMPANY INCORPOR</td>
<td>PO BOX 1305 BREMERTON, WA 2631</td>
<td>22-3128187</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>CAPE CORAL CARING CENTER INC</td>
<td>4645 SE 15TH AVE CAPE CORAL, FL 33304</td>
<td>65-0262583</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>CAPE KELUERTHA FOUNDATION INC</td>
<td>1900 MARKET ST FL 8 PHILADELPHIA, PA 19103</td>
<td>31-1591503</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(10)</td>
<td>CAPE MAY STAGE INC</td>
<td>31 PERRY ST CAPE MAY, NJ 08204</td>
<td>22-2937929</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>CAPITAL AREA CRISIS PREGNANCY CENTER</td>
<td>2515 OLD GETTYSBURG RD CAMP HILL, PA 17011</td>
<td>23-2358110</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>CAPITAL AREA FOOD BANK</td>
<td>4900 PUERTO RICO AVE NE WASHINGTON, DC 2001</td>
<td>52-1167581</td>
<td>501 (C) 3</td>
<td>508,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes
   - No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>CAPITAL AREA IMMIGRANTS RIGHTS COALITION</td>
<td>52-2141497</td>
<td>501 (C) 3</td>
<td>38,375.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL AREA UNITED WAY</td>
<td>70-0447100</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL CHRISTIAN CENTER</td>
<td>84-1419049</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL CITY GOSPEL MISSION</td>
<td>56-2663290</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL OF TEXAS PUBLIC TELECOMMUNICATIONS</td>
<td>75-7126012</td>
<td>501 (C) 3</td>
<td>14,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>CAPITAL PARTNERS FOR EDUCATION</td>
<td>52-1832497</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL PUBLIC RADIO INC</td>
<td>68-0223271</td>
<td>501 (C) 3</td>
<td>31,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL RESEARCH CENTER</td>
<td>52-1289734</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITAL ROOTS INC</td>
<td>14-1596291</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITOL BROADCASTING ASSOCIATION INC</td>
<td>74-6076827</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITOL HILL BAPTIST CHURCH</td>
<td>91-1786555</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CAPITOL HILL COMMUNITY FOUNDATION</td>
<td>52-1582214</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(For Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. Yes ❇️ No ❇️

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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</thead>
<tbody>
<tr>
<td>(1) CAPITOL HILL CRISIS PREGNANCY CENTER</td>
<td>52-1384736</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) CAPITOL LAND TRUST</td>
<td>91-1413984</td>
<td>501 (C) 3</td>
<td>8,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) CAPITOL LEARNING ACADEMY</td>
<td>82-2341061</td>
<td>501 (C) 3</td>
<td>110,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) CAPITOL THEATRE COMMITTEE</td>
<td>91-0999384</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) CAPPERS FOUNDATION</td>
<td>48-0543745</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) CAPROCK CULTURAL ASSOCIATION INC</td>
<td>75-2012884</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) CAPTAIN COMMUNITY HUMAN SERVICES INC</td>
<td>14-1637304</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) CAPTAINS FOR CLEAN WATER INC</td>
<td>81-1789969</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) CAPUCHIN FRANCISCAN ORDER OF CA</td>
<td>94-2609627</td>
<td>501 (C) 3</td>
<td>44,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) CARA PROGRAM</td>
<td>36-4268095</td>
<td>501 (C) 3</td>
<td>62,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CARAMOOON CENTER FOR MUSIC &amp; THE ARTS INC</td>
<td>13-5643627</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) CARAVAN TO CLASS</td>
<td>27-1885332</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table. .................................................................

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<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>(1) CARAWAY FOUNDATION</td>
<td>8311 BRIER CREEK PKWY STE 105190 RALEIGH, N</td>
</tr>
<tr>
<td>(2) CARBON COMMUNITY BAPTIST CHURCH</td>
<td>515 EAST ANTHRACITE CARBON, TX 76435</td>
</tr>
<tr>
<td>(3) CARBON CYCLE INSTITUTE</td>
<td>245 KENTUCKY STREET PETALUMA, CA 94952</td>
</tr>
<tr>
<td>(4) CARBONFUND ORG FOUNDATION</td>
<td>853 MAIN ST EAST AURORA, NY 14052</td>
</tr>
<tr>
<td>(5) CARBONPLAN</td>
<td>2443 FILMORE ST STE 308-6048 SAN FRANCISCO</td>
</tr>
<tr>
<td>(6) CARDIGAN MOUNTAIN SCHOOL</td>
<td>62 ALUMNI DR CANAAN, NH 3741</td>
</tr>
<tr>
<td>(7) CARDINAL AND GOLD FUND INC</td>
<td>695 GRAND CONCOURSE BRONX, NY 10451</td>
</tr>
<tr>
<td>(8) CARDINAL GIBBONS HIGH SCHOOL</td>
<td>1401 EDWARDS MILL RD RALEIGH, NC 27607</td>
</tr>
<tr>
<td>(9) CARDINAL GLENN CHILDERNS FOUNDATION</td>
<td>10101 WOODFIELD IN SAINT LOUIS, MO 63132</td>
</tr>
<tr>
<td>(10) CARDINAL HAYES HIGH SCHOOL</td>
<td>650 GRAND CONCOURSE BRONX, NY 10451</td>
</tr>
<tr>
<td>(11) CARDINAL INSTITUTE FOR WEST VIRGINIA POLICY</td>
<td>PO BOX 11495 CHARLESTON, WV 25339</td>
</tr>
<tr>
<td>(12) CARDINAL NEWMAN SOCIETY FOR THE PRESERVATION</td>
<td>10432 BALLS FORD RD STE 300 MANASSAS, VA 20</td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 18674H 1467

Enter total number of other organizations listed in the line 1 table: 20-7.21

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CARDINAL SPELLMAN HIGH SCHOOL</td>
<td>56-2438550</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CARDINAL STRITCH UNIVERSITY INC</td>
<td>39-0806196</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CARE 2 COMMUNITIES INC</td>
<td>26-4369180</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CARE AND SHARE INC</td>
<td>84-0731930</td>
<td>501 (C) 3</td>
<td>70,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CARE CENTER OF LOVELAND</td>
<td>83-2028234</td>
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<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>CARE ELEMENTARY SCHOOL INC</td>
<td>46-5269625</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CARE FOR REAL</td>
<td>27-1962360</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>CARE FOR THE HOMELESS INC</td>
<td>13-3666994</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CARE NET PREGNANCY &amp; FAMILY SERVICES OF FUG</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CARE NET PREGNANCY CENTER OF GREATER CONCOR</td>
<td>02-0393952</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CARE PARTNERSHIP PROJECT</td>
<td>85-1275392</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CAREERSPRING FOUNDATION</td>
<td>85-1275392</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>44180 RIVERSIDE PKWY STE 200 LEESBURG, VA 2</td>
<td>54-1382723</td>
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<tr>
<td>24 N LINE AVE STE 38 SARASOTA, FL 34237</td>
<td>45-4355088</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>1508 PENINSULA DR NW CANTON, OH 44718</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PO BOX 1219 SOUTHERN PINES, NC 28388</td>
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<td>1200 ROOSEVELT RD STE 114 GLEN ELLYN, IL 60</td>
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<td>8 CYPRESS CT LITTLE EGG HARBOR TWP, NJ 8087</td>
<td>22-3335949</td>
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<td>2750 BLUE WATER RD STE 275 SAINT PAUL, MN 5</td>
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<td>2220 STOCKTON ST RICHMOND, VA 23224</td>
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<td>818 N 7TH ST LEAVENWORTH, KS 66048</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>19 SMITH ST PORT CHESTER, NY 10573</td>
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<td>(2) CARLE DEVELOPMENT FOUNDATION</td>
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<td>(4) CARLEY CUNNIF PETER S DIXON MD FOUNDATION</td>
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<td>438 SAN VICENTE BLVD SANTA MONICA, CA 90402</td>
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<td>(7) CARMEL BACH FESTIVAL INC</td>
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<td>(8) CARMEL FOUNDATION</td>
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<td>(9) CARMEL LUTHERAN CHURCH</td>
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<td>PO BOX 221351 CARMEL, CA 93922</td>
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<td>(12) CARMEL OF THE IMMACULATE HEART OF MARY</td>
<td>87-6122093</td>
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<td>5714 S HOLLADAY BLVD HOLLADAY, UT 84121</td>
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Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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OMB No. 1545-0047

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes   No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(2)</td>
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<td>(5)</td>
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<td>(6)</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table .................................................................

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Schedule I (Form 990) 2020

JSA
0E1288 1,000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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General Information on Grants and Assistance

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   - Yes [x] No [ ]

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>46-5216355</td>
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<td>(3) CAROLINA FRIENDS SCHOOL</td>
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<td>23-6392266</td>
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<td>(8) CARRBORO HIGH SCHOOL ATHLETIC BOOSTER CLUB</td>
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<tr>
<td>(12) CARROLL SCHOOL CORP</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes
   - No

   ![ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

   ![ ]

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CARROLLWOOD DAY SCHOOL EDUCATION INC</td>
<td>31-1581952</td>
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<td>88-0502320</td>
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<td>CARSON-NEWMAN UNIVERSITY</td>
<td>62-0479189</td>
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<td>FMV</td>
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<td>22-3232968</td>
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<td>CASA CHIRILAGUA</td>
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<td>9</td>
<td>CASA DE AMPARO</td>
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<td>CASA DE MARYLAND</td>
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<td>11</td>
<td>CASA DE PAZ</td>
<td>47-2244258</td>
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<td>12</td>
<td>CASA EL DORADO</td>
<td>68-0299245</td>
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<td>FMV</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990) 2020

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CASA FOR CHILDREN INC 1401 NE 68TH AVE PORTLAND, OR 97213</td>
<td>93-0923866</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<td>2</td>
<td>CASA FOR KIDS INC 382 W CHESTNUT ST STE 108 # B WASHINGTON, P</td>
<td>47-0849282</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>CASA GUADALUPE EDUCATION CENTER INC 419 ROOSEVELT DR WEST BEND, WI 53090</td>
<td>20-4483105</td>
<td>501 (C) 3</td>
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<td>4</td>
<td>CASA RODAR ORPHANAGE PO BOX 305 ALPINE, TX 79831</td>
<td>74-3000044</td>
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<td>5</td>
<td>CASA JUAN DIEGO PO BOX 70113 HOUSTON, TX 77270</td>
<td>76-0003018</td>
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<td>6</td>
<td>CASA KANE CO 100 S 3RD STREET SUITE 460 GENEVA, IL 60134</td>
<td>36-3653491</td>
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<td>26,000.</td>
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<tr>
<td>7</td>
<td>CASA LATINA 317 17TH AVE S SEATTLE, WA 98144</td>
<td>91-1689251</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CASA MARIANELLA 821 GUNTER ST AUSTIN, TX 78702</td>
<td>74-2377341</td>
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<td>8,000.</td>
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<tr>
<td>9</td>
<td>CASA MYRNA VASQUEZ INC 38 WAREHAM ST BOSTON, MA 2118</td>
<td>04-2625710</td>
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<td>FMV</td>
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<td>10</td>
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<td>36-3875807</td>
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<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>CASA OF LOS ANGELES 201 CENTRE PLAZA DR RM 1100 MONTEREY PARK,</td>
<td>95-3890446</td>
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<td>23,500.</td>
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<td>12</td>
<td>CASA PACIFICA CENTERS FOR CHILDREN AND FAMIL</td>
<td>1722 S LEWIS RD CAMARILLO, CA 93012</td>
<td>77-0195022</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes ☑  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 CASA RUBY INC</td>
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<td>FMV</td>
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<tr>
<td>3 CASA TERESA INC</td>
<td>95-3251986</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 CASA YOUTH ADVOCATES INC</td>
<td>23-1901080</td>
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<td>5 CASADE AIDS PROJECT</td>
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<td>51-0148340</td>
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<td>11 CASADES RAPTOR CENTER</td>
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<td>12 CASADIA ART MUSEUM</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2. CASCADIA WILDLANDS</td>
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<td>3. CASE ALUMNI ASSOCIATION INCORPORATED</td>
<td>20-4435833</td>
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<td>4. CASE WESTERN RESERVE UNIVERSITY</td>
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<td>FMV</td>
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<td>5. CASHIER'S-HIGHLANDS HUMANE SOCIETY INC</td>
<td>58-1798769</td>
<td>501 (C) 3</td>
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<td>6. CASITA MARIA, INC.</td>
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<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. CASPER INC</td>
<td>23-7193288</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>8. CASTILLEJA SCHOOL FOUNDATION</td>
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<td>9. CASTLEVIEW BAPTIST CHURCH</td>
<td>94-0373222</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10. CAT ADOPTION TEAM</td>
<td>20-0773189</td>
<td>501 (C) 3</td>
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<td>11. CAT HAVEN INC</td>
<td>72-1454718</td>
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<td>FMV</td>
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<td>12. CATALINA FOOTHILLS CHURCH P.C.A</td>
<td>86-0774704</td>
<td>501 (C) 3</td>
<td>19,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>(h) Purpose of grant or assistance</th>
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<td>(7) CATHEDRAL OF THE SACRED HEART OF JESUS</td>
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<td>(10) CATHERINE COOK SCHOOL</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA

GE1288 1.000

18674 1467 V 20-7.21
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **X Yes** □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>84-0686679</td>
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<td>CATHOLIC CHARITIES APPEAL OF THE ARCHDIOCES 222 N 17TH ST STE 708 PHILADELPHIA, PA 1910</td>
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<tr>
<td>CATHOLIC CHARITIES ARCHDIOCES OF SAN ANTON</td>
<td>202 W FRENCH PL SAN ANTONIO, TX 78212</td>
<td>74-1109743</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC CHARITIES COMMUNITY SERVICES ARCHD 1011 1ST AVE NEW YORK, NY 10022</td>
<td>13-5562185</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>86-0223999</td>
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<tr>
<td>CATHOLIC CHARITIES COMMUNITY SERVICES OF DU 218 CHURCH ST Poughkeepsie, NY 12601</td>
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<td>6,050.</td>
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<td>CATHOLIC CHARITIES CORPORATION 7911 DETROIT AVE CLEVELAND, OH 44102</td>
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<td>94-1498472</td>
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<td>9,000.</td>
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<td>FMV</td>
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<td>39-0807067</td>
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<td>8,500.</td>
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<td>CATHOLIC CHARITIES INC 437 N TOPEKA AVE WICHITA, WI 53719</td>
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<td>50,500.</td>
<td>FMV</td>
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<tbody>
<tr>
<td>CATHOLIC CHARITIES OF BUFFALO 741 DELAWARE AVE BUFFALO, NY 14209</td>
<td>16-0743251</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>86-0586169</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>59-1214353</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>CATHOLIC CHARITIES OF DALLAS INC 1421 W MOCKINGBIRD LN DALLAS, TX 75247</td>
<td>75-2745221</td>
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<td>06-0653053</td>
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<td>95-1690973</td>
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<td>CATHOLIC CHARITIES OF LOUISVILLE INC 2911 S 4TH ST LOUISVILLE, KY 40208</td>
<td>61-1239600</td>
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<td>FMV</td>
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<td>CATHOLIC CHARITIES OF ORANGE COUNTY 1820 E 16TH ST SANTA ANA, CA 92701</td>
<td>95-3031389</td>
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<td>45,000.</td>
<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>CATHOLIC CHARITIES OF SOUTHEAST MICHIGAN</td>
<td>15945 CANAL RD CLINTON TOWNSHIP, MI 48038</td>
<td>45-3623184</td>
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<td>12,500.</td>
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<td>CATHOLIC CHARITIES OF SOUTHERN NEVADA</td>
<td>1501 LAS VEGAS BLVD N LAS VEGAS, NV 89101</td>
<td>88-0059425</td>
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<td>28,000.</td>
<td>FMV</td>
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<td>3</td>
<td>CATHOLIC CHARITIES OF ST LOUIS</td>
<td>20 ARCHBISHOP MAY DR RM 2258 SAINT LOUIS, M</td>
<td>43-0653270</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF AT</td>
<td>2401 LAKE PARK DR SE SMYRNA, GA 30080</td>
<td>58-1097003</td>
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<td>5</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF CH</td>
<td>721 N LA SALLE DR FL 6 CHICAGO, IL 60654</td>
<td>36-2170821</td>
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<td>1,132,250.</td>
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<td>6</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF GA</td>
<td>2900 LOUISIANA ST HOUSTON, TX 77006</td>
<td>74-1109733</td>
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<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF IN</td>
<td>PO BOX 1410 INDIANAPOLIS, IN 46206</td>
<td>45-1745384</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF WI</td>
<td>PO BOX 07912 MILWAUKEE, WI 53207</td>
<td>39-0806321</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF NE</td>
<td>1001 1ST AVE NEW YORK, NY 10022</td>
<td>13-5562184</td>
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<td>22-2164120</td>
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<td>FMV</td>
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<td>11</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF ST</td>
<td>1200 2ND AVE S MINNEAPOLIS, MN 55403</td>
<td>41-1302487</td>
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<td>161,800.</td>
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<td>12</td>
<td>CATHOLIC CHARITIES OF THE ARCHDIOCESE OF WA</td>
<td>924 G ST NW WASHINGTON, DC 20001</td>
<td>53-0196524</td>
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<td>76,150.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
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<tr>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF ARLINGTON</td>
<td>200 N GLEBE RD ARLINGTON, VA 22203</td>
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<tr>
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<td>301 CHERRY LN N HICKSVILLE, NY 11801</td>
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<td>35,000.</td>
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<td>CATHOLIC CHARITIES OF THE DIOCESE OF SPRINGFIELD</td>
<td>1625 W WASHINGTON ST SPRINGFIELD, IL 62702</td>
<td>37-0661499</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF ROCHELSE</td>
<td>1150 BUFFALO RD ROCHESTER, NY 14624</td>
<td>30-0553416</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>360 DIVISION AVE S STE 3A GRAND RAPIDS, MI 49503</td>
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<td>11,000.</td>
<td>FMV</td>
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<tr>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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**SCHEDULE I**

**(Form 990)**

**Department of the Treasury**

**Internal Revenue Service**

**OMB No. 1545-0047**

**2020**

**Open to Public Inspection**

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>CATHOLIC CHURCH EXTENSION SOCIETY OF US OF EXECUTIVE P/R 150 S WACKER DR FL 20 CHICAGO</td>
<td>36-6000520</td>
<td>501 (C) 3</td>
<td>39,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC CHURCH OF THE HOLY SPIRIT 10650 GULF BEACH HWY PENSACOLA, FL 32507</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC COMMUNITY FOUNDATION 1404 E 9TH ST CLEVELAND, OH 44114</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC COMMUNITY FOUNDATION FOR EASTERN S 523 NORTH DULUTH AVENUE SIOUX FALLS, SD 571</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>83-0400149</td>
<td>501 (C) 3</td>
<td>2,900,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC COMMUNITY FOUNDATION OF SOUTH CARO 901 ORANGE GROVE RD CHARLESTON, SC 29407</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC COMMUNITY OF ST FRANCIS XAVIER 13717 CUBA RD COCKEYSVILLE, MD 21030</td>
<td>52-1610757</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC COMMUNITY SERVICE INC 1803 GLACIER HWY JUNEAU, AK 99801</td>
<td>92-0042651</td>
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<td>FMV</td>
<td>N/A</td>
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<td>CATHOLIC COMMUNITY SERVICES OF SOUTHERN ARI 140 W SPEEDWAY BLVD STE 230 TUCSON, AZ 8570</td>
<td>86-0100880</td>
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<td>FMV</td>
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<td>CATHOLIC COMMUNITY SERVICES OF UTAH 745 S 300 S SALT LAKE CITY, UT 84102</td>
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<td>82,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC COMMUNITY SERVICES OF WESTERN WASH 100 23RD AVE S SEATTLE, WA 98144</td>
<td>91-1585652</td>
<td>501 (C) 3</td>
<td>101,650.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC DAUGHTERS OF THE AMERICAS 313 N MARABLE ST WEST, TX 76691</td>
<td>23-7172387</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>Amount of cash grant</th>
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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>CATHOLIC DIOCESE OF ARLINGTON</td>
<td>54-0967542</td>
<td>501 (C) 3</td>
<td>99,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>CATHOLIC DIOCESE OF AUSTIN</td>
<td>74-1542827</td>
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<td>FMV</td>
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<td>3</td>
<td>CATHOLIC DIOCESE OF BELLEVILLE GENERAL FUND</td>
<td>37-0673467</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CATHOLIC DIOCESE OF COLUMBUS</td>
<td>31-4379603</td>
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<td>41,000.</td>
<td>FMV</td>
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<td>5</td>
<td>CATHOLIC DIOCESE OF FORT WORTH</td>
<td>23-7052369</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>CATHOLIC DIOCESE OF FORT WORTH ADVANCEMENT</td>
<td>27-0518360</td>
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<td>59,000.</td>
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<td>7</td>
<td>CATHOLIC DIOCESE OF GALVESTON- HOUSTON</td>
<td>74-6018777</td>
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<td>8</td>
<td>CATHOLIC DIOCESE OF JEFFERSON CITY</td>
<td>44-0612540</td>
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<td>9</td>
<td>CATHOLIC DIOCESE OF RICHMOND</td>
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<td>10</td>
<td>CATHOLIC DIOCESE OF ROCKFORD</td>
<td>36-0879840</td>
<td>501 (C) 3</td>
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<td>11</td>
<td>CATHOLIC DIOCESE OF SAGINAW</td>
<td>38-1358181</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CATHOLIC DIOCESE OF SHERVEPORT</td>
<td>72-1077807</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>CATHOLIC DIOCESE OF WICHITA 424 N BROADWAY AVE WICHITA, KS 67202</td>
<td>48-0543780</td>
<td>501 (C) 3</td>
<td>30,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC DIOCESE OF WILMINGTON 1925 DELAWARE AVE WILMINGTON, DE 19806</td>
<td>51-0095439</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC DISTANCE UNIVERSITY INC 300 S GEORGE ST CHARLES TOWN, WV 25414</td>
<td>54-1251090</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC EDUCATION FOUNDATION OF THE DIOCES 16555 WEBER RD CREST HILL, IL 60403</td>
<td>36-4088859</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC FAMILY &amp; COMMUNITY SERVICES 775 VALLEY RD CLIFTON, NJ 7013</td>
<td>22-1487121</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC FOREIGN MISSION SOCIETY OF AMERICA MARYKNOLL FATHERS MARYKNOLL, NY 10545</td>
<td>13-1740144</td>
<td>501 (C) 3</td>
<td>133,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CATHOLIC FOUNDATION FOR THE ARCHDIOCESE OF PO BOX 23825 GREEN BAY, WI 54305</td>
<td>39-1924921</td>
<td>501 (C) 3</td>
<td>76,170.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC FOUNDATION FOR THE DIOCESE OF TUCS 192 2 S STONE TUCSON, AZ 85701</td>
<td>86-0408580</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC FOUNDATION OF MICHIGAN 1145 W LONG LAKE RD STE 201 BLOOMFIELD HILL</td>
<td>81-4107324</td>
<td>501 (C) 3</td>
<td>21,227.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC FOUNDATION OF SOUTHEASTERN MASSACH 450 HIGHLAND AVE FALL RIVER, MA 2720</td>
<td>82-5093066</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CATHOLIC FOUNDATION TRUST 257 E BROAD ST COLUMBUS, OH 43215</td>
<td>46-2383880</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

[Attach to Form 990.]

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CATHOLIC GUARDIAN SERVICES 1011 1ST AVE FL 10 NEW YORK, NY 10022</td>
<td>13-5562186</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>CATHOLIC HIGH SCHOOL ASSOCIATION OF THE ARC 20 ARCHBISHOP MAY DR SAINT LOUIS, MO 63119</td>
<td>43-0653242</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CATHOLIC INFORMATION CENTER 1501 K STREET NORTHWEST SUITE 175 WASHINGTON, DC 20005</td>
<td>52-1790727</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CATHOLIC INVESTMENT SERVICES INC 200 STATE STREET BOSTON, MA 2109</td>
<td>46-4354011</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>CATHOLIC LEADERSHIP INSTITUTE 440 E SWEDESFORD RD STE 3040 WAYNE, PA 19080</td>
<td>23-2661414</td>
<td>501 (C) 3</td>
<td>92,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>CATHOLIC LEAGUE FOR RELIGIOUS AND CIVIL RIG 450 7TH AVENUE 34TH FLR NEW YORK, NY 10123</td>
<td>23-7279981</td>
<td>501 (C) 3</td>
<td>25,105.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>CATHOLIC MEDICAL MISSION BOARD INC 100 WALL ST NEW YORK, NY 10005</td>
<td>13-5602319</td>
<td>501 (C) 3</td>
<td>199,830.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CATHOLIC NEAR EAST WELFARE ASSOC INC 1011 1ST AVE NEW YORK, NY 10022</td>
<td>13-1623929</td>
<td>501 (C) 3</td>
<td>46,254.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CATHOLIC PARTNERSHIPS SCHOOLS CAMDEN NJ INC 2824 RIVER AVE CAMDEN, NJ 8105</td>
<td>27-3236916</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>CATHOLIC RELIEF SERVICES UNITED STATES CONF 228 W LEXINGTON ST BALTIMORE, MD 21201</td>
<td>13-5563422</td>
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<td>1,817,887.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>CATHOLIC RESIDENTIAL SERVICES 635 W 7TH ST STE 401 CINCINNATI, OH 45203</td>
<td>31-1344280</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>12</td>
<td>CATHOLIC SCHOOL REGION OF MANHATTAN 1011 1ST AVE NEW YORK, NY 10022</td>
<td>46-3252482</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - Yes  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1. CATHOLIC SCHOOLS CENTER OF EXCELLENCE</td>
<td>6600 FRANCE AVE S STE 520 MINNEAPOLIS, MN 5</td>
<td>47-3560859</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. CATHOLIC SCHOOLS FOUNDATION INC</td>
<td>67 BATTERYMARCH ST FL 6 BOSTON, MA 2110</td>
<td>22-2485502</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. CATHOLIC SERVICES APPEAL FOUNDATION OF THE</td>
<td>12805 HIGHWAY 55 STE 210 MINNEAPOLIS, MN 55</td>
<td>46-4321593</td>
<td>501 (C) 3</td>
<td>20,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4. CATHOLIC SOCIAL SERVICES</td>
<td>222 N 17TH ST PHILADELPHIA, PA 19103</td>
<td>23-1352063</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. CATHOLIC SOCIAL SERVICES INC</td>
<td>197 E GAY ST FL 2 COLUMBUS, OH 43215</td>
<td>31-4379437</td>
<td>501 (C) 3</td>
<td>64,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. CATHOLIC SOCIAL SERVICES OF RI</td>
<td>1 CATHEDRAL SQ PROVIDENCE, RI 2903</td>
<td>05-0258854</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. CATHOLIC SPORTS</td>
<td>PO BOX 102584 DENVER, CO 80250</td>
<td>27-2282878</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. CATHOLIC UNIVERSITY OF AMERICA</td>
<td>620 MICHIGAN AVE NE WASHINGTON, DC 20064</td>
<td>53-0196583</td>
<td>501 (C) 3</td>
<td>12,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9. CATHOLIC YOUTH SUMMER CAMP INC</td>
<td>7550 RAMEY RD CENTERBURG, OH 43011</td>
<td>20-8398029</td>
<td>501 (C) 3</td>
<td>86,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. CATLIN GABEL SCHOOL</td>
<td>8825 SW BARNES RD FORTLAND, OR 97225</td>
<td>93-0386804</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. CATO INSTITUTE</td>
<td>1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20</td>
<td>23-7432162</td>
<td>501 (C) 3</td>
<td>1,587,886.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. CATS FOR LIFE INC</td>
<td>12723 STILLINGTON DR HOUSTON, TX 77015</td>
<td>26-2538970</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1(CATSKILL ART SOCIETY INC) PO BOX 991 LIVINGSTON MANOR, NY 12758</td>
<td>14-1544781</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>1(CATSKILL MOUNTAIN SHAKESPEARE LTD) 7053 NY-28 SHANDANKEN, NY 12480</td>
<td>84-4624412</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1(CATSKILL MOUNTAINEER INC) PO BOX 1005 LIVINGSTON MANOR, NY 12758</td>
<td>51-0583769</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1(CAUSETT FOUNDATION INCORPORATED) C/O JAMES GURTOWSKI 3 WALDEN CT HUNTINGTON,</td>
<td>11-3396186</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1(CUSA JUSTA JUST CAUSE) PO BOX 7737 OAKLAND, CA 94601</td>
<td>55-0883038</td>
<td>501 (C) 3</td>
<td>9,850</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1(CUSA OF OREGON) 700 MARION ST NE SALEM, OR 97301</td>
<td>61-1590160</td>
<td>501 (C) 3</td>
<td>19,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1(CAVAILER DRUM AND BUGLE CORPS INC) 9501 W DEVON AVE STE 605 ROSEMONT, IL 60018</td>
<td>23-7449578</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1(CHMC INC) PO BOX 8009 CHATTANOOGA, TN 37414</td>
<td>36-2004402</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1(CCAI) 6920 S HOLLY CIR CENTENNIAL, CO 80112</td>
<td>84-1208720</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>1(CCP COMMUNITY INITIATIVES FUND) 221 S FIGUEROA ST STE 400 LOS ANGELES, CA 90016</td>
<td>95-4774698</td>
<td>501 (C) 3</td>
<td>135,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1(CCP NEW YORK JEWISH FRENCH COMMUNITY CENTER) 353 KINGSTON AVE BROOKLYN, NY 11213</td>
<td>20-4388251</td>
<td>501 (C) 3</td>
<td>74,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1(CCFF) PO BOX 40790 AUSTIN, TX 78704</td>
<td>82-1346850</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to www.irs.gov/Form990 for the latest information.

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>CCSA FOUNDATION</td>
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<td>501 (C) 3</td>
<td>40,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>CCT MARKETPLACE</td>
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<td>501 (C) 3</td>
<td>225,526</td>
<td>FMV</td>
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<tr>
<td>(3)</td>
<td>CEASEFIRE PENNSYLVANIA EDUCATION</td>
<td></td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>CEC SEABEE HISTORICAL FOUNDATION INC</td>
<td></td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>CEDAR FALLS BIBLE CONFERENCE</td>
<td></td>
<td>501 (C) 3</td>
<td>52,000</td>
<td>FMV</td>
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<td>(6)</td>
<td>CEDAR FALLS COMMUNITY SCHOOLS FOUNDATION</td>
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<td>501 (C) 3</td>
<td>114,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>CEDAR LAKES CONSERVATION FOUNDATION INC</td>
<td></td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>CEDAR RIVERSIDE PEOPLES CENTER</td>
<td></td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>CEDAR SPRINGS PRESBYTERIAN CHURCH</td>
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<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>CEDAR TRAILS PARTNERSHIP</td>
<td></td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>CEDARS CHURCH OF CHRIST</td>
<td></td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>CEDARS-SINAI MEDICAL CENTER</td>
<td></td>
<td>501 (C) 3</td>
<td>128,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

   - 5

3. Enter total number of other organizations listed in the line 1 table.

   - 8
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CELEBRATE MAYA PROJECT 2 ROSIER CT LITTLE ROCK, AR 72211</td>
<td>35-2547694</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CELEBRATION FOUNDATION INC 610 SYCAMEORE STREET CELEBRATION, FL 34747</td>
<td>99-3370753</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CELIAC DISEASE FOUNDATION</td>
<td>10350 VENTURA BLVD STE 240 WOODLAND HILLS, CA 91423</td>
<td>95-4310830</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CELMA MAISTRY OVARIAN CANCER FOUNDATION INC PO BOX X 48787 SAINT PETERSBURG ST PETERSBURG, FL 33711</td>
<td>32-1023477</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CENT FOR URBAN COMMUNITY SVCS 198 EAST 121 ST 6TH FL NEW YORK, NY 10035</td>
<td>13-3687891</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>CENTENARY UNITED METHODIST CHURCH 645 W 5TH ST WINSTON SALEM, NC 27101</td>
<td>56-0552783</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CENTENNIAL COMMUNITY CHURCH 5890 AIRIKE LITTLETON, CO 80127</td>
<td>84-1021430</td>
<td>501 (c) 3</td>
<td>8,775.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>CENTENNIAL COVENANT CHURCH LITLTLETON CO 401 W MINERAL AVE LITLTLETON, CO 80120</td>
<td>84-1032447</td>
<td>501 (c) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CENTENNIAL FELLOWSHIP 4434 E MAPLEWOOD WAY CENTENNIAL, CO 80121</td>
<td>26-1263971</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>CENTENNIAL UNITED METHODIST CHURCH</td>
<td>1524 COUNTY ROAD C2 W SAINT PAUL, MN 55113</td>
<td>41-0857209</td>
<td>501 (c) 3</td>
<td>6,634.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CENTER CITY DISTRICT FOUNDATION</td>
<td>660 CHESTNUT ST PHILADELPHIA, PA 19106</td>
<td>23-2701217</td>
<td>501 (c) 3</td>
<td>39,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CENTER FOR ACTION AND CONTEMPLATION INC PO BOX 12464 ALBUQUERQUE, NM 87195</td>
<td>85-0354965</td>
<td>501 (c) 3</td>
<td>40,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attachment to Form 990.

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

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
<tr>
<td>2.</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

| Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed. |

<table>
<thead>
<tr>
<th>1</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a)</td>
<td>CENTER FOR ADOPTION SUPPORT AND EDUCATION INC</td>
<td>3919 NATIONAL DR STE 200 BURTONSVILLE, MD 2</td>
<td>21-0100734</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2 (b)</td>
<td>CENTER FOR ALCOHOL &amp; DRUG TREATMENT INC</td>
<td>1402 EAST SUPERIOR STREET DULUTH, MN 55802</td>
<td>41-0847934</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3 (c)</td>
<td>CENTER FOR AMERICAN GREATNESS INC</td>
<td>8009 N 6TH ST PARADISE VALLEY, AZ 85253</td>
<td>31-4984970</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4 (d)</td>
<td>CENTER FOR AMERICAN LIBERTY</td>
<td>PO BOX 2510 LEESBURG, VA 20177</td>
<td>83-0727789</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5 (e)</td>
<td>CENTER FOR AMERICAN PROGRESS</td>
<td>1333 H ST NW FL 10 WASHINGTON, DC 20005</td>
<td>30-0126510</td>
<td>501 (C) 3</td>
<td>418,250.</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6 (f)</td>
<td>CENTER FOR ARIZONA POLICY INC</td>
<td>PO BOX 97250 PHOENIX, AZ 85060</td>
<td>86-0618922</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7 (g)</td>
<td>CENTER FOR BIOLOGICAL DIVERSITY INC</td>
<td>PO BOX 710 TUCSON, AZ 85702</td>
<td>27-3943866</td>
<td>501 (C) 3</td>
<td>346,230.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 (h)</td>
<td>CENTER FOR BOOKS ARTS INCORPORATED 1974</td>
<td>28 W 27TH ST FL 3 NEW YORK, NY 10001</td>
<td>13-2842726</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 (i)</td>
<td>CENTER FOR CARBON REMOVAL</td>
<td>1111 BROADWAY FL 3 OAKLAND, CA 94607</td>
<td>81-2560407</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 (j)</td>
<td>CENTER FOR CLIMATE AND ENERGY SOLUTIONS</td>
<td>3100 CLARENDON BLVD STE 800 ARLINGTON, VA 2</td>
<td>54-1892252</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 (k)</td>
<td>CENTER FOR COASTAL STUDIES INC</td>
<td>PO BOX 1036 PROVINCETOWN, MA 2</td>
<td>04-2609788</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 (l)</td>
<td>CENTER FOR COMMON GROUND</td>
<td>1845 PATRIOT LN RUTHER GLEN, VA 22546</td>
<td>82-4589218</td>
<td>501 (C) 3</td>
<td>107,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ..........................................................

3 Enter total number of other organizations listed in the line 1 table. ..........................................................................................

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(1) CENTER FOR COMMUNITY CHANGE</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1536 U ST NW WASHINGTON, DC 20009</td>
<td>52-0888113</td>
<td>501 (C) 3</td>
<td>86,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CENTER FOR COMMUNITY STEWARDSHIP INC</td>
<td>116 N FEW ST MADISON, WI 53703</td>
<td>68-0501459</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CENTER FOR CONSTITUTIONAL RIGHTS INC</td>
<td>666 BROADWAY NEW YORK, NY 10012</td>
<td>22-6082880</td>
<td>501 (C) 3</td>
<td>115,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR CURIOSITY INC</td>
<td>62 W 47TH ST STE 707 NEW YORK, NY 10036</td>
<td>47-2000182</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CENTER FOR DEATH PENALTY LITIGATION</td>
<td>123 W MAIN ST STE 700 DURHAM, NC 27701</td>
<td>56-1939274</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<tr>
<td>CENTER FOR DISABILITY SERVICES INC</td>
<td>314 S MANNING BLVD ALBANY, NY 12208</td>
<td>14-1425851</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CENTER FOR DISASTER PHILANTHROPY INC</td>
<td>1 THOMAS CIR NW STE 700 WASHINGTON, DC 2000</td>
<td>45-5257937</td>
<td>501 (C) 3</td>
<td>72,000.</td>
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<tr>
<td>CENTER FOR DISEASE DYNAMICS ECONOMICS &amp; POL</td>
<td>962 WAYNE AVE STE 530 SILVER SPRING, MD 209</td>
<td>27-3235008</td>
<td>501 (C) 3</td>
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<tr>
<td>CENTER FOR ELECTION SCIENCE</td>
<td>340 S LEMON AVE 2456 WALNUT, CA 91789</td>
<td>45-2334002</td>
<td>501 (C) 3</td>
<td>331,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CENTER FOR ENRICHED LIVING</td>
<td>280 SAUNDERS RD RIVERWOODS, IL 60015</td>
<td>36-3339009</td>
<td>501 (C) 3</td>
<td>99,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR ENVIRONMENTAL LAW &amp; POLICY</td>
<td>85 S WASHINGTON ST STE 301 SEATTLE, WA 9810</td>
<td>91-1687883</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR EXCELLENCE IN EDUCATION</td>
<td>8201 GREENSBORO DR STE 215 MC LEAN, VA 2210</td>
<td>52-1256563</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

JSA
05/1288 1,000

18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (X Yes) [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>CENTER FOR FAMILY REPRESENTATION</td>
<td>51-0419496</td>
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<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>CENTER FOR FAMILY VIOLENCE PREVENTION</td>
<td>56-1438138</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>CENTER FOR FOOD ACTION IN NEW JERSEY</td>
<td>22-2189072</td>
<td>501 (C) 3</td>
<td>38,550.</td>
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<tr>
<td>CENTER FOR GLOBAL DEVELOPMENT</td>
<td>52-2351337</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CENTER FOR HEALING AND HOPE</td>
<td>02-0560511</td>
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<td>16,000.</td>
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<tr>
<td>CENTER FOR HEARING AND SPEECH</td>
<td>74-6003178</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>CENTER FOR HUMAN SERVICES</td>
<td>94-1725620</td>
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<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CENTER FOR HUMAN TECHNOLOGY</td>
<td>82-3492182</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR HUMANISTIC CHANGE OF NEW JERSEY</td>
<td>22-2385446</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR HUMANITARIAN OUTREACH AND INTERC</td>
<td>74-2494806</td>
<td>501 (C) 3</td>
<td>5,575.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CENTER FOR HUMANS AND NATURE NFP</td>
<td>43-1978884</td>
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<td>121,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR IMMIGRATION STUDIES INC</td>
<td>52-1449368</td>
<td>501 (C) 3</td>
<td>304,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>CENTER FOR INDEPENDENCE OF THE DISABLED IN 841 BROADWAY STE 301 NEW YORK, NY 10003</td>
<td>13-2984549</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR INDEPENDENT FUTURES 1015 DAVIS ST EVANSTON, IL 60201</td>
<td>36-4492994</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR INDEPENDENT THOUGHT INC 50 MONUMENT RD STE 102 BALA CYNWYD, PA 19005</td>
<td>52-0945376</td>
<td>501 (C) 3</td>
<td>1,079,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CENTER FOR INDIVIDUAL RIGHTS 1100 CONNECTICUT AVE NW 625 NO 6 WASHINGTON, DC 20000</td>
<td>52-1600481</td>
<td>501 (C) 3</td>
<td>58,103.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR INNOVATIVE GOVERNANCE RESEARCH 601 1 ST NW WASHINGTON, DC 20001</td>
<td>82-3264419</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR INQUIRY INC 3965 RENSCH RD BUFFALO, NY 14228</td>
<td>22-2306795</td>
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<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CENTER FOR JEWISH COMMUNITY STUDIES 1500 JOHN F KENNEDY BLVD STE 840 PHILADELPHIA</td>
<td>23-2009062</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CENTER FOR JEWISH LIFE OF ARLINGTON - BELMONT 129 LAKE ST ARLINGTON, MA 2247</td>
<td>47-1823484</td>
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<td>9,734.</td>
<td>FMV</td>
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<tr>
<td>CENTER FOR JUSTICE AND INTERNATIONAL LAW 1630 CONNECTICUT AVE NW STE 401 WASHINGTON, DC 20005</td>
<td>52-1730890</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CENTER FOR LAND-BASED LEARNING 40140 BEST RANCH RD WOODLAND, CA 95776</td>
<td>68-0472121</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER FOR LAW AND SOCIAL POLICY 1310 L ST NW STE 990 WASHINGTON, DC 20005</td>
<td>23-7000150</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>CENTER FOR MINDFUL LEARNING INC 751 PAGE RD LOWELL, VT 5847</td>
<td>36-4695073</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
SCHEDULE I  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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Part I  
General Information on Grants and Assistance

<p>| | | | | |</p>
<table>
<thead>
<tr>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
<td>Yes</td>
<td>No</td>
<td></td>
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</tbody>
</table>

Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
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<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
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<td>CENTER FOR NATIONAL INDEPENDENCE IN POLITIC</td>
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<td>15,000.</td>
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<td>(2)</td>
<td>CENTER FOR NEW AMERICAN SECURITY INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>CENTER FOR NONPROFIT MANAGEMENT</td>
<td>75-1366166</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>CENTER FOR NONVIOLENT COMMUNICATION</td>
<td>75-1980217</td>
<td>501 (C) 3</td>
<td>6,500.</td>
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<tr>
<td>(5)</td>
<td>CENTER FOR POPULAR DEMOCRACY</td>
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<td>65,000.</td>
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<td>(6)</td>
<td>CENTER FOR PREVENTION OF ABUSE</td>
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<td>(7)</td>
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<td>(9)</td>
<td>CENTER FOR RACE AND OPPORTUNITY</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>CENTER FOR RURAL AFFAIRS</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
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<td>2.</td>
<td>CENTER FOR SAFETY &amp; CHANGE INC</td>
<td>13-2989233</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>CENTER FOR SCIENCE IN THE PUBLIC INTEREST</td>
<td>23-7122879</td>
<td>501 (C) 3</td>
<td>44,150.</td>
<td>FMV</td>
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<tr>
<td>4.</td>
<td>CENTER FOR STRATEGIC AND INTERNATIONAL STUD</td>
<td>52-1501082</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>CENTER FOR TAXPAYER RIGHTS</td>
<td>84-2581279</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>CENTER FOR THE HOMELESS INC</td>
<td>35-1768544</td>
<td>501 (C) 3</td>
<td>28,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>CENTER FOR THE VISUALLY IMPAIRED INC</td>
<td>58-1168874</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>CENTER FOR TRANSFORMATIVE ACTION</td>
<td>16-0990318</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9.</td>
<td>CENTER FOR URBAN RENEWAL AND EDUCATION</td>
<td>31-1467594</td>
<td>501 (C) 3</td>
<td>72,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>CENTER FOR VICTIMS OF TORTURE</td>
<td>36-3383933</td>
<td>501 (C) 3</td>
<td>165,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>CENTER FOR WILDLIFE INC</td>
<td>22-2778845</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>CENTER FOR WOMEN &amp; ENTERPRISES INC</td>
<td>04-3256236</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CENTER FOR WORKING FAMILIES INC</td>
<td>12605 W NORTH AVE BROOKFIELD, WI 53005</td>
<td>46-4466447</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER FOR YOUNG WOMENS DEVELOPMENT</td>
<td>832 FOLSOM ST STE 700 SAN FRANCISCO, CA 94110</td>
<td>94-3227681</td>
<td>501 (C) 3</td>
<td>210,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER FOR YOUTH WELLNESS</td>
<td>3450 3RD ST BLDG 2 SAN FRANCISCO, CA 94124</td>
<td>45-2527627</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER OF CREATIVE ARTS</td>
<td>6880 WASHINGTON AVE SAINT LOUIS, MO 63130</td>
<td>43-1395056</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER OF HOPE</td>
<td>1905 E 8TH ST SIOUX FALLS, SD 57103</td>
<td>46-0463138</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER OF THE AMERICAN EXPERIMENT</td>
<td>8421 WAYZATA BLVD STE 110 MINNEAPOLIS, MN 55405</td>
<td>36-3611426</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER ON BUDGET AND POLICY PRIORITIES</td>
<td>1275 1ST ST NE STE 1200 WASHINGTON, DC 20000</td>
<td>52-1234565</td>
<td>501 (C) 3</td>
<td>132,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTER ON HALSTED</td>
<td>3656 N HALSTED ST CHICAGO, IL 60613</td>
<td>51-0178807</td>
<td>501 (C) 3</td>
<td>7,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER ON RACE POVERTY &amp; ENVIRONMENT</td>
<td>5901 CHRISTIE AVE STE 208 EMMERVILLE, CA 94633</td>
<td>05-0557231</td>
<td>501 (C) 3</td>
<td>160,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER POINT COMMUNITY CHURCH OF NAPLES INC</td>
<td>6590 GOLDEN GATE PKWY NAPLES, FL 34105</td>
<td>59-1685912</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER POINT-URBANA COMMUNITY SCHOOL DISTRICT</td>
<td>PO BOX 296 CENTER POINT, IA 52213</td>
<td>46-1123331</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CENTER STAGE ASSOCIATES INC</td>
<td>700 N CALVERT ST BALTIMORE, MD 21202</td>
<td>52-0780194</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..................................................

3. Enter total number of other organizations listed in the line 1 table: ..................................................

---

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

**Part I** General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☐ No ☑

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CENTER THEATRE GROUP OF LOS ANGELES</td>
<td>95-2466183</td>
<td>501 (C) 3</td>
<td>163,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CENTER UNITED METHODIST CHURCH</td>
<td>35-1097524</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CENTERS FOR SPIRITUAL LIVING</td>
<td>94-2239294</td>
<td>501 (C) 3</td>
<td>5,031</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CENTRAL AMERICAN MEDICAL OUTREACH INC</td>
<td>34-1740695</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL ASIA INSTITUTE</td>
<td>51-0376237</td>
<td>501 (C) 3</td>
<td>9,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL ASSEMBLY OF GOD</td>
<td>25-1371153</td>
<td>501 (C) 3</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>CENTRAL BAPTIST CHURCH</td>
<td>21-6000451</td>
<td>501 (C) 3</td>
<td>60,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL BAPTIST CHURCH</td>
<td>74-2610975</td>
<td>501 (C) 3</td>
<td>19,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL BREVARD SHARING CENTER INC</td>
<td>59-1839108</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL BUCKS SCHOOL DISTRICT</td>
<td>23-1667960</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL CAROLINA COMMUNITY COLLEGE FOUNDATION</td>
<td>56-1644218</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CENTRAL CATHOLIC HIGH SCHOOL</td>
<td>36-4428211</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   Yes [x]  
   No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-28888152</td>
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<td>2</td>
<td>CENTRAL CATHOLIC HIGH SCHOOL</td>
<td>1201 AIRPORT RD BLOOMINGTON, OH 43608</td>
<td>37-0895192</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CENTRAL CATHOLIC HIGH SCHOOL</td>
<td>1403 N SAINT MARYS ST SAN ANTONIO, TX 78215</td>
<td>74-1143115</td>
<td>501 (C) 3</td>
<td>5,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CENTRAL CHRISTIAN CHURCH</td>
<td>1001 NEW BEGINNINGS DR HENDERSON, NV 89011</td>
<td>88-0118790</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>CENTRAL CHURCH OF GOD</td>
<td>975 WILLIAM HILTON PARKWAY HILTON HEAD ISLA</td>
<td>57-0902499</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>CENTRAL CITY CONCERN INC</td>
<td>2506 NW 67TH AVE PORTLAND, OR 97209</td>
<td>93-0728816</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CENTRAL CITY OPERA HOUSE ASSOCIATION</td>
<td>4875 WARD RD STE 100 WHEAT RIDGE, CO 80033</td>
<td>84-6002285</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>CENTRAL CONGREGATIONAL UNITED CHURCH OF CHR</td>
<td>2676 CLAIRMONT ROAD NE ATLANTA, GA 30329</td>
<td>58-0625575</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CENTRAL COUNCIL OF THE SOCIETY OF ST VINCENT</td>
<td>249 BROADWAY BETHPAGE, NY 11714</td>
<td>11-1884961</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CENTRAL EUROPE CENTER FOR RESEARCH &amp; DOCUMENET</td>
<td>1141 LOXFOXD TER SILVER SPRING, MD 20901</td>
<td>58-1970134</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CENTRAL FLORIDA CARES HEALTH SYSTEM INC</td>
<td>707 MENDHAM BLVD STE 201 ORLANDO, FL 32825</td>
<td>51-0448002</td>
<td>501 (C) 3</td>
<td>36,667.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>CENTRAL FLORIDA COMMUNITY ARTS INC</td>
<td>250 SW IVANHOE BLVD ORLANDO, FL 32804</td>
<td>45-2324172</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>13</td>
<td>CENTRAL FUND OF ISRAEL</td>
<td>C/O JMARK INTERIORS 461 CENTRAL AVE CEDARHU</td>
<td>13-2992985</td>
<td>501 (C) 3</td>
<td>327,966.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.................................................................................................................................................................................................................................................................................................................................................................................................................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Enter total number of other organizations listed in the line 1 table........................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CENTRAL HIGH SCHOOL FOUNDATION</td>
<td>91-1771983</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. CENTRAL ILLINOIS FOODBANK</td>
<td>37-1106465</td>
<td>501 (C) 3</td>
<td>18,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. CENTRAL INDIANA COMMUNITY FOUNDATION INC</td>
<td>35-1793680</td>
<td>501 (C) 3</td>
<td>8,532,072</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4. CENTRAL INSTITUTE FOR THE DEAF</td>
<td>43-0662456</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5. CENTRAL KANSAS FLYWHEELS INC</td>
<td>48-0895591</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6. CENTRAL MENNONITE CHURCH</td>
<td>23-7353875</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>7. CENTRAL METHODIST UNIVERSITY</td>
<td>43-0654854</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. CENTRAL MICHIGAN UNIVERSITY</td>
<td>38-6004447</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9. CENTRAL MISSIONARY CLEARINGHOUSE INC</td>
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<td>FMV</td>
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<td>10. CENTRAL MONTANA FOUNDATION</td>
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<td>11. CENTRAL NEW YORK COMMUNITY FOUNDATION INC</td>
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<td>FMV</td>
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<td>12. CENTRAL OAKS COMMUNITY CHURCH</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

►Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes ☑

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>FMV</td>
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<td>6</td>
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<td>FMV</td>
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<td>CENTRAL VERMONT HUMANE SOCIETY INC</td>
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<td>8</td>
<td>CENTRAL VIRGINIA GOVERNORS SCHOOL FOUNDATION</td>
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<td>9</td>
<td>CENTRAL WISCONSIN SYMPHONY ORCHESTRA INC</td>
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<td>FMV</td>
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<td>CENTRACARE HEALTHCARE FOUNDATION</td>
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<td>FMV</td>
<td>N/A</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to www.irs.gov/Form990 for the latest information.

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**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>CENTRE FOR EFFECTIVE ALTRUISM USA INC</td>
<td>2443 FILLMORE ST SAN FRANCISCO, CA 94115</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2643 GATEWAY DR STE 3 STATE COLLEGE, PA 168</td>
<td>501 (C) 3</td>
<td>563,719.</td>
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<td>CENTREVILLE BAPTIST CHURCH</td>
<td>15100 LEE HWY CENTREVILLE, VA 20120</td>
<td>501 (C) 3</td>
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<td>CENTRO CORAZON DE MARIA INC</td>
<td>31 E MONTAUK HWY HAMPTON BAYS, NY 11946</td>
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<td>40,000.</td>
<td>FMV</td>
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<td>CENTRO DE CULTURA ARTE TRABAJO Y EDUCACION</td>
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<td>CENTRO PARROQUIAL DE AYUDA SOCIAL DE AIBONI</td>
<td>PO BOX 2132 AIBONITO, PR 705</td>
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<td>FMV</td>
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<td>CENTRUM FOUNDATION</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  
   - 18

3. Enter total number of other organizations listed in the line 1 table:  
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>5. CERTELL INC</td>
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<td>300,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6. CES INTERNATIONAL NORTH AMERICA INSTITUTE</td>
<td>82-4067452</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. CESAR ESTRADA CHAVEZ DUAL LANGUAGE IMMERSION</td>
<td>77-0565400</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8. C-FAM INC</td>
<td>13-3964076</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9. CHABAD - LUBAVITCH OF BCC INC</td>
<td>52-2201497</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. CHABAD AT DUKE UG INC</td>
<td>81-3815268</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. CHABAD AT STONY BROOK INC</td>
<td>11-29588801</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. CHABAD AT UIC INC</td>
<td>26-1195954</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>CHABAD CENTER</td>
<td>23-7438519</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD CENTER AT UNIVERSITY OF COLORADO INC</td>
<td>20-2853143</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD HOUSE BOWERY INC</td>
<td>26-2047932</td>
<td>501 (C) 3</td>
<td>13,640.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD HOUSE OF HARVARD SQUARE INC</td>
<td>04-3425635</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD ISRAELI CENTER INC</td>
<td>95-4035000</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD JEWISH CENTER OF GILBERT</td>
<td>46-2909758</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD JEWISH CENTER OF TOMS RIVER INC</td>
<td>20-1266177</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CHABAD LUBAVITCH CENTER</td>
<td>11-3587172</td>
<td>501 (C) 3</td>
<td>63,640.</td>
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<td>CHABAD LUBAVITCH CHAI CENTER INC</td>
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<td>501 (C) 3</td>
<td>19,580.</td>
<td>FMV</td>
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<tr>
<td>CHABAD LUBAVITCH OF BRADENTON INC</td>
<td>20-1636179</td>
<td>501 (C) 3</td>
<td>10,260.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF CHESTNUT HILL INC</td>
<td>04-3542984</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF CLARK COUNTY</td>
<td>20-2063695</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes ☑  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>CHABAD LUBAVITCH OF GREENWICH INC</td>
<td>22-3616874</td>
<td>501 (C) 3</td>
<td>191,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF MONTANA</td>
<td>20-5850815</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF MYRTLE BEACH</td>
<td>57-0852427</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF NORTH MIAMI INC</td>
<td>65-1124450</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF ROCHESTER INC</td>
<td>11-2608573</td>
<td>501 (C) 3</td>
<td>41,540.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF ROCKFORD NFP</td>
<td>27-3379708</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF ROCKLAND</td>
<td>13-1837428</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>CHABAD LUBAVITCH OF THE MAIN LINE INC</td>
<td>20-0072887</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CHABAD LUBAVITCH OF UTAH INC</td>
<td>87-0500798</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF WEST BOYNTON BEACH INC</td>
<td>26-4098856</td>
<td>501 (C) 3</td>
<td>14,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH OF WESPORT</td>
<td>22-3484390</td>
<td>501 (C) 3</td>
<td>30,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD LUBAVITCH ON CAMPUS - PRINCETON</td>
<td>05-0576386</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
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### Part I: General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) CHABAD OF ARGENTINA RELIEF APPEAL INC</td>
<td>27-0049239</td>
<td>501 (C) 3</td>
<td>14,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) CHABAD OF BINGHAMTON</td>
<td>16-1254782</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) CHABAD OF GRAMERCY PARK</td>
<td>13-3969811</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) CHABAD OF GREAT NECK INC</td>
<td>11-3013923</td>
<td>501 (C) 3</td>
<td>23,190.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) CHABAD OF JAMAICA INC</td>
<td>47-1124378</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) CHABAD OF MEDFORD INC</td>
<td>02-0644268</td>
<td>501 (C) 3</td>
<td>14,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) CHABAD OF MIDTOWN MANHATTAN INC</td>
<td>11-3046538</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) CHABAD OF MOORPARK</td>
<td>47-3121978</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) CHABAD OF MUMBAI INC</td>
<td>47-3540273</td>
<td>501 (C) 3</td>
<td>8,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) CHABAD OF PORT WASHINGTON</td>
<td>11-3281694</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CHABAD OF SILVER SPRING INC</td>
<td>46-0962853</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) CHABAD OF SOUTHAMPTON INC</td>
<td>11-3390836</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>CHABAD OF THE CONEJO INC 30345 CANWOOD ST AGOURA HILLS, CA 91301 77-0304127 501 (C) 3 47,044. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD OF THE WEST SIDE 4021 HARDING DR WESTLAKE, OH 44145 47-4896798 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD OF WILMINGTON NC INC 2614 MARKET ST WILMINGTON, NC 28403 20-8660336 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD OF WOODLAND HILLS 5225 KELVIN AVE WOODLAND HILLS, CA 91364 86-1105297 501 (C) 3 18,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD ON CAMPUS AT OSU 207 E 15TH AVE COLUMBUS, OH 43201 81-2505414 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD RELIEF PROJECT INC 3 W 57TH ST FL 9 NEW YORK, NY 10019 45-1211151 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD SBN 418 MIDWOOD ST BROOKLYN, NY 11225 47-4416811 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD SYNAGOGUES INC 43 S PLAZA PL ATLANTIC CITY, NJ 8401 32-3028002 501 (C) 3 29,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD-LUBAVITCH CONGREGATION OF HARRISBURG 3515 GREEN ST HARRISBURG, PA 17110 25-1697877 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHABAD-LUBAVITCH OF THE UPPER EAST SIDE INC 419 E 77TH ST NEW YORK, NY 10075 11-3083540 501 (C) 3 48,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAFFEE CARES 124 DODGE ST SALIDA, CO 81201 85-0520050 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAGRIN FALLS FIREFIGHTERS CHARITABLE FOUNDATION 21 W WASHINGTON ST CHAGRIN FALLS, OH 44022 83-1814705 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<tr>
<td>CHAI LIFELINE INC</td>
<td>11-2940331</td>
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<tr>
<td>CHALLENGE SUCCESS</td>
<td>45-3767621</td>
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<tr>
<td>CHALLENGED ATHLETES INC</td>
<td>33-0739596</td>
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<tr>
<td>CHAMAR</td>
<td>23-7365688</td>
</tr>
<tr>
<td>CHAMBER MUSIC SAN FRANCISCO</td>
<td>51-0448351</td>
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<td>13-2628036</td>
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<td>CHAMBLISS CENTER FOR CHILDREN</td>
<td>62-0505514</td>
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<td>CHAMP ASSISTANCE DOGS</td>
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<td>CHAMPAIGN COUNTY HUMANE ASSOCIATION INC</td>
<td>34-1330024</td>
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<td>CHAMPAIGN-URBANA FRIENDS AND ALLIES OF IMM</td>
<td>82-1987978</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CHAMPION FOREST BAPTIST CHURCH</td>
<td>74-1277722</td>
<td>501 (c) 3</td>
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<tr>
<td>2</td>
<td>CHAMPLAIN AREA TRAILS INC</td>
<td>26-4004845</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CHAMPLAIN VALLEY OFFICE OF ECONOMIC OPPORTU</td>
<td>03-0216837</td>
<td>501 (c) 3</td>
<td>17,000.</td>
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<td>4</td>
<td>CHANNING CONNECT</td>
<td>26-3296138</td>
<td>501 (c) 3</td>
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<td>5</td>
<td>CHANCES FOR CHILDREN-NY INC</td>
<td>47-3482005</td>
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<td>152,000.</td>
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<td>7</td>
<td>CHANGE SUMMER INC</td>
<td>83-0670185</td>
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<td>8</td>
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<td>9</td>
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<td>10</td>
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<tr>
<td>11</td>
<td>CHAPEL &amp; YORK FOUNDATION INC</td>
<td>81-2161937</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table

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

**(Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

[Attach to Form 990.]

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes[х] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>CHAPEL HILL BIBLE CHURCH OF CHAPEL HILL NOR</td>
<td>260 ERWIN RD CHAPEL HILL, NC 27514</td>
<td>51-0138255</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>CHAPEL HILL CHRISTIAN SCHOOL ENDOWMENT FUND</td>
<td>1900 HOME AVE CUYAHOGA FALLS, OH 44221</td>
<td>36-1588010</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHAPEL HILL PRESBYTERIAN CHURCH</td>
<td>3108 WESTBOUND 40 HIGHWAY BLUE SPRINGS, MO</td>
<td>42-1308020</td>
<td>501 (C) 3</td>
<td>104,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CHAPEL INC</td>
<td>2505 W HAMILTON RD S FORT WAYNE, IN 46814</td>
<td>35-1930152</td>
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<td>13,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAPEL OF SAINT JOHN THE DIVINE</td>
<td>1011 S WRIGHT ST CHAMPAIGN, IL 61820</td>
<td>37-6040186</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAPEL OF THE VENERABLE BEDE, INC.</td>
<td>1150 STANFORD DRIVE CORAL GABLES, FL 33146</td>
<td>65-6500786</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
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<tr>
<td>CHAPEL ON THE CAMPUS INC</td>
<td>3355 DALRYMPLE DR BATON ROUGE, LA 70802</td>
<td>23-7204437</td>
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<td>7,200.</td>
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<td>CHAPEL ON THE VINE</td>
<td>5551 AIMSLEY DRIVE WESTERVILLE, OH 43082</td>
<td>26-4010907</td>
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<td>21,800.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CHAPELWOOD METHODIST CHURCH</td>
<td>11140 GREENBAY ST HOUSTON, TX 77024</td>
<td>74-1168922</td>
<td>501 (C) 3</td>
<td>68,000.</td>
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<tr>
<td>CHAPELWOOD UNITED METHODIST CHURCH</td>
<td>300 WILLOW DRIVE LAKE JACKSON, TX 77566</td>
<td>76-0008484</td>
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<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAPIN SCHOOL LTD</td>
<td>100 E END AVE NEW YORK, NY 10028</td>
<td>13-1635257</td>
<td>501 (C) 3</td>
<td>248,330.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAPMAN UNIVERSITY</td>
<td>1 UNIVERSITY DR ORANGE, CA 92866</td>
<td>95-1643992</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Schedule I (Form 990) 2020
Part I General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
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<td>CHARACTER THAT COUNTS INC</td>
<td>27-1189956</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>512 NE VICTORIA DR LEES SUMMIT, MO 64086</td>
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<td>CHARCOT-MARIE-TOOTH ASSOCIATION</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 S GARFIELD AVE GLENOLDEN, PA 19036</td>
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<td>CHARIOTS FOR HOPE INC</td>
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<td>1601 LIMEKILN PIKE DRESHER, PA 19025</td>
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<td>FMV</td>
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<td>9100 PURDUE RD STE 115 INDIANAPOLIS, IN 462</td>
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<td>CHARITIES AID FOUNDATION AMERICA</td>
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<td>225 REINEKERS LN STE 375 ALEXANDRIA, VA 223</td>
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<td>CHARITY GLOBAL INC</td>
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<td>40 WORTH ST RM 330 NEW YORK, NY 10013</td>
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<td>CHARITY NAVIGATOR</td>
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<td>32,600.</td>
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<td>299 MARKET ST STE 250 SADDLE BROOK, NJ 7663</td>
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<td>CHARLES A WALBURG MULTI SERVICE ORGANIZATION</td>
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<td>163 W 125TH ST NEW YORK, NY 10027</td>
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<td>PO BOX 10 BROKEN ARROW, OK 74013</td>
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<td>CHARLES E SMITH JEWISH DAY SCHOOL OF GREATER</td>
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<td>1901 E JEFFERSON ST ROCKVILLE, MD 20852</td>
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<tbody>
<tr>
<td>1</td>
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<td>2</td>
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<tr>
<td>3</td>
<td>CHARLES SHERROD COMMUNITY DEVELOPMENT CORP</td>
<td>47-3985534</td>
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<td>1,000,000.</td>
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<td>4</td>
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<td>5</td>
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<td>6</td>
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<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>7</td>
<td>CHARLESTON ORPHAN HOUSE INC</td>
<td>57-0669877</td>
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<td>FMV</td>
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<td>8</td>
<td>CHARLESTON SYMPHONY ORCHESTRA</td>
<td>57-6000192</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>CHARLEYS FUND INC</td>
<td>20-2014968</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>CHARLIE DANIELS JOURNEY HOME PROJECT</td>
<td>47-1616161</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>11</td>
<td>CHARLIE FOUNDATION TO HELP CURE PEDIATRIC E</td>
<td>27-3778357</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>CHARLOTTE COUNTRY DAY SCHOOL</td>
<td>56-0623935</td>
<td>501 (C) 3</td>
<td>63,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>CHARLOTTE FAMILY HOUSING INC</td>
<td>300 HAWTHORNE LN FL 3 CHARLOTTE, NC 28204</td>
<td>58-1599120</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>2</td>
<td>CHARLOTTE FILM SOCIETY</td>
<td>3908 WOODFOX DR CHARLOTTE, NC 28277</td>
<td>27-3319192</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CHARLOTTE LATIN SCHOOLS INC</td>
<td>9502 PROVIDENCE RD CHARLOTTE, NC 28277</td>
<td>56-0944449</td>
<td>501 (C) 3</td>
<td>14,970.</td>
<td>FMV</td>
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<td>4</td>
<td>CHARLOTTE MECKLENBURG LIBRARY FOUNDATION</td>
<td>220 N TRYON ST CHARLOTTE, NC 28202</td>
<td>46-1172548</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>CHARLOTTE NEUROSCIENCE ASSOCIATION INC</td>
<td>300 BILLINGSLEY RD CHARLOTTE, NC 28211</td>
<td>46-4329944</td>
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<td>FMV</td>
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<td>6</td>
<td>CHARLOTTE RESCUE MISSION ENDOWMENT</td>
<td>907 W 1ST ST CHARLOTTE, NC 28202</td>
<td>56-0571223</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>CHARLOTTE RESCUE MISSION</td>
<td>907 W 1ST ST CHARLOTTE, NC 28202</td>
<td>47-2414761</td>
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<td>59,600.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CHARLOTTESVILLE FREE CLINIC</td>
<td>1138 ROSE HILL DR STE 200 CHARLOTTESVILLE,</td>
<td>54-1610405</td>
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<td>12,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CHARTER FUND INC</td>
<td>10901 W 120TH AVE STE 450 BROOMFIELD, CO 80</td>
<td>05-0620063</td>
<td>501 (C) 3</td>
<td>600,000.</td>
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<td>10</td>
<td>CHARTER OAK ATHLETICS</td>
<td>19617 E BELLBROOK ST COVINA, CA 91724</td>
<td>83-2407581</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CHASDEI ELIYAHU</td>
<td>200 HAVENWOOD RD WINNEWOOD, PA 19096</td>
<td>23-3017387</td>
<td>501 (C) 3</td>
<td>10,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>CHASIDEI SKULEN DE-LAKEWOOD INC</td>
<td>117 HUDSON ST LAKESIDE, NJ 8701</td>
<td>22-3849321</td>
<td>501 (C) 3</td>
<td>5,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>CHATHAM HALL</td>
<td>54-0505878</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1326 PITTTSBURG, NC 27312</td>
<td>56-1668767</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOODLAND RD PITTSBURG, PA 15232</td>
<td>25-0717890</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHATTANOOGA AREA FOOD BANK, INC.</td>
<td>58-2095413</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2009 CURTAIN POLK ROAD CHATTANOOGA, TN 3740</td>
<td>62-0867645</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHATTANOOGA CHRISTIAN COMMUNITY FOUNDATION</td>
<td>62-1536731</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHATTANOOGA CHURCH MINISTRIES INC</td>
<td>62-1151413</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHAUTAUQUA FOUNDATION INC</td>
<td>16-6028421</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CHAUTAUQUA INSTITUTION</td>
<td>16-0758844</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHAUTAUQUA WATERSHED CONSERVANCY INC</td>
<td>16-1398010</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHAYA ISRAEL FOUNDATION</td>
<td>42-1605375</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHEEKWOOD BOTANICAL GARDEN AND MUSEUM OF AR</td>
<td>62-0627921</td>
<td>501 (C) 3</td>
<td>88,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tbody>
<tr>
<td>(1)</td>
<td>CHEETAH CONSERVATION FUND</td>
<td>200 DAINGERFIELD RD STE 200 ALEXANDRIA, VA 22314</td>
<td>501 (C) 3</td>
<td>43,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>CHELAN-DOUGLAS LAND TRUST</td>
<td>18 N WENATCHEE AVE WENATCHEE, WA 98801</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>CHELTEN BAPTIST CHURCH</td>
<td>1601 LIMEKILN PIKE DRESHER, PA 19025</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>CHENA MANOR</td>
<td>733 GLEN WILLOW RD AVONDALE, PA 19311</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>CHEROKEE CHILD ADVOCACY COUNCIL INC</td>
<td>9870 HIGHWAY 92 STE 200 WOODSTOCK, GA 30188</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>CHERRY CREEK SCHOOLS FOUNDATION</td>
<td>1741 S LARETO ST T AURORA, CO 80017</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>CHERRY HILLS BAPTIST CHURCH</td>
<td>2125 WOODSIDE RD SPRINGFIELD, IL 62711</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>CHERRY STREET MISSION MINISTRIES</td>
<td>1501 MONROE ST TOLEDO, OH 43604</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>CHESAPEAKE BAY FOUNDATION INC</td>
<td>6 HERDON AVE ANNAPOLIS, MD 21403</td>
<td>501 (C) 3</td>
<td>181,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>CHESAPEAKE BAY MARITIME MUSEUM INC</td>
<td>213 N TALBOT ST ST MICHAELS, MD 21663</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>CHESAPEAKE BAY TRUST</td>
<td>108 SEVERN AVE ANNAPOLIS, MD 21403</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>CHESAPEAKE CHRISTIAN FELLOWSHIP INC</td>
<td>PO BOX 126 GALESVILLE, MD 20765</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

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   □ Yes  ☑ No

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<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 8 WY MILL, MD 21679</td>
<td>52-1104909</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>331 E DOVER ST FL 1 EASTON, MD 21601</td>
<td>46-0893377</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 6564 ANNAPOLIS, MD 21401</td>
<td>35-2188410</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHESAPEAKE REGION ACCESSIBLE BOATING INC</td>
<td>06-6061857</td>
<td>501 (C) 3</td>
<td>12,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHESAPEAKE REGION ACCESSIBLE BOATING INC</td>
<td>02-0202220</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>205 ACADEMY RD CHESHIRE, CT 6410</td>
<td>06-0770198</td>
<td>501 (C) 3</td>
<td>6,240.</td>
<td>FMV</td>
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<td>4231 GREENMOUNT RD PHILADELPHIA, PA 19154</td>
<td>23-1352626</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>650 PENNSYLVANIA DR EXTON, PA 19341</td>
<td>27-0887311</td>
<td>501 (C) 3</td>
<td>77,275.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>701 E MARSHALL ST WEST CHESTER, PA 19380</td>
<td>23-0469150</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>701 E MARSHALL ST WEST CHESTER, PA 19380</td>
<td>23-2267407</td>
<td>501 (C) 3</td>
<td>63,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) CHESTER EASTSIDE INC 301 E 9TH ST CHESTER, PA 19013</td>
<td>46-5439442</td>
<td>501 (C) 3</td>
<td>28,625.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) CHESTER THEATRE COMPANY PO BOX 722 4 MAIN ST. CHESTER, MA 1011</td>
<td>22-3081088</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(3) CHESTERFIELD PUBLIC EDUCATION FOUNDATION IN 13900 HULL STREET RD MIDLOTHIAN, VA 23112</td>
<td>54-1595479</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>(4) CHESTERFIELD-COLONIAL HEIGHTS ALLIANCE FOR PO BOX 1741 CHESTERFIELD, VA 23832</td>
<td>54-1491582</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) CHESTERTON ACADEMY OF THE HOLY FAMILY NFP I 5205 KINGSTON AVE LISLE, IL 60532</td>
<td>47-1083471</td>
<td>501 (C) 3</td>
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<td>(7) CHESTNUT HILL SCHOOL 428 HAMMOND ST CHESTNUT HILL, MA 2467</td>
<td>04-2178868</td>
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<td>7,500.</td>
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<td>(8) CHETEK MAYERHAUSEN SCHOLARSHIP FOUNDATION PO BOX 187 EAU CLAIRE, WI 54702</td>
<td>31-1493038</td>
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<td>6,000.</td>
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<tr>
<td>(9) CHEVRA HATZALAH OF ELIZABETH CORP 167 SUMMIT RD ELIZABETH, NJ 7208</td>
<td>20-0569884</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<tr>
<td>(10) CHEVRAT PINTO, INC. 207 WEST 78TH STREET NEW YORK, NY 10024</td>
<td>11-3477444</td>
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<td>30,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CHEVY CHASE PRESBYTERIAN CHURCH 1 CHEVY CHASE CIR NW WASHINGTON, DC 20015</td>
<td>53-0196531</td>
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<td>(12) CHEWONKI FOUNDATION INC 485 CHEWONKI NECK RD WISCASSET, ME 4578</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table
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   - X Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<tr>
<td>1</td>
<td>(a) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2</td>
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<td>(1) CHICAGO CHILDRENS MUSEUM</td>
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<td>(2) CHICAGO CHILDRENS THEATRE</td>
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<td>(4) CHICAGO COALITION TO SAVE OUR MENTAL HEALTH</td>
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<td>(9) CHICAGO FURNITURE BANK INC</td>
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<td>(12) CHICAGO HOPE ACADEMY</td>
<td>36-4244054</td>
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<td>FMV</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tbody>
<tr>
<td>CHICAGO HORTICULTURAL SOCIETY 1000 LAKE COOK RD GLENCOE, IL 60022</td>
<td>36-2225482</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CHICAGO HUMANITIES FESTIVAL 500 N DEARBORN ST STE 825 CHICAGO, IL 60654</td>
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<td>FMV</td>
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<td>CHICAGO JAZZ PHILHARMONIC 1111 N WELLS ST STE 501 CHICAGO, IL 60610</td>
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<td>CHICAGO JESUIT ACADEMY 5058 W JACKSON BLVD CHICAGO, IL 60644</td>
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<td>169,250.</td>
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<td>CHICAGO JEWISH DAY SCHOOL 3730 N CALIFORNIA AVE CHICAGO, IL 60618</td>
<td>36-4437180</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CHICAGO PROVINCE OF THE SOCIETY OF JESUS 1010 N HOOKER ST CHICAGO, IL 60642</td>
<td>36-2167013</td>
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<td>CHICAGO PUBLIC LIBRARY FOUNDATION 200 W MADISON ST FL 3 CHICAGO, IL 60606</td>
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<td>CHICAGO PUBLIC MEDIA INC 848 E GRAND AVE CHICAGO, IL 60611</td>
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<td>91,450.</td>
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<td>CHICAGO SHAKESPEARE THEATER 800 E GRAND AVE CHICAGO, IL 60611</td>
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<td>CHICAGO SYMPHONY ORCHESTRA 70 E LAKE ST STE 1430 CHICAGO, IL 60601</td>
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<td>102,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHICAGO TRAINING CENTER</td>
<td>30-5261899</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHICAGO WEST BIBLE CHURCH</td>
<td>82-2162307</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
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<td>CHICAGO ZOOLOGICAL SOCIETY</td>
<td>36-2167016</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>CHICAGOLAND STREETS PROJECT</td>
<td>47-2856259</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHICKEN &amp; EGG PICTURES INC</td>
<td>47-4712007</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>CHIEF EXECUTIVES FOR CORPORATE PURPOSE INC</td>
<td>13-4024259</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>CHILLING OPEN LANDS</td>
<td>38-3515636</td>
<td>501 (C) 3</td>
<td>137,750.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD ADVOCATES INCORPORATED</td>
<td>76-0111345</td>
<td>501 (C) 3</td>
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<tr>
<td>CHILD CARE AND LEARNING CENTER</td>
<td>54-1061820</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHILD CARE LAW CENTER</td>
<td>94-2959973</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Schedule I (Form 990) 2020

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer Identification Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHILD CARE RESOURCES 1225 S WELLER ST STE 300 SEATTLE, WA 98144</td>
<td>91-1465046</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD CRISIS ARIZONA 817 N COUNTRY CLUB DR MESA, AZ 85201</td>
<td>86-0324144</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD EVANGELISM FELLOWSHIP INC 166 BISHOP RD BOZRAH, CT 06334</td>
<td>38-6091187</td>
<td>501 (c) 3</td>
<td>637,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD EVANGELISM FELLOWSHIP INC PO BOX 12523 MURFREESBORO, TN 37129</td>
<td>62-0552175</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CHILD EVANGELISM FELLOWSHIP INC CHESTER COU PO BOX 50 COATESVILLE, PA 19320</td>
<td>23-1384942</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD EVANGELISM FELLOWSHIP OF PA INC 55 HOWELL DR MIFFLINTOWN, PA 17059</td>
<td>25-1099965</td>
<td>501 (c) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD FOUNDATION 2020 NE 102ND AVE PORTLAND, OR 97220</td>
<td>93-1148608</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD FREEDOM COALITION INC 539 EMMORY PEAK DR RICHMOND, TX 77469</td>
<td>23-7219520</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>CHILD GUIDANCE RESOURCE CENTERS INC 2000 OLD WEST CHESTER PIKE HAVERTOWN, PA 19</td>
<td>23-1490061</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>CHILD LINK INC 955 W CERMAK RD CHICAGO, IL 60608</td>
<td>11-3718683</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CHILD MIND INSTITUTE INC 101 E 56TH ST NEW YORK, NY 10022</td>
<td>80-0478843</td>
<td>501 (c) 3</td>
<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHILD PROTECTIVE SERVICES COMMUNITY PARTNER 7950 ELMBROOK DR DALLAS, TX 75247</td>
<td>75-2468034</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ● Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CHILD RESCUE COALITION INC</td>
<td>4530 CONFERENCE WAY S BOCA RATON, FL 33431</td>
<td>45-5358378</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) CHILD CARE RESOURCES OF INDIAN RIVER INC</td>
<td>2300 5TH AVE STE 149 VERO BEACH, FL 32960</td>
<td>65-0523165</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) CHILD FUND INTERNATIONAL USA</td>
<td>2821 EMERYWOOD PKWY HENRICO, VA 23294</td>
<td>54-0536100</td>
<td>501 (C) 3</td>
<td>49,174.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) CHILDHAVEN</td>
<td>316 BROADWAY SEATTLE, WA 98122</td>
<td>91-0402430</td>
<td>501 (C) 3</td>
<td>23,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) CHILDHOOD CANCER COMMUNITY</td>
<td>905 9TH ST SE ROCHESTER, MN 55904</td>
<td>84-1937145</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) CHILDREN AFTER SCHOOL ARTS</td>
<td>584 CASTRO STREET STE 264 SAN FRANCISCO, CA</td>
<td>73-1708893</td>
<td>501 (C) 3</td>
<td>11,111.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) CHILDREN AID SOCIETY</td>
<td>343 LINCOLN WAY W NEW OXFORD, PA 17350</td>
<td>23-1429838</td>
<td>501 (C) 3</td>
<td>431,441.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) CHILDREN AND SCREENS-INSTITUTE OF DIGITAL M</td>
<td>1290 AVENUE OF THE AMERICAS FL 34 NEW YORK,</td>
<td>46-3527551</td>
<td>501 (C) 3</td>
<td>108,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) CHILDREN FIRST INC</td>
<td>1723 N ORANGE AVE SARASOTA, FL 34234</td>
<td>59-0968249</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
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<td>(10) CHILDREN INCORPORATED</td>
<td>11513 ALECINIGE PKWY NORTH CHESTERFIELD, V</td>
<td>54-0761510</td>
<td>501 (C) 3</td>
<td>18,800.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CHILDREN INTERNATIONAL</td>
<td>2000 E RED BRIDGE RD KANSAS CITY, MO 64131</td>
<td>44-6005794</td>
<td>501 (C) 3</td>
<td>68,492.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) CHILDREN OF FALLEN PATRIOTS FOUNDATION</td>
<td>1818 LIBRARY ST STE 500 RESTON, VA 20190</td>
<td>47-0902295</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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\[\text{Attach to Form 990.}\]

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   \(\square\) Yes  \(\square\) No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CHILDREN OF PROMISE INC</td>
<td>36-4490602</td>
<td>501 (C) 3</td>
<td>5,018.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CHILDREN OF SHELTERS</td>
<td>94-3192608</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CHILDREN OF THE NATIONS</td>
<td>91-1702551</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CHILDREN SCHOLARSHIP FUND PHILADELPHIA</td>
<td>23-3078729</td>
<td>501 (C) 3</td>
<td>45,163.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CHILDREN TO LOVE INTERNATIONAL</td>
<td>77-0362117</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
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<td>7</td>
<td>CHILDRENS ADVOCACY CENTER FOR DENTON COUNTY</td>
<td>75-2559765</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>8</td>
<td>CHILDRENS ADVOCACY CENTER OF COLLIN COUNTY</td>
<td>75-2389095</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CHILDRENS AID AND FAMILY SERVICES INC</td>
<td>22-1487147</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>CHILDRENS ALLIANCE</td>
<td>91-0982879</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>11</td>
<td>CHILDRENS BRAIN TUMOR FOUNDATION INC</td>
<td>13-3512123</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CHILDRENS BRIDGE OF ZICHRON MENACHEM INC</td>
<td>13-4044539</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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   - No [ ]

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>CHILDRENS CANCER ASSOCIATION</td>
<td>93-1181662</td>
<td>501 (C) 3</td>
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<td>41-1893645</td>
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<td>CHILDRENS CENTER</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHILDREN'S COUNCIL OF SAN FRANCISCO</td>
<td>94-2221305</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>CHILDRENS CREATIVITY MUSEUM</td>
<td>94-3178735</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>CHILDRENS DAY SCHOOL INC</td>
<td>94-3248631</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>CHILDRENS DAY TREATMENT CENTER &amp; SCHOOL INC</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **X** Yes  
   **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>CHILDREN'S HEALTH DEFENSE 1227 N PEACHTREE PKWY PEACHTREE CITY, GA 30</td>
<td>26-0388604</td>
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<td>59-0192430</td>
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<td>54-0505884</td>
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<td>CHILDREN'S HOME SOCIETY OF WASHINGTON 12360 LAKE CITY WAY NE SEATTLE, WA 98125</td>
<td>91-0575955</td>
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<td>FMV N/A</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(2) CHILDREN'S HOPECHEST INC</td>
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<td>(4) CHILDREN'S HOSPITAL &amp; MEDICAL CENTER</td>
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<td>PO BOX 980693 RICHMOND, VA 23298</td>
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<td>(7) CHILDREN'S HOSPITAL ASSOCIATION INCORPORATED</td>
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<td>13123 E 16TH AVE # 045 AURORA, CO 80045</td>
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</tr>
</tbody>
</table>

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

2. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>77-0587835</td>
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<td>7 WEST DR BETHESDA, MD 20814</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
<th>(h)</th>
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<tr>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<td>CHILDRENS MEDICAL CENTER FOUNDATION</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No ☐  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>42-1157665</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(2) CHINA SERVICES VENTURES</td>
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<td>(3) CHINATOWN COMMUNITY DEVELOPMENT CENTER INC</td>
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<td>(4) CHINATOWN HEALTH CLINIC FOUNDATION INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) CHINESE ALLIANCE CHURCH OF WESTCHESTER</td>
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<td>(6) CHINESE AMERICAN INTERNATIONAL SCHOOL</td>
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<td>(7) CHINESE AMERICAN SERVICE LEAGUE INC</td>
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<td>115 S MARANGO AVE ALHAMBRA, CA 91801</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>CHINESE CHRISTIAN HERALD CRUSADES INC</td>
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<tr>
<td>PO BOX 75075 FETALUNA, CA 94975</td>
<td>38-1842281</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CHINUCH LABANOS INC</td>
<td>26-0580184</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - **Yes**
   - **No**

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments.

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.**

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CHIGGDA VALLEY CHURCH</td>
<td>1805 GOFF AVENUE PO BOX 4 ALTOONA, WI 54720</td>
<td>20-4863299</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. CHISHOLM TRAIL COMMUNITIES FOUNDATION</td>
<td>116 W 8TH ST FL 2 GEORGETOWN, TX 78626</td>
<td>74-2786718</td>
<td>501 (C) 3</td>
<td>41,891</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3. CHIZUK AMUNO CONGREGATION</td>
<td>8100 STEVENSON RD PIKESVILLE, MD 21208</td>
<td>52-0591562</td>
<td>501 (C) 3</td>
<td>8,537</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. CHOATE ROSEMARY HALL FOUNDATION INCORPORATE</td>
<td>333 CHRISTIAN ST WALLINGFORD, CT 6492</td>
<td>06-0910420</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. CHOC FOUNDATION</td>
<td>1201 W LA VETA AVE ORANGE, CA 92868</td>
<td>95-6097416</td>
<td>501 (C) 3</td>
<td>26,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. CHOFETZ CHAIM HERITAGE FOUNDATION</td>
<td>361 SPOOK ROCK RD SUFFERN, NY 10901</td>
<td>11-2642599</td>
<td>501 (C) 3</td>
<td>7,480</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. CHOICES PREGNANCY SERVICES</td>
<td>626 5TH AVE CORAOPOLIS, PA 15108</td>
<td>25-1528068</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. CHOLANGIOCARCINOMA FOUNDATION</td>
<td>5526 W 13400 S STE 510 HERRIMAN, UT 84096</td>
<td>20-5776861</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9. CHOOSE LOVE INC</td>
<td>45 W 36TH ST FL 6 NEW YORK, NY 10018</td>
<td>83-1378746</td>
<td>501 (C) 3</td>
<td>32,418</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. CHOPART CORPORATION</td>
<td>379 ELM ST NW APT E ATLANTA, GA 30314</td>
<td>46-0957706</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11. CHORE SERVICE INC</td>
<td>PO BOX 522 LAKEVILLE, CT 6039</td>
<td>51-0416899</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. CHORUS OF WESTERLY</td>
<td>119 HIGH ST WESTERLY, RI 2891</td>
<td>05-6019151</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  
   - No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) CHOSEN CHILDREN MINISTRIES</td>
<td>62-1636128</td>
<td>501 (C) 3</td>
<td>32,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) CHOSEN PEOPLE MINISTRIES INC</td>
<td>13-1659171</td>
<td>501 (C) 3</td>
<td>8,640.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) CHP 11 99 FOUNDATION</td>
<td>95-6530738</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) CHRIST CENTER</td>
<td>20-2175242</td>
<td>501 (C) 3</td>
<td>22,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) CHRIST CENERAL MINISTRIES INC</td>
<td>58-2313533</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) CHRIST CENTRAL CHURCH INC</td>
<td>57-1172325</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) CHRIST CENTRAL DURHAM</td>
<td>37-1705300</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) CHRIST CHAPEL BIBLE CHURCH</td>
<td>75-1729034</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>(9) CHRIST CHILD SOCIETY OF OMaha</td>
<td>47-0376574</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) CHRIST CHURCH</td>
<td>05-0261693</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>(11) CHRIST CHURCH</td>
<td>22-1487186</td>
<td>501 (C) 3</td>
<td>31,100.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) CHRIST CHURCH</td>
<td>51-0073395</td>
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<td>11,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

3. Enter total number of other organizations listed in the line 1 table:  

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

Schedule I (Form 990) 2020
### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*Attach to Form 990.*

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#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   X Yes  
   No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CHRIST CHURCH 13460 NORTH PORT WASHINGTON ROAD MEQUON, KS</td>
<td>39-1267427</td>
<td>501 (C) 3</td>
<td>5,400</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) CHRIST CHURCH 14242 E 21ST ST N WICHITA, KS 67208</td>
<td>48-1130829</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) CHRIST CHURCH 10818 GASTON RD KATY, TX 77494</td>
<td>76-0545482</td>
<td>501 (C) 3</td>
<td>26,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) CHRIST CHURCH AT GROVE FARM 249 DUFF RD SEWICKLEY, PA 15143</td>
<td>25-1769163</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) CHRIST CHURCH BRONXVILLE 17 SAGAMORE ROAD BRONXVILLE, NY 10708</td>
<td>13-1740148</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) CHRIST CHURCH CAMBRIDGE 0 GARDEN ST CAMBRIDGE, MA 2138</td>
<td>04-2103995</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) CHRIST CHURCH CATHEDRAL 900 BROADWAY NASHVILLE, TN 37203</td>
<td>62-0505209</td>
<td>501 (C) 3</td>
<td>51,500</td>
<td>FMV</td>
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<tr>
<td>(8) CHRIST CHURCH CATHEDRAL 1117 TEXAS ST HOUSTON, TX 77002</td>
<td>74-1143078</td>
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<td>8,700</td>
<td>FMV</td>
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<tr>
<td>(9) CHRIST CHURCH EPISCOPAL 400 HOLCOMB BRIDGE RD NORCROSS, GA 30071</td>
<td>58-1720680</td>
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<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) CHRIST CHURCH EPISCOPAL - EXETER, NH TREASURER 43 PINE STREET EXETER, NH 3833</td>
<td>02-0224355</td>
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<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CHRIST CHURCH FOX CHAPEL, AN ANGLICAN FELLO 630 SQUAW RUN ROAD EAST PITTSBURGH, PA 15233</td>
<td>25-1005193</td>
<td>501 (C) 3</td>
<td>7,260</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(12) CHRIST CHURCH IU PARISH PO BOX 161 WORTON, MD 21672-0161</td>
<td>52-2184774</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHRIST CHURCH LAKE FOREST</td>
<td>100 N WAUKEGAN RD LAKE FOREST, IL 60045</td>
<td>36-3120974</td>
<td>501 (C) 3</td>
<td>19,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH MANLIUS</td>
<td>407 E SENECA ST MANLIUS, NY 13104</td>
<td>15-0622046</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH MILWAUKEE</td>
<td>1661 N FARWELL AVE MILWAUKEE, WI 53202</td>
<td>47-2776093</td>
<td>501 (C) 3</td>
<td>501,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CHRIST CHURCH OF LONGBOAT KEY INC</td>
<td>6400 GULF OF MEXICO DR LONGBOAT KEY, FL 342</td>
<td>42-1662224</td>
<td>501 (C) 3</td>
<td>12,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH OF OAK BROOK</td>
<td>501 OAK BROOK RD OAK BROOK, IL 60523</td>
<td>36-6166915</td>
<td>501 (C) 3</td>
<td>82,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH PARISH OF GEORGETOWN</td>
<td>3116 O ST NW WASHINGTON, DC 20007</td>
<td>53-0204680</td>
<td>501 (C) 3</td>
<td>9,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH POMPTON</td>
<td>RAMEO AND PASSAIC AVE POMPTON LAKES, NJ 74</td>
<td>22-1933580</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH PRESERVATION TRUST</td>
<td>20 N AMERICAN ST PHILADELPHIA, PA 19106</td>
<td>20-0252106</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH UNITED METHODIST</td>
<td>4614 BROWNSBORO RD LOUISVILLE, KY 40207</td>
<td>61-0449611</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CHURCH WEST CHESTER</td>
<td>ATTN: DONNA KRAUS 200 S CHURCH ST WEST CHES</td>
<td>20-8981382</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST CITY CHURCH</td>
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<td>82-1851835</td>
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<td>24,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CHRIST COMMUNITY CHURCH</td>
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<td>23-2337522</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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   Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ...........................................

Enter total number of other organizations listed in the line 1 table: ...........................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................... Yes No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Department of the Treasury
Internal Revenue Service

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I General Information on Grants and Assistance

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Schedule I (Form 990) 2020
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.

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---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
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<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>CHRIST THE KING PRESBYTERIAN CHURCH 1930 VIRGINIA AVE JOPLIN, MO 64804</td>
<td>80-0667396</td>
<td>501 (C) 3</td>
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<tr>
<td>(2)</td>
<td>CHRIST THE KING PRESBYTERIAN CHURCH OF EL PASO 5823 N MESA ST PMB 370 EL PASO, TX 79912</td>
<td>74-2934460</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>(3)</td>
<td>CHRIST THE LIFE EVANGELICAL LUTHERAN CHURCH 3031 SUMMIT AVE MAUKESHA, WI 53188</td>
<td>39-1708341</td>
<td>501 (C) 3</td>
<td>7,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>CHRIST THE REDEEMER ANGLICAN CHURCH</td>
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<td>(5)</td>
<td>CHRIST THE REDEEMER CATHOLIC CHURCH 11507 HUFFMEISTER RD HOUSTON, TX 77065</td>
<td>74-2124847</td>
<td>501 (C) 3</td>
<td>21,000.</td>
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<td>(6)</td>
<td>CHRIST THE REDEEMER LUTHERAN CHURCH 2550 E 71ST ST TULSA, OK 74136</td>
<td>73-0732707</td>
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<td>9,800.</td>
<td>FMV</td>
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<td>(7)</td>
<td>CHRIST THE SERVANT LUTHERAN CHURCH 2400 MILCREST DR HOUSTON, TX 77042</td>
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<td>(8)</td>
<td>CHRIST THE SERVANT LUTHERAN CHURCH 506 VIA APPIA WAY LOUISVILLE, WA 98229</td>
<td>84-0955587</td>
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<td>6,520.</td>
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<td>(9)</td>
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<td>(10)</td>
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<td>(11)</td>
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<td>(12)</td>
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<td>75-1442795</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(b) EIN</th>
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<td>3300 AUSTIN PKWY SUGAR LAND, OH 44805</td>
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<td>(4) CHRISTADELPHIAN ECCLESIA A ST BOSTON</td>
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<td>48 FREEMAN ST STOUGHTON, MA 2072</td>
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<td>(5) CHRISSTAR INTERNATIONAL INC</td>
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<td>1500 INTERNATIONAL PKWY STE 300 RICHARDSON,</td>
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<td>(6) CHRISTEE OYSTER SLOOP PRESERVATION CORP</td>
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<td>(7) CHRISTENDOM EDUCATIONAL CORPORATION</td>
<td>54-1031437</td>
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<td>134 CHRISTENDOM DR FRONT ROYAL, VA 22630</td>
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<td>(8) CHRISTIAN &amp; MISSIONARY ALLIANCE</td>
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<td>139 PRINROSE RD BURLINGTON, WA 94010</td>
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<tr>
<td>540 N 6TH ST EAST SAINT LOUIS, IL 62201</td>
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<td>(12) CHRISTIAN AID MISSION</td>
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<td>1201 5TH ST SW CHARLOTTESVLE, VA 22902</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>(1)</td>
<td>CHRISTIAN ALLIANCE FOR ORPHANS</td>
<td>6723 WHITIER AVE STE 202 MC LEAN, VA 22101</td>
<td>26-1492375</td>
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<td>(2)</td>
<td>CHRISTIAN AND MISSIONARY ALLIANCE CHURCH CL</td>
<td>925 OAKWOOD DR CLARION, PA 16214</td>
<td>22-7122535</td>
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<td>(3)</td>
<td>CHRISTIAN APPALACHIAN PROJECT INC</td>
<td>485 FONDEROSA DR PAINSTVILLE, KY 41240</td>
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<td>(4)</td>
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<td>1705 MESSINA DR SAN JOSE, CA 95132</td>
<td>81-4518379</td>
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<td>25,000.</td>
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<td>(5)</td>
<td>CHRISTIAN BROADCASTING NETWORK INC</td>
<td>977 CENTERVILLE TPK VIRGINIA BEACH, VA 234</td>
<td>54-0678752</td>
<td>501 (C) 3</td>
<td>111,800.</td>
<td>FMV</td>
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<td>(6)</td>
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<td>21-0723006</td>
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<td>6245 RANDALL RD SYRACUSE, NJ 7738</td>
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<td>34,100.</td>
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<td>36-2671613</td>
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<td>FMV</td>
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<td>(9)</td>
<td>CHRISTIAN BROTHERS HIGH SCHOOL OF SACRAMENTO</td>
<td>4315 MARTIN LUTHER KING JR BLVD SACRAMENTO,</td>
<td>68-0322360</td>
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<td>7650 S COUNTY LINE RD STE A BURR RIDGES, IL</td>
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<td>CHRISTIAN CAMPS &amp; CONFERENCES</td>
<td>34 CAMP BROOKWOODS RD ALTON, NY 3809</td>
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<td>26,600.</td>
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<td>(12)</td>
<td>CHRISTIAN CENTER OF PARK CITY</td>
<td>PO BOX 683480 PARK CITY, UT 84068</td>
<td>87-0643778</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
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</tr>
</tbody>
</table>

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## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>(1) CHRISTIAN CHALLENGE AZ</td>
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<td>FMV</td>
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<td>(2) CHRISTIAN CHILDREN'S HOME OF OHIO</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(3) CHRISTIAN CHURCH OF LOS GATOS</td>
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<td>PO BOX 27924 HOUSTON, TX 77227</td>
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<td>84,750.</td>
<td>FMV</td>
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<td>1803 E WILLOW GROVE AVE GLENSIDE, PA 19038</td>
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<td>5,500.</td>
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<td>W11621 MAIN ST HAUBINWAY, MI 49762</td>
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<tr>
<td>PO BOX 515 FRONT ROYAL, VA 22630</td>
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<td>(10) CHRISTIAN FRIENDS OF KOREA INC</td>
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<tr>
<td>PO BOX 936 BLACK MOUNTAIN, NC 28711</td>
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<td>(12) CHRISTIAN HEALING MINISTRIES INC</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.............................................

3. Enter total number of other organizations listed in the line 1 table.............................................

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

Schedule I (Form 990) 2020

JSA 0E1288 1,000

18674H 1467 V 20-7.21
**SCHEDULE I**

**(Form 990)**

---

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1. CHRISTIAN HEALTH CARE CENTER FOUNDATION INC</td>
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<td>2. CHRISTIAN HEALTH SERVICE CORPS</td>
<td>27-1505747</td>
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<td>3. CHRISTIAN HERALD ASSN INC</td>
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<td>4. CHRISTIAN HERITAGE ACADEMY</td>
<td>73-0937873</td>
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<td>5. CHRISTIAN HERITAGE CHURCH - GRANITEVILLE, S</td>
<td>32-0550314</td>
<td>501 (C) 3</td>
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<td>6. CHRISTIAN HERITAGE SCHOOL INC</td>
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<td>7. CHRISTIAN LIFE CENTER OF THE ASSEMBLIES OF</td>
<td>23-2617944</td>
<td>501 (C) 3</td>
<td>26,107.</td>
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<td>8. CHRISTIAN LIFE MINISTRIES</td>
<td>36-3184207</td>
<td>501 (C) 3</td>
<td>10,500.</td>
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<td>9. CHRISTIAN MEDICAL &amp; DENTAL ASSOCIATION</td>
<td>75-2527674</td>
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<td>7,500.</td>
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<td>10. CHRISTIAN MEDICAL &amp; DENTAL SOCIETY</td>
<td>36-2284267</td>
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<td>11. CHRISTIAN MISSION AID INC</td>
<td>47-0710130</td>
<td>501 (C) 3</td>
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<td>12. CHRISTIAN MISSIONARY FELLOWSHIP</td>
<td>36-2406657</td>
<td>501 (C) 3</td>
<td>24,700.</td>
<td>FMV</td>
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</tbody>
</table>

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   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>CHRISTIAN MISSIONS IN MANY LANDS</td>
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<td>2</td>
<td>CHRISTIAN OUTREACH PROGRAM INC</td>
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<td>4</td>
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<td>54-1594578</td>
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<td>5</td>
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<td>26-3637293</td>
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</table>

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Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? __Yes__ □ __No__

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<tr>
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<td>CHRISTOPHER REEV FOUNDATION A NEW JERSEY N</td>
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<td>CHISTS EVANGELICAL LUTHERAN CHURCH</td>
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<tr>
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<td>CHISTS HOME</td>
<td>23-1624905</td>
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<td>20,000.</td>
<td>FMV</td>
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<tr>
<td>800 YORK RD WARMINGTON, PA 18974</td>
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<td></td>
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Schedule I (Form 990) 2020

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OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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JSA 0E1288 1,000

18674H 1467 V 20-7.21
**SCHEDULE I**
*(Form 990)*

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) <strong>CHRISTS KING CONGREGATION</strong> 2604 N SWAN BLVD MILWAUKEE, WI 53226 39-0806444 501 (C) 3 13,600. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(2) <strong>CHRONICLE SEASON OF SHARING FUND</strong> 901 MISSION ST SAN FRANCISCO, CA 94103 94-3019992 501 (C) 3 226,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) <strong>CHRYSALIS SHELTER FOR VICTIMS OF DOMESTIC V</strong> 2055 W NORTHERN AVE PHOENIX, AZ 85021 86-0447620 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) <strong>CHURCH &amp; DWIGHT EMPLOYEE GIVING FUND INC</strong> 500 CHARLES EWING BLVD TRENTON, NJ 8628 13-4294066 501 (C) 3 11,602. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(5) <strong>CHURCH AND SCHOOL OF SAINT MARY</strong> 1347 E 49TH PL TULSA, OK 74105 73-0631499 501 (C) 3 6,450. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) <strong>CHURCH AT NORTHSIDE</strong> 75 FLOYD PARK RD NE ROME, GA 30165 65-0632462 501 (C) 3 9,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(7) <strong>CHURCH AT THE FALLS - THE FALLS CHURCH</strong> 6565 ARLINGTON BLVD STE 300 FALLS CHURCH, VA 47-1006296 501 (C) 3 99,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) <strong>CHURCH AT THE RED DOOR</strong> 54090 AVENIDA VILLA LA QUINTA, CA 92253 81-1868939 501 (C) 3 15,200. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(9) <strong>CHURCH COMMUNITY OUTREACH SERVICES INC</strong> PO BOX 1175 KENNEBUNK, ME 04043 01-0521364 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) <strong>CHURCH COMMUNITY SERVICES INC</strong> 907 OAKLAND AVE ELKHART, IN 46516 35-1155054 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) <strong>CHURCH FARM SCHOOL</strong> 1001 E LINCOLN HWY EXTON, PA 19341 23-1370498 501 (C) 3 20,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) <strong>CHURCH HILL ACTIVITIES AND TUTORING</strong> 3015 S W ENTERICH, VA 23223 20-0220263 501 (C) 3 105,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ______________________________________________________

3. Enter total number of other organizations listed in the line 1 table: ______________________________________________________

---

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

Schedule I (Form 990) 2020

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JSA

OE 1288 1.000

18674H 1467 V 20-7.21
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

#### Part II

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | CHURCH HILL PRESBYTERIAN CHURCH  
517 N 25TH ST RICHMOND, VA 23223 | 84-2655741 | 501 (C) 3 | 394,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | CHURCH IN CUPERTINO  
10051 PASADENA AVE CUPERTINO, CA 95014 | 51-0416896 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | CHURCH OF CHRIST  
PO BOX 1860 SOMERSET, NJ 08879 | 22-3004960 | 501 (C) 3 | 33,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | CHURCH OF CHRIST  
10421 NE 140TH ST KIRKLAND, WA 98034 | 91-1181627 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | CHURCH OF CHRIST CONGREGATIONAL  
5 OLD MIDDLE STREET GOSHEN, CT 6756 | 06-0775497 | 501 (C) 3 | 12,800. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | CHURCH OF CHRIST ELGIN  
654 CONDON AVENUE ELGIN, IL 60120 | 36-3354281 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | CHURCH OF EPIPHANY  
209 S 3RD AVE ROYERSFORD, PA 19468 | 23-2282218 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | CHURCH OF GOD MINISTRIES INC  
PO BOX 2420 ANDERSON, IN 46018 | 35-2049256 | 501 (C) 3 | 20,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | CHURCH OF GOOD SHEPHERD  
164 NEWTOWN RD ACTON, MA 1720 | 04-2256480 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | CHURCH OF LIVING GRACE OF NEW JERSEY INC  
800 JEFFERSON RD PARSIPPANY, NJ 7054 | 32-0025907 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | CHURCH OF OUR LADY OF THE ASSUMPTION CORP  
545 STRATFIELD RD FAIRFIELD, CT 6825 | 06-0653047 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | CHURCH OF OUR LADY OF THE ROSARY  
3710 AUGUSTA RD GREENVILLE, SC 29605 | 57-0342510 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CHURCH OF OUR SAVIOR ANGLICAN INC</td>
<td>20-2744535</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2. CHURCH OF OUR SAVIOUR</td>
<td>04-6065013</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3. CHURCH OF OUR SAVIOUR</td>
<td>58-0801493</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4. CHURCH OF SAINT CHARLES BORROMEO</td>
<td>22-2424685</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5. CHURCH OF SAINT MARY</td>
<td>23-1371958</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. CHURCH OF SAINT PATRICK</td>
<td>65-0083735</td>
<td>501 (C) 3</td>
<td>11,250</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. CHURCH OF SCIENTOLOGY FLAG SERVICE ORGANIZA</td>
<td>59-2143308</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. CHURCH OF SCIENTOLOGY FLAG SHIP SERVICE ORG</td>
<td>98-0133545</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. CHURCH OF SCIENTOLOGY OF BOSTON INC</td>
<td>04-2463926</td>
<td>501 (C) 3</td>
<td>65,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. CHURCH OF SCIENTOLOGY RELIGIOUS TRUST</td>
<td>91-6254980</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. CHURCH OF SCIENTOLOGY WESTERN UNITED STATES</td>
<td>95-2697641</td>
<td>501 (C) 3</td>
<td>28,150</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12. CHURCH OF ST ANDREW</td>
<td>23-1421928</td>
<td>501 (C) 3</td>
<td>7,350</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

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   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) <strong>CHURCH OF ST FRANCIS OF ASSISI</strong></td>
<td>861 N SOCORA ST WICHITA, KS 67212</td>
<td>48-0688361</td>
<td>501 (C) 3</td>
<td>13,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) <strong>CHURCH OF ST FRANCIS XAVIER</strong></td>
<td>55 W 15TH ST NEW YORK, NY 10011</td>
<td>13-6104557</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) <strong>CHURCH OF ST IGNATIUS LOYOLA</strong></td>
<td>980 PARK AVE NEW YORK, NY 10028</td>
<td>13-1623956</td>
<td>501 (C) 3</td>
<td>57,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) <strong>CHURCH OF ST JAMES</strong></td>
<td>184 S FINLEY AVE BASKING RIDGE, NJ 7920</td>
<td>22-1622436</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) <strong>CHURCH OF ST JEROME</strong></td>
<td>230 ALEXANDER AVE BRONX, NY 10454</td>
<td>13-1740204</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) <strong>CHURCH OF ST JOSEPH</strong></td>
<td>6600 HIGHLAND DR VANCOUVER, WA 98661</td>
<td>91-0602266</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) <strong>CHURCH OF ST JUDE</strong></td>
<td>3606 LUPBERRY AVE WANTAGH, NY 11793</td>
<td>11-2018102</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) <strong>CHURCH OF ST MARTIN IN THE COURTYARD</strong></td>
<td>8000 SAINT MARTINS LN PHILADELPHIA, PA 1911</td>
<td>23-1352390</td>
<td>501 (C) 3</td>
<td>12,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) <strong>CHURCH OF ST MICHAEL &amp; ST GEORGE</strong></td>
<td>6345 WYDOWN BLVD SAINT LOUIS, MO 63105</td>
<td>43-0653283</td>
<td>501 (C) 3</td>
<td>16,821.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) <strong>CHURCH OF ST THOMAS MORE</strong></td>
<td>3525 SW PATTON RD PORTLAND, OR 97221</td>
<td>93-0395569</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) <strong>CHURCH OF ST. AUGUSTINE</strong></td>
<td>381 N HIGHLAND AVE OSSINING, NY 10562</td>
<td>13-1740330</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) <strong>CHURCH OF ST. MARY</strong></td>
<td>175 E ILLINOIS RD LAKE FOREST, IL 60045</td>
<td>36-2171084</td>
<td>501 (C) 3</td>
<td>12,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

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<tbody>
<tr>
<td>(1) CHURCH OF ST. PATRICK - EDINA, MN</td>
<td>6820 ST. PATRICKS LANE EDINA, MN 55439</td>
<td>41-0856353 (501 C 3)</td>
<td>7,029.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) CHURCH OF ST. PAUL THE APOSTLE</td>
<td>405 WEST 59TH STREET NEW YORK, NY 10019</td>
<td>13-2689015 (501 C 3)</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) CHURCH OF ST. THOMAS BECKET</td>
<td>4455 S ROBERT TRL SAINT PAUL, MN 55123</td>
<td>41-1653444 (501 C 3)</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) CHURCH OF ST. THOMAS MORE</td>
<td>65 E 89TH ST NEW YORK, NY 10128</td>
<td>13-1623960 (501 C 3)</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) CHURCH OF ST. THOMAS THE APOSTLE</td>
<td>2914 WEST 44TH STREET MINNEAPOLIS, MN 55410</td>
<td>41-0798359 (501 C 3)</td>
<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) CHURCH OF ST. TIMOTHY</td>
<td>707 89TH AVE NE MINNEAPOLIS, MN 55434</td>
<td>41-0764081 (501 C 3)</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) CHURCH OF ST. VINCENT FERRER - NEW YORK, NY</td>
<td>869 LEXINGTON AVENUE NEW YORK, NY 10021</td>
<td>13-1653580 (501 C 3)</td>
<td>7,000.</td>
<td>FMV</td>
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<td>(8) CHURCH OF THE ASCENSION</td>
<td>9510 WEST 127TH STREET OVERLAND PARK, KS 66</td>
<td>48-1105279 (501 C 3)</td>
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<td>(9) CHURCH OF THE ASCENSION - MONTGOMERY, AL</td>
<td>315 CLANTON AVENUE MONTGOMERY, AL 36104</td>
<td>63-0363465 (501 C 3)</td>
<td>19,000.</td>
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<td>97 HIGHWOOD AVENUE TENAFLY, NJ 7670</td>
<td>22-1692672 (501 C 3)</td>
<td>9,100.</td>
<td>FMV</td>
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<td>(11) CHURCH OF THE BRETHREN</td>
<td>2220 N MAIN AVE SIDNEY, OH 45365</td>
<td>36-2167026 (501 C 3)</td>
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<td>267 E BEAU ST WASHINGTON, PA 15301</td>
<td>25-1093374 (501 C 3)</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>(1) CHURCH OF THE CROSS</td>
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<tr>
<td>PO BOX 278 BLUFFTON, SC 29910</td>
<td>(2) CHURCH OF THE CROSS</td>
<td>201 9TH AVE N HOPKINS, MN 55343</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 117213 BOSTON, MA 2117</td>
<td>(4) CHURCH OF THE FOOTHILLS OF THE CHRISTIAN AN</td>
<td>3939 CAMBRIDGE RD STE 230 CAMERON PARK, CA</td>
<td>10,000.</td>
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<td>(6) CHURCH OF THE GOOD SHEPHERD</td>
<td>212 W LANCASTER AVE PAOLI, PA 19301</td>
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<td>FMV</td>
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<td>211 FRANKLIN ROAD LOOKOUT MOUNTAIN, TN 3735</td>
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<td>(10) CHURCH OF THE GOOD SHEPHERD, UMC - VIENNA,</td>
<td>805 SE ELLSWORTH RD VANCOUVER, WA 98664</td>
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<td>(11) CHURCH OF THE HIGHLANDS INC</td>
<td>2351 HUNTER MILL ROAD VIENNA, VA 22181</td>
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<tr>
<td>(12) CHURCH OF THE HOLY APOTLES</td>
<td>3660 GRANDVIEW PKWY STE 100 BIRMINGHAM, AL</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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

Schedule I (Form 990) 2020
# SCHEDULE I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>1055 ROUTE 6 MAHOPAC, TN 38117</td>
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<tr>
<td>4645 WALNUT GROVE ROAD MEMPHIS, NY 10541</td>
<td>62-0548924</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
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<td>PO BOX 805 MEDFORD, NJ 8055</td>
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<td>311 E PALACE AVE SANTA FE, NM 87501</td>
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<td>CHURCH OF THE HOLY FAMILY</td>
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<td>1279 N GREAT NECK RD VIRGINIA BEACH, VA 234</td>
<td>54-1048701</td>
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<td>FMV</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>CHURCH OF THE HOLY REDEEMER/AFC HEART OF JE</td>
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<td>302 S 10TH ST OLIVIA, MN 56277</td>
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<td>FMV</td>
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<td>190 GRAYLYNN DR NASHVILLE, TN 37214</td>
<td>62-6010891</td>
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<tr>
<td>3906 MCKINNEY AVE DALLAS, TX 75204</td>
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<td>58,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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OMB No. 1545-0047

Part I
General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>1(h) Purpose of grant or assistance</th>
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<td>(1) CHURCH OF THE LUTHERAN BRETHREN</td>
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<tr>
<td>230 PENNSWOOD RD BRYN MAWR, PA 19010</td>
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<tr>
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<tr>
<td>(9) CHURCH OF THE REDEEMER -UNITED CHURCH OF CH</td>
<td>34-1017283</td>
<td>501 (C) 3</td>
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<tr>
<td>23500 CENTER RIDGE RD WESTLAKE, OH 44145</td>
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<tr>
<td>11525 GREENSPRING AVE LUTHERVILLE TIMONIUM,</td>
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<td>(11) CHURCH OF THE RESURRECTION INC</td>
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<td>4300 ASBURY RD DUBUQUE, IA 52002</td>
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<td></td>
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3. Enter total number of other organizations listed in the line 1 table. ..................................................
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(1) CHURCH OF THE RESURRECTION UNITED METHODIST</td>
<td>13720 ROE BLVD OVERLAND PARK, KS 66224</td>
<td>48-1107898</td>
<td>501 (C) 3</td>
<td>43,825.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>(2) CHURCH OF THE RISEN SAVIOR</td>
<td>1501 COUNTY ROAD 42 E BURNSVILLE, MN 55306</td>
<td>41-0965188</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>(3) CHURCH OF THE SACRED HEART</td>
<td>1739 FERRY AVE CAMDEN, NJ 8104</td>
<td>21-0634512</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>(4) CHURCH OF THE SAVIOUR</td>
<td>651 N WAYNE AVE WAYNE, PA 19087</td>
<td>23-1862788</td>
<td>501 (C) 3</td>
<td>69,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>(5) CHURCH OF THE SAVIOUR UNITED METHODIST</td>
<td>8005 PFEIFFER RD MONTGOMERY, OH 45242</td>
<td>31-0948163</td>
<td>501 (C) 3</td>
<td>6,502.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>(6) CHURCH OF THE SAVIOUR UNITED METHODIST CHUR</td>
<td>2537 LEE RD CLEVELAND HEIGHTS, OH 44118</td>
<td>34-0715815</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>(7) CHURCH OF THE SHEPHERD</td>
<td>1601 WOODSTONE DRIVE ST CHARLES, MO 63304</td>
<td>43-1263006</td>
<td>501 (C) 3</td>
<td>7,440.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>(8) CHURCH OF WEST HARTFORD UNIVERSALIST</td>
<td>433 FERN ST WEST HARTFORD, CT 6107</td>
<td>06-0709883</td>
<td>501 (C) 3</td>
<td>15,300.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>(9) CHURCH PLANTERS INTERNATIONAL</td>
<td>13427 POND SPRINGS RD AUSTIN, TX 78729</td>
<td>73-1408817</td>
<td>501 (C) 3</td>
<td>17,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>(10) CHURCH STREET SCHOOL FOR MUSIC AND ART</td>
<td>41 WHITE STREET NEW YORK, NY 10013</td>
<td>13-3693660</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>(11) CHURCH WORLD SERVICE INC</td>
<td>PO BOX 968 ELKHART, IN 46515</td>
<td>13-4080201</td>
<td>501 (C) 3</td>
<td>13,669.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>(12) CHURCHES UNITED FOR THE HOMELESS</td>
<td>1901 1ST AVE N MOOHEA, MN 55650</td>
<td>41-1594892</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Part II**

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<tbody>
<tr>
<td>1 CHURCHES UNITED IN MINISTRY</td>
<td>102 W 2ND ST DULUTH, MN 55802</td>
<td>41-1227969</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2 CIA OFFICERS MEMORIAL FOUNDATION</td>
<td>2251 CORPORATE PARK DR FL 3 HERNDON, VA 201</td>
<td>52-236046</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3 CIBOLO CONSERVANCY</td>
<td>PO BOX 138 BOERNE, TX 78006</td>
<td>74-2896016</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4 CIBOLO CREEK COMMUNITY CHURCH OF FAIR OAKS</td>
<td>30395 RALPH FAIR RD BOERNE, TX 78015</td>
<td>74-2781755</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5 CIBOLO PRESERVE</td>
<td>PO BOX 99 BOERNE, TX 78006</td>
<td>26-2138664</td>
<td>501 (C) 3</td>
<td>900,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 CINCINNATI BALLET COMPANY INC</td>
<td>1555 CENTRAL PKW CINCINNATI, OH 45214</td>
<td>31-6050354</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7 CINCINNATI INSTITUTE OF FINE ARTS</td>
<td>20 EAST CENTRAL PKW STE 200 CINCINNATI, OH</td>
<td>31-0537138</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 CINCINNATI OBSERVATORY CENTER</td>
<td>3489 OBSERVATORY PL CINCINNATI, OH 45208</td>
<td>31-1665954</td>
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<td>15,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9 CINCINNATI PARKS FOUNDATION</td>
<td>421 OAK ST CINCINNATI, OH 45219</td>
<td>31-1439016</td>
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<td>60,500</td>
<td>FMV</td>
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<td>10 CINCINNATI PUBLIC RADIO INC</td>
<td>1223 CENTRAL PKW CINCINNATI, OH 45214</td>
<td>31-1410636</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 CINCINNATI SYMPHONY ORCHESTRA</td>
<td>1241 ELM ST CINCINNATI, OH 45202</td>
<td>31-0537080</td>
<td>501 (C) 3</td>
<td>22,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 CIRCLE CAMPS FOR GRIEVING CHILDREN</td>
<td>3223 EMBRY CIR ATLANTA, GA 30341</td>
<td>30-0098053</td>
<td>501 (C) 3</td>
<td>40,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1</td>
<td>CIRCLE OF CONCERN</td>
<td>23-7085010</td>
<td>501 (C) 3</td>
<td>13,050.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>CIRCLE OF FRIENDS FOR THE DYING INC</td>
<td>80-0876549</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CIRCLE OF LIFE</td>
<td>31-1690041</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CIRCLE OF LIFE CONNECTIONS</td>
<td>68-0496344</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>CIRCLE OF LOVE FOUNDATION INC</td>
<td>36-4064032</td>
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<td>11,819.</td>
<td>FMV</td>
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<td>CISE</td>
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<td>8</td>
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<td>57-6020493</td>
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<td>9</td>
<td>CITIZEN ACTION OF WISCONSIN EDUCATION FUND</td>
<td>39-1520619</td>
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<td>10</td>
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<td>23-2117795</td>
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<td>11</td>
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<td>04-3259160</td>
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<td>12</td>
<td>CITIZENS AGAINST GOVERNMENT WASTE</td>
<td>52-1363952</td>
<td>501 (C) 3</td>
<td>64,787.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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</thead>
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<tr>
<td>1. CITIZENS AGAINST HOMICIDE</td>
<td>68-0330408</td>
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<td>2. CITIZENS ASSOCIATION OF GEORGETOWN</td>
<td>52-1359105</td>
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<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>3. CITIZENS BUDGET COMMISSION INC</td>
<td>13-0576141</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. CITIZENS CLIMATE EDUCATION CORP</td>
<td>26-2948811</td>
<td>501 (C) 3</td>
<td>2,205,918</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. CITIZENS COMMITTEE FOR CHILDREN OF NEW YORK</td>
<td>13-5618593</td>
<td>501 (C) 3</td>
<td>38,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. CITIZENS COMMITTEE TO SAVE OUR CANYONS</td>
<td>74-2443535</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7. CITIZENS COUNCIL FOR HEALTH FREEDOM</td>
<td>41-1916724</td>
<td>501 (C) 3</td>
<td>28,030</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. CITIZENS FOR COMMUNITY VALUES</td>
<td>31-1075684</td>
<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. CITIZENS FOR CONSERVATION INC</td>
<td>23-7106675</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. CITIZENS FOR LOS ANGELES WILDLIFE INC</td>
<td>46-3104169</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. CITIZENS FOR PENNSYLVANIA'S FUTURE</td>
<td>31-1607866</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. CITIZENS FOR RESPONSIBILITY AND ETHICS IN W</td>
<td>03-0445391</td>
<td>501 (C) 3</td>
<td>145,075</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CITTANS FOR SELF-GOVERNANCE</td>
<td>5850 SAN FELIPE ST STE 575A HOUSTON, TX 770</td>
<td>27-1657203</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) CITTANS UNITED FOR RESEARCH IN EPILEPSY</td>
<td>420 N WABASH AVE STE 650 CHICAGO, IL 60611</td>
<td>36-4253176</td>
<td>501 (C) 3</td>
<td>129,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) CITTANS</td>
<td>67 HUDSON STREET BOX TH1 NEW YORK, NY 10013</td>
<td>22-3609679</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) CITY ACADEMY INC</td>
<td>4175 N KINGSHIGHWAY BLVD SAINT LOUIS, MO 63</td>
<td>31-1619379</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) CITY AND COUNTRY SCHOOL INC</td>
<td>146 W 13TH ST NEW YORK, NY 10011</td>
<td>13-5562983</td>
<td>501 (C) 3</td>
<td>292,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) CITY CENTER TRANSITIONAL LIVING INC</td>
<td>837 E THOMPSON BLVD VENTURA, CA 93001</td>
<td>46-5674375</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) CITY CHURCH PHILLY</td>
<td>PO BOX 449 PHILADELPHIA, PA 19105</td>
<td>33-1133939</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) CITY COLLEGE FUND</td>
<td>160 CONVENT AVE # 0166 NEW YORK, NY 10031</td>
<td>13-1760998</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) CITY CRITICS INC</td>
<td>PO BOX 1345 NEW YORK, NY 10013</td>
<td>11-3194564</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) CITY GATE INC</td>
<td>17 N 7TH AVE COATESVILLE, PA 19320</td>
<td>23-2179593</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) CITY GOSPEL MISSION</td>
<td>1805 DALTON AVE CINCINNATI, OH 45214</td>
<td>31-0538515</td>
<td>501 (C) 3</td>
<td>50,450.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) CITY HARVEST INC</td>
<td>6 EAST 32ND STREET 5TH FLOOR NEW YORK, NY 1</td>
<td>13-3170676</td>
<td>501 (C) 3</td>
<td>2,196,640.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

**Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

**Enter total number of other organizations listed in the line 1 table.**

---

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

Schedule I (Form 990) 2020
# Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

# Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>CITY KIDS TO WILDERNESS PROJECT INC</td>
<td>2437 15TH ST NW FL 4 WASHINGTON, DC 20009</td>
<td>52-1976304</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>CITY LIFE CHURCH</td>
<td>216 EAST 2ND STREET NORTH WICHITA, KS 67202</td>
<td>45-2430157</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3)</td>
<td>CITY LIFE CHURCH</td>
<td>56 E 1ST ST NEW YORK, NY 10003</td>
<td>11-2740189</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>CITY MISSION</td>
<td>5310 CARNEGIE AVE CLEVELAND, OH 44103</td>
<td>34-0760586</td>
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<td>32,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>CITY MISSION OF SCHENECTADY</td>
<td>425 HAMILTON ST SCHENECTADY, NY 12305</td>
<td>14-1403652</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>CITY OF DARLINGTON, WI</td>
<td>PO BOX 207 DARLINGTON, WI 53530</td>
<td>39-6005426</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>CITY OF GREENVILLE, NC</td>
<td>P.O. BOX 7207 GREENVILLE, SC 29835</td>
<td>56-6000229</td>
<td>501 (C) 3</td>
<td>550,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>CITY OF HOPE</td>
<td>1500 DUARTE RD DUARTE, CA 91010</td>
<td>85-3435919</td>
<td>501 (C) 3</td>
<td>102,200.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>CITY OF HOPE</td>
<td>1500 DUARTE RD DUARTE, CA 91010</td>
<td>94-2921191</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>CITY OF LAKES WALDORF SCHOOL</td>
<td>2344 NICOLLET AVE SOUTH MINNEAPOLIS, MN 554</td>
<td>41-16491156</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>CITY OF NILES</td>
<td>333 N. 2ND STREET SUITE 201 NILES, IL 60062</td>
<td>38-6004720</td>
<td>501 (C) 3</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>CITY OF PERU IL</td>
<td>1901 4TH STREET PERU, IL 61354</td>
<td>36-6006045</td>
<td>501 (C) 3</td>
<td>169,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CITY OF PHILADELPHIA ATTN: PETER CURRAN - OFFICE OF HOMELESS SER</td>
<td>23-6003047</td>
<td>501 (C) 3</td>
<td>322,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CITY OF REFUGE INC</td>
<td>1300 JOSEPH E BOONE BLVD NW ATLANTA, GA 303</td>
<td>58-2194642</td>
<td>501 (C) 3</td>
<td>266,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CITY OF SMILE - USA</td>
<td>101 N ARTSAKH AVE GLENDALE, CA 91206</td>
<td>83-3226265</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CITY ON A HILL CHURCH FOREST HILLS</td>
<td>133 WALNUT ST BROOKLINE, MA 2445</td>
<td>85-2323173</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CITY PARKS FOUNDATION INC</td>
<td></td>
<td>830 5TH AVE NEW YORK, NY 10065</td>
<td>13-3561657</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>CITY RESCUE MISSION</td>
<td>PO BOX 96 NEW CASTLE, FL 32254</td>
<td></td>
<td>25-1007944</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>7</td>
<td>CITY RESCUE MISSION</td>
<td>426 MCDUFF AVE S JACKSONVILLE, PA 16103</td>
<td>59-1009115</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CITY SCHOOL DISTRICT OF NEW ROCHELLE</td>
<td>515 NORTH AVENUE NEW ROCHELLE, NY 10801</td>
<td>13-6007142</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CITY SQUASH INC</td>
<td>PO BOX 619 BRONX, NY 10458</td>
<td></td>
<td>42-1535583</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>CITY UNION MISSION INC</td>
<td>1100 E 11TH ST KANSAS CITY, MO 64106</td>
<td></td>
<td>44-6005481</td>
<td>501 (C) 3</td>
<td>36,900.</td>
<td>FMV</td>
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<tr>
<td>11</td>
<td>CITY WIDE CLUB OF CLUBS</td>
<td>PO BOX 8446 HOUSTON, TX 77288</td>
<td></td>
<td>76-0316820</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>CITY YEAR INC</td>
<td>287 COLUMBUS AVE BOSTON, MA 2116</td>
<td></td>
<td>22-2882549</td>
<td>501 (C) 3</td>
<td>372,100.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ......................................................... Yes  ☒ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITYLIFE PRESBYTERIAN CHURCH OF BOSTON 6 LIBERTY SQ 334 BOSTON, MA 2109</td>
<td>04-3568505</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CITYMEALS-ON-WHEELS 355 LEXINGTON AVE FL 3 NEW YORK, NY 10017</td>
<td>13-3634381</td>
<td>501 (C) 3</td>
<td>454,578.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CITYSIDE JOURNALISM INITIATIVE 2120 UNIVERSITY AVE BERKELEY, CA 94704</td>
<td>84-3448887</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CITYSQUARE 1610 S MALCOLM X BLVD DALLAS, TX 75226</td>
<td>75-2332948</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CITYTEAM MINISTRIES 2306 ZANKER RD SAN JOSE, CA 95131</td>
<td>94-1501265</td>
<td>501 (C) 3</td>
<td>139,896.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CIVIC CONSULTING ALLIANCE 21 S CLARK ST STE 4301 CHICAGO, IL 60603</td>
<td>45-0467524</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CIVIC NATION 1156 15TH ST NW STE 1000 WASHINGTON, DC 20009</td>
<td>47-3576918</td>
<td>501 (C) 3</td>
<td>500,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CIVIL EATS 502 E COTATI AVE UNIT 7014 COTATI, CA 94931</td>
<td>84-4826419</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CIVIL RIGHTS CORPS 910 17TH ST NW STE 200 WASHINGTON, DC 20006</td>
<td>81-3422012</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CJF MINISTRIES 611 BROADWAY ST SAN ANTONIO, TX 78215</td>
<td>74-1273128</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>CLACKAMAS COMMUNITY COLLEGE FOUNDATION 19600 MOLALLA AVE OREGON CITY, OR 97045</td>
<td>93-0579576</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CLACKAMAS SERVICE CENTER INC PO BOX 2620 CLACKAMAS, OR 97015</td>
<td>93-0626175</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ____________________________

Enter total number of other organizations listed in the line 1 table ____________________________
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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</tr>
</thead>
<tbody>
<tr>
<td>1 (a)</td>
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</tr>
<tr>
<td>(1) CLAFLIN UNIVERSITY</td>
<td>400 MAGNOLIA ST ORANGEBURG, SC 29115</td>
</tr>
<tr>
<td>(2) CLAL-THE NATIONAL JEWISH CENTER FOR LEARNIN</td>
<td>440 PARK AVE S NEW YORK, NY 10016</td>
</tr>
<tr>
<td>(3) CLARE Booth Luce Center For Conservative W</td>
<td>112 ELDEN ST STE P HERNDON, VA 20170</td>
</tr>
<tr>
<td>(4) CLAREMOND GRADUATE UNIVERSITY</td>
<td>150 E 10TH ST CLAREMONT, CA 91711</td>
</tr>
<tr>
<td>(5) CLAREMOND INST FOR THE STUDY OF STATESMASH</td>
<td>1317 W Foothill Blvd Ste 120 Upland, CA 917</td>
</tr>
<tr>
<td>(6) CLAREMOND MCKENNA COLLEGE</td>
<td>888 COLUMBIA AVE CLAREMONT, CA 91711</td>
</tr>
<tr>
<td>(7) CLARIDEN SCHOOL</td>
<td>100 CLARIDEN RANCH RD SOUTHLAKE, TX 76092</td>
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<tr>
<td>(8) CLARINA HOWARD NICHOLS CENTER INC</td>
<td>PO BOX 517 MORRISVILLE, VT 5661</td>
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<td>(9) CLARI PROJECT INC</td>
<td>2435 N CENTRAL EXPY STE 1280 RICHARDSON, TX</td>
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<td>(10) CLARIS HEALTH</td>
<td>11500 W OLYMPIC BLVD STE 570 LOS ANGELES, CA</td>
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<td>(11) CLARITY SEMINAR INC</td>
<td>17 TENNYSON PL PASSAIC, NJ 7055</td>
</tr>
<tr>
<td>(12) CLARK COUNTY ASSOCIATION FOR HANDICAPPED CI</td>
<td>PO BOX 643 WINCHESTER, KY 40392</td>
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</table>

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................................................
- Enter total number of other organizations listed in the line 1 table. .................................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. CLARK COUNTY FOOD BANK</td>
<td>91-1307564</td>
<td>501 (C) 3</td>
<td>89,200.</td>
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<td>2. CLARK FORK COALITION</td>
<td>36-3428665</td>
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<td>3. CLARK UNIVERSITY</td>
<td>04-2111203</td>
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<td>60,250.</td>
<td>FMV</td>
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<td>4. CLARKSON UNIVERSITY</td>
<td>15-0543659</td>
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<td>5. CLASSICAL 98 1</td>
<td>27-3067797</td>
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<td>6. CLASSICAL TAHOE</td>
<td>45-2682958</td>
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<td>7. CLASSROOM, INC.</td>
<td>13-3666846</td>
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<td>8. CLAY CENTER FOR THE ARTS &amp; SCIENCES OF WEST</td>
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<tr>
<td>10. CLAYTON SCHOOL DISTRICT PARENT- TEACHERS OR</td>
<td>43-1747553</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11. CLAYTON SOCCER ASSOCIATION</td>
<td>03-3557015</td>
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<td>12. CLEAN AIR TASK FORCE INC</td>
<td>04-3512550</td>
<td>501 (C) 3</td>
<td>1,935,900.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CLEAN ENERGY TRUST 20 N WACKER DR STE 734 CHICAGO, IL 60606</td>
<td>27-2378677</td>
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<td>2</td>
<td>CLEAN FUTURE FORUM INC 1101 PENNSYLVANIA AVE NW STE 300 WASHINGTON</td>
<td>84-3845806</td>
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<td>2,000,000.</td>
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<td>3</td>
<td>CLEAN LAKES ALLIANCE INC 150 E GILMAN ST STE 2600 MADISON, WI 53703</td>
<td>27-3917243</td>
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<td>22,500.</td>
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<td>4</td>
<td>CLEAN WATER FUND 1444 I ST NW STE 400 WASHINGTON, DC 20005</td>
<td>52-1043444</td>
<td>501 (C) 3</td>
<td>7,600.</td>
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<td>5</td>
<td>CLEAR LAKE BIBLE CHURCH PO BOX 278 FREMONT, IN 46737</td>
<td>81-0647858</td>
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<td>CLEARBROOK 1835 W CENTRAL RD ARLINGTON HEIGHTS, IL 600</td>
<td>36-2420176</td>
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<td>CLEARWATER COMMUNITY CHURCH INC 2897 BELCHER RD DUNEDIN, FL 34698</td>
<td>59-1311051</td>
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<td>CLEARWAY SCHOOL INC 61 CHESTNUT ST WEST NEWTON, MA 2465</td>
<td>04-2576523</td>
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<td>CLEMSON UNIVERSITY FOUNDATION PO BOX 1889 CLEMSON, SC 29633</td>
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<td>CLEON JONES LAST OUT COMMUNITY FOUNDATION 751 EDWARDS ST MOBILE, AL 36610</td>
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### Part I: General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) CLERMONT VOLUNTEER FIRE DEPT INC</td>
<td>42-1516985</td>
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<td>PO BOX 134 CLERMONT, IA 52135</td>
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<td>(2) CLEVELAND CLINIC FOUNDATION</td>
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<td>1422 EUCLID AVE CLEVELAND, OH 44115</td>
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<td>(4) CLEVELAND INSTITUTE OF ART</td>
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<td>(5) CLEVELAND INSTITUTE OF MUSIC</td>
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## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CLEVELAND STATE UNIVERSITY FOUNDATION</td>
<td>34-1316665</td>
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<td>CLEVELAND ZOOLOGICAL SOCIETY</td>
<td>34-0816490</td>
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<td>CLIFFS RESIDENTS OUTREACH INC</td>
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<td>9</td>
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<td>84-1889176</td>
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<tr>
<td>12</td>
<td>CLIMATE FOUNDATION</td>
<td>26-2077719</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>CLIMATE JUSTICE ALLIANCE</td>
<td>85-3440899</td>
<td>501 (c) 3</td>
<td>2,000,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>CLINIC FOR THE REHABILITATION OF WILDLIFE I</td>
<td>23-7271040</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>CLINIC CAN HELP INC</td>
<td>20-2379895</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>CLL SOCIETY INC</td>
<td>46-4131354</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>CLOTHES TO KIDS INC</td>
<td>14-1849798</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>CLOTHES TO KIDS OF DENVER</td>
<td>26-2148733</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>CLOUD WALK WORLDWIDE INC</td>
<td>20-1498565</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8.</td>
<td>CLOVER AREA ASSISTANCE CENTER INC</td>
<td>57-0785168</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9.</td>
<td>CLOVER TRINITY LUTHERAN CHURCH</td>
<td>82-0227743</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>CLOVIS MUNICIPAL SCHOOLS FOUNDATION INC</td>
<td>71-1018751</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
<tr>
<td>11.</td>
<td>CLUB ESTEEM INC</td>
<td>59-3317831</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>CLUBBED THUMB INC</td>
<td>13-3947679</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................................................... ☑ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>CMC FOUNDATION OF CENTRAL TEXAS</td>
<td>20-0468031</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>CMY RESEARCH FOUNDATION INC</td>
<td>82-5476655</td>
<td>501 (C) 3</td>
<td>286,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COA USA</td>
<td>33-0738913</td>
<td>501 (C) 3</td>
<td>9,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COACHART ORG</td>
<td>94-3389547</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COACHELLA VALLEY RESCUE MISSION</td>
<td>95-2684844</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COACHING CORPS</td>
<td>94-3310845</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION AGAINST TRAFFICKING IN WOMEN</td>
<td>22-3032134</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION FOR CHRISTIAN OUTREACH</td>
<td>25-1216330</td>
<td>501 (C) 3</td>
<td>13,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION FOR HUMAN IMMIGRANT RIGHTS</td>
<td>95-4421521</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION FOR RAINFOREST NATIONS SECRETARIA</td>
<td>26-3221530</td>
<td>501 (C) 3</td>
<td>101,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION FOR THE HOMELESS INC</td>
<td>13-3072967</td>
<td>501 (C) 3</td>
<td>155,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>COALITION ON HOMELESSNESS</td>
<td>94-3113898</td>
<td>501 (C) 3</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  \[ \Box \text{Yes} \]  \[ \Box \text{No} \]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>COALITION ON TEMPORARY SHELTER</td>
<td>26 PETERBRO STREET DETROIT, MI 48201</td>
<td>38-2420565</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>COAST GUARD FOUNDATION INC</td>
<td>394 TAUNTON RD STONINGTON, CT 6378</td>
<td>04-2899862</td>
<td>501 (C) 3</td>
<td>84,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>COASTAL CHRISTIAN SCHOOL</td>
<td>1005 OAK PARK BLVD PISMO BEACH, CA 93449</td>
<td>77-0105246</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>COASTAL COMMUNITY CHURCH</td>
<td>101 VILLAGE AVE YORKTOWN, VA 23693</td>
<td>75-2987699</td>
<td>501 (C) 3</td>
<td>52,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>COASTAL COMMUNITY FOUNDATION OF SOUTH CAROL</td>
<td>1691 TURNBULL AVE NORTH CHARLESTON, SC 2940</td>
<td>23-7390313</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>COASTAL KIDS PRESCHOOL</td>
<td>12 JACKIES TRL DAMARISCOTTA, ME 4543</td>
<td>22-3126832</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>COASTAL MOUNTAINS LAND TRUST</td>
<td>101 MOUNT BATTIE ST CAMDEN, ME 4843</td>
<td>22-2795691</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>COASTAL POLICE CHAPLAINCY</td>
<td>2500 CITY HALL LN NORTH CHARLESTON, SC 2940</td>
<td>57-0989842</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>COASTAL RIVERS CONSERVATION TRUST</td>
<td>PO BOX 333 DAMARISCOTTA, ME 4543</td>
<td>23-7303162</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>COASTER THEATER PRODUCTIONS</td>
<td>PO BOX 643 CANNON BEACH, OR 97110</td>
<td>93-1327535</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>COASTLINE COMMUNITY CHURCH</td>
<td>2215 CALLE BARCELONA CARLSBAD, CA 92009</td>
<td>33-0676031</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>COATESVILLE AREA SENIOR HIGH SCHOOL</td>
<td>1425 EAST LINCOLN HIGHWAY COATESVILLE, PA 1</td>
<td>23-6050690</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1. COBB CREEK RESTORATION AND COMMUNITY FUND 300 CONSHOHOCKEN STATE RD CONSHOHOCKEN, PA 82-1942476 501 (C) 3 260,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>2. COBURN PLACE SAFEHAVEN II INC 604 E 38TH ST INDIANAPOLIS, IN 46205 37-1421922 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>3. COBY FAMILY SERVICES 1417 OREGON RD LEOLA, PA 17540 23-2128881 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>4. COCON HOUSE 3530 COBY AVE EVERETT, WA 98201 91-1497667 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>5. CODE FOR AMERICA LABS 972 MISSION ST FL 5 SAN FRANCISCO, CA 94103 27-1067272 501 (C) 3 32,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>6. CODE ORG 1501 4TH AVE STK 900 SEATTLE, WA 98101 46-0858543 501 (C) 3 16,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>7. CODEYS FRIENDS INC 4702 N FLOWING WELLS RD TUCSON, AZ 85705 47-4052727 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>8. COKER UNITED METHODIST CHURCH 231 E NORTH LOOP RD SAN ANTONIO, TX 78216 74-1367519 501 (C) 3 9,600. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>(1) COLEGIO AMERICANO LUTERANO</td>
<td>256 DALTON AVE MUNDELEIN, IL 60060</td>
</tr>
<tr>
<td>(2) COLEL CHABAD</td>
<td>806 EASTERN PKWY BROOKLYN, NY 11213</td>
</tr>
<tr>
<td>(3) COLGATE UNIVERSITY TREASURERS OFFICE</td>
<td>13 OAK DR HAMILTON, NY 13346</td>
</tr>
<tr>
<td>(4) COLIBRI CENTER FOR HUMAN RIGHTS</td>
<td>3849 E BROADWAY BLVD # 206 TUCSON, AZ 85716</td>
</tr>
<tr>
<td>(5) COLLABORATIVE TO END HUMAN TRAFFICKING</td>
<td>24600 CENTER RIDGE RD STE 225 WESTLAKE, OH</td>
</tr>
<tr>
<td>(6) COLLABRIA CARE</td>
<td>414 S JEFFERSON ST NAPA, CA 94559</td>
</tr>
<tr>
<td>(7) COLLATERAL REPAIR PROJECT</td>
<td>PO BOX 23146 BROOKLYN, NY 11202</td>
</tr>
<tr>
<td>(8) COLLECTIVE CHURCH</td>
<td>PO BOX 213 CULVER CITY, CA 90232</td>
</tr>
<tr>
<td>(9) COLLECTIVE EDUCATION FUND</td>
<td>PO BOX 15320 WASHINGTON, DC 20003</td>
</tr>
<tr>
<td>(10) COLLECTIVE IMPACT</td>
<td>PO BOX 154853 SAN FRANCISCO, CA 94115</td>
</tr>
<tr>
<td>(11) COLLEGE AND CAREER MINISTRIES</td>
<td>PO BOX 2471 ORANGE, CA 92859</td>
</tr>
<tr>
<td>(12) COLLEGE AVENUE BAPTIST CHURCH OF SAN DIEGO</td>
<td>4747 COLLEGE AVE SAN DIEGO, CA 92115</td>
</tr>
</tbody>
</table>

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## Part I General Information on Grants and Assistance

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## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>(1)</td>
<td>COLLEGE BOUND OPPORTUNITIES</td>
<td>20-4811544</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(2)</td>
<td>COLLEGE CHURCH IN WHEATON</td>
<td>36-2203929</td>
<td>501 (C) 3</td>
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<td>(3)</td>
<td>COLLEGE CHURCH INC</td>
<td>04-2499484</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>COLLEGE DRIVE SEVENTH-DAY ADVENTIST SCHOOL</td>
<td>06-1730254</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>(5)</td>
<td>COLLEGE FOR EVERY STUDENT INC</td>
<td>22-3159630</td>
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<td>(6)</td>
<td>COLLEGE FOR SOCIAL INNOVATION INC</td>
<td>47-4425987</td>
<td>501 (C) 3</td>
<td>110,000.</td>
<td></td>
<td>FMV</td>
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<td>(7)</td>
<td>COLLEGE FOUNDATION OF THE UNIVERSITY OF VIR</td>
<td>54-2009312</td>
<td>501 (C) 3</td>
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<tr>
<td>(8)</td>
<td>COLLEGE LIGHT OPERA COMPANY INC</td>
<td>04-2505806</td>
<td>501 (C) 3</td>
<td>7,500.</td>
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<td>(9)</td>
<td>COLLEGE NOW GREATER CLEVELAND INC</td>
<td>34-6580096</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>COLLEGE OF ADAPTIVE ARTS</td>
<td>1401 PARKMOOR AVE STE 260 SAN JOSE, CA 9512</td>
<td>27-0342896</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>FMV</td>
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<td>(11)</td>
<td>COLLEGE OF CHARLESTON FOUNDATION</td>
<td>66 GEORGE ST CHARLESTON, SC 29424</td>
<td>23-7069236</td>
<td>501 (C) 3</td>
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<td>(12)</td>
<td>COLLEGE OF DUPAGE FOUNDATION</td>
<td>425 FAYELL BLVD GLEN ELLYN, IL 60137</td>
<td>23-7011835</td>
<td>501 (C) 3</td>
<td>7,200.</td>
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<td>FMV</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. COLLEGE OF PHYSICIANS OF PHILADELPHIA</td>
<td>23-1352670</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2. COLLEGE OF ST BENEDICT BUSINESS OFF</td>
<td>41-0969244</td>
<td>501 (C) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. COLLEGE OF ST FRANCIS XAVIER</td>
<td>13-5562201</td>
<td>501 (C) 3</td>
<td>33,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. COLLEGE OF THE ATLANTIC</td>
<td>23-7032625</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. COLLEGE OF THE OZARKS</td>
<td>44-0556862</td>
<td>501 (C) 3</td>
<td>511,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. COLLEGE OF WILLIAM AND MARY</td>
<td>54-6001718</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. COLLEGE OF WOOSTER</td>
<td>34-0714654</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8. COLLEGE PARK CHURCH INC</td>
<td>31-1139835</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. COLLEGE POSSIBLE</td>
<td>41-1968798</td>
<td>501 (C) 3</td>
<td>75,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. COLLEGE PREPARATORY SCHOOL</td>
<td>94-1492272</td>
<td>501 (C) 3</td>
<td>126,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11. COLLEGE STATION CHINESE CHURCH</td>
<td>74-2535076</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. COLLEGE SUCCESS FOUNDATION</td>
<td>91-2036088</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>(1) COLLEGE UNBOUND</td>
<td>46-2470807</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>(2) COLLEGESPRING INC</td>
<td>27-0920698</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) COLLEGIATE SCHOOL</td>
<td>54-0528203</td>
<td>501 (C) 3</td>
<td>60,500.</td>
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<td>N/A</td>
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<td>(4) COLLEGIATE SCHOOL INC</td>
<td>13-1634966</td>
<td>501 (C) 3</td>
<td>179,000.</td>
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<tr>
<td>(5) COLLIER COUNTY AUDUBON SOCIETY INC</td>
<td>23-7030698</td>
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<td>(6) COLLINS HOME AND FAMILY MINISTRIES</td>
<td>57-0689153</td>
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<td>(7) COLON CANCER COALITION FOUNDATION</td>
<td>30-0377727</td>
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<tr>
<td>(8) COLONIAL BAPTIST CHURCH OF CARY WAKE COUNTY</td>
<td>56-1536585</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(9) COLONIAL CHURCH OF EDINA</td>
<td>41-0795263</td>
<td>501 (C) 3</td>
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<td>(10) COLONIAL THEATRE GROUP INC</td>
<td>02-0466087</td>
<td>501 (C) 3</td>
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<td>(11) COLONIAL WILLIAMSBURG FOUNDATION</td>
<td>54-0505888</td>
<td>501 (C) 3</td>
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<td>(12) COLONY FOUNDATION</td>
<td>06-0261454</td>
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<td>5,750.</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>COLOR COUNTRY ANIMAL WELFARE</td>
<td>26-39550889</td>
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<td>2</td>
<td>COLORADO 4-H FOUNDATION INC</td>
<td>27-0007766</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>COLORADO ACADEMY</td>
<td>84-0421874</td>
<td>501 (C) 3</td>
<td>11,000</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>COLORADO ANIMAL WELFARE LEAGUE</td>
<td>27-1192636</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>COLORADO COALITION FOR THE HOMELESS</td>
<td>84-0951575</td>
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<td>FMV</td>
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<td>6</td>
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<td>7</td>
<td>COLORADO FALLEN HERO FOUNDATION</td>
<td>82-2417033</td>
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<td>FMV</td>
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<tr>
<td>8</td>
<td>COLORADO FOURTEENERS INITIATIVE</td>
<td>84-1354844</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>COLORADO FRATERNAL ORDER OF POLICE SAFETY A</td>
<td>84-1415731</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>COLORADO HEALING FUND</td>
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<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>COLORADO HORSE RESCUE</td>
<td>84-1095741</td>
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<td>16,000</td>
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<tr>
<td>12</td>
<td>COLORADO JEWISH RECONSTRUCTIONIST FEDERATION</td>
<td>84-3789574</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table: ................................................................. ▶
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - **Yes**
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) COLORADO MAHLERFEST  
PO BOX 1314 BOULDER, CO 80306  
74-2551709  
501 (C) 3  
22,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (2) COLORADO MISSION OF MERCY INC  
7615 WINNING OAKS DR COLORADO SPRINGS, CO 80915  
27-1586585  
501 (C) 3  
25,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (3) COLORADO MOUNTAIN COLLEGE FOUNDATION INC  
802 GRAND AVE GLENWOOD SPRINGS, CO 81601  
74-2393418  
501 (C) 3  
17,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (4) COLORADO MUSIC FESTIVAL  
900 BASELINE RD BOULDER, CO 80302  
84-0735716  
501 (C) 3  
16,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (5) COLORADO NONPROFIT DEVELOPMENT CENTER  
789 N SHERMAN ST STE 250 DENVER, CO 80203  
84-1493585  
501 (C) 3  
12,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (6) COLORADO OPEN LANDS  
1546 COLE BLVD LAKWOOD, CO 80401  
84-0866211  
501 (C) 3  
18,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (7) COLORADO PLATEAU FOUNDATION  
113 E BIRCH AVE FLAGSTAFF, AZ 86001  
83-0959411  
501 (C) 3  
150,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (8) COLORADO PUBLIC TELEVISION INC  
2900 WELTON ST FL 1 DENVER, CO 80205  
84-0723918  
501 (C) 3  
6,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (9) COLORADO RISING FOR COMMUNITIES  
PO BOX 18872 BOULDER, CO 80308  
83-3125198  
501 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (10) COLORADO SCHOOL OF MINES FOUNDATION  
1812 ILLINOIS ST GOLDEN, CO 80401  
84-0509064  
501 (C) 3  
236,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (11) COLORADO STATE UNIVERSITY FOUNDATION  
PO BOX 1870 FORT COLLINS, CO 80522  
23-7098397  
501 (C) 3  
80,592.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (12) COLORADO SYMPHONY ASSOCIATION  
1000 14TH ST UNIT 15 DENVER, CO 80202  
84-0511458  
501 (C) 3  
29,400.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

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   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>COLORADO VILLAGE COLLABORATIVE</td>
<td>82-0741818</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>2</td>
<td>COLORADO VINCENTIAN VOLUNTEERS</td>
<td>86-1286894</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>COLORECTAL CANCER ALLIANCE INC</td>
<td>86-0947831</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>COLOROFCHANGEORG EDUCATION FUND INC</td>
<td>45-5569879</td>
<td>501 (C) 3</td>
<td>115,515.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>COLUMBIA COLLEGE CHICAGO</td>
<td>36-6112087</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>COLUMBIA COMMUNITY LAND TRUST</td>
<td>81-4950704</td>
<td>501 (C) 3</td>
<td>102,962.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>COLUMBIA GRAMMAR &amp; PREPARATORY SCHOOL</td>
<td>13-0559070</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8</td>
<td>COLUMBIA GREENE HUMANE SOCIETY INC</td>
<td>14-1487056</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>COLUMBIA LAND CONSERVANCY INC</td>
<td>22-2757332</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10</td>
<td>COLUMBIA LAND TRUST</td>
<td>94-3140861</td>
<td>501 (C) 3</td>
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<tr>
<td>11</td>
<td>COLUMBIA PRESBYTERIAN CHURCH</td>
<td>52-1139105</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>COLUMBIA RIVER MARITIME MUSEUM INC</td>
<td>93-0509906</td>
<td>501 (C) 3</td>
<td>251,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) COLUMBIA RIVERKEEPER 407 PORTWAY AVE # 301 HOOD RIVER, OR 97031</td>
<td>91-1583492</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td></td>
<td></td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK 615 WEST 131 STREET 3RD FLOOR NEW YORK, NY</td>
<td>13-5598093</td>
<td>501 (C) 3</td>
<td>2,658,116.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) COLUMBINE COMMUNITY FOUNDATION FOR GRAND CO PO BOX 1342 WINTER PARK, CO 80482</td>
<td>84-1374928</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td></td>
<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) COLUMBUS CHINESE ASSOCIATION 2009 KEYSTONE PL COLUMBUS, IN 47203</td>
<td>35-2077535</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td></td>
<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) COLUMBUS CHINESE CHRISTIAN CHURCH 4141 MAIZE RD COLUMBUS, OH 43224</td>
<td>31-0901235</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) COLUMBUS FOUNDATION 1234 E BROAD ST COLUMBUS, OH 43205</td>
<td>31-6044264</td>
<td>501 (C) 3</td>
<td>1,115,000.</td>
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<td></td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) COLUMBUS METROPOLITAN LIBRARY FOUNDATION 96 S GRANT AVE COLUMBUS, OH 43215</td>
<td>31-1692755</td>
<td>501 (C) 3</td>
<td>15,250.</td>
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<td></td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) COLUMBUS REGIONAL HOSPITAL FOUNDATION INC 2400 17TH ST COLUMBUS, IN 47201</td>
<td>35-6023714</td>
<td>501 (C) 3</td>
<td>81,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) COLUMBUS REGIONAL SHELTER FOR VICTIMS OF DO PO BOX 103 COLUMBUS, IN 47202</td>
<td>31-0993447</td>
<td>501 (C) 3</td>
<td>61,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) COLUMBUS SCHOOL FOR GIRLS 65 S DREXEL AVE COLUMBUS, OH 43209</td>
<td>31-4379452</td>
<td>501 (C) 3</td>
<td>13,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) COMBAT HATE FOUNDATION 2146 ARROWHEAD RD MOUNDRIEDE, KS 67107</td>
<td>84-2208774</td>
<td>501 (C) 3</td>
<td>130,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) COMBINED JEWISH PHILANTHROPIES OF GREATER B 126 HIGH STREET BOSTON, MA 2110</td>
<td>04-2103559</td>
<td>501 (C) 3</td>
<td>315,500.</td>
<td></td>
<td></td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<td>✔ Yes ☐ No</td>
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<tr>
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<tr>
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<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
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<tbody>
<tr>
<td>1. (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>COMBONI MISSIONARIES OF THE HEART OF JESUS</td>
<td>31-0642835</td>
</tr>
<tr>
<td>PO BOX 28266 CHATTANOOGA, TN 37424</td>
<td>27-3194321</td>
</tr>
<tr>
<td>COME OVER AND HELP</td>
<td>38-3415486</td>
</tr>
<tr>
<td>COMEA INC</td>
<td>74-2269474</td>
</tr>
<tr>
<td>COMING CLEAN INC</td>
<td>28 VERNON ST STE 434 BRATTLEBORO, VT 5301</td>
</tr>
<tr>
<td>COMING HOME NETWORK INTERNATIONAL</td>
<td>5925 FRAZEYSBURG RD NASHPORT, OH 43830</td>
</tr>
<tr>
<td>COMMEMORATIVE AIR FORCE</td>
<td>5661 MARINER DR DALLAS, TX 75237</td>
</tr>
<tr>
<td>COMMENTARY INC</td>
<td>561 SEVENTH AVENUE 16TH FLOOR NEW YORK, NY</td>
</tr>
<tr>
<td>COMMISSION MINISTERS NETWORK</td>
<td>PO BOX 291002 KERRVILLE, TX 78029</td>
</tr>
<tr>
<td>COMMISSION TO EVERY NATION INC</td>
<td>PO BOX 291307 KERRVILLE, TX 78029</td>
</tr>
<tr>
<td>COMMISSIONED BELIEVERS DEAF MINISTRY INC</td>
<td>3766 WALKER RD WALKER, IA 52352</td>
</tr>
<tr>
<td>COMMITTEE FOR A CONSTRUCTIVE TOMORROW</td>
<td>1717 PENNSYLVANIA AVE NW STE 1 WASHINGTON,</td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tbody>
<tr>
<td>COMMITTEE FOR ACCURACY IN MIDDLE EAST REPORT</td>
<td>52-1332702</td>
<td>501 (C) 3</td>
<td>148,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE FOR EXCELLENCE IN EDUCATION</td>
<td>56-1333026</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE OF 100 INC</td>
<td>13-3627542</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE ON CAPITAL MARKETS REGULATION INC</td>
<td>30-0406260</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE ON TEMPORARY SHELTER</td>
<td>03-0285606</td>
<td>501 (C) 3</td>
<td>14,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE ON THE SHELTERLESS</td>
<td>68-0176855</td>
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<td>FMV</td>
<td>N/A</td>
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<td>COMMITTEE TO PROTECT JOURNALISTS INC</td>
<td>13-3081500</td>
<td>501 (C) 3</td>
<td>40,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE TO REDUCE INFECTION DEATHS INC</td>
<td>5-20479678</td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMITTEE TO UNLEASH PROSPERITY INC</td>
<td>47-3514328</td>
<td>501 (C) 3</td>
<td>700,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMON CAUSE EDUCATION FUND</td>
<td>31-1705370</td>
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<td>244,700</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMON COUNSEL FOUNDATION</td>
<td>1624 FRANKLIN ST STE 1022 OAKLAND, CA 94612</td>
<td>501 (C) 3</td>
<td>202,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMON GOOD SOUP KITCHEN COMMUNITY</td>
<td>2422 SOUTHWEST HARBOR, ME 4679</td>
<td>501 (C) 3</td>
<td>13,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</table>

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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</thead>
<tbody>
<tr>
<td>1.</td>
<td>COMMON GROUND CHRISTIAN CHURCH INC</td>
<td>4550 N ILLINOIS ST INDIANAPOLIS, IN 46208</td>
<td>35-2180839</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2.</td>
<td>COMMON HOPE INC</td>
<td>1400 ENERGY PARK DR STE 23 SAINT PAUL, MN 5</td>
<td>41-1560297</td>
<td>501 (C) 3</td>
<td>36,480.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>COMMON JUSTICE</td>
<td>540 ATLANTIC AVE STE 4 BROOKLYN, NY 11217</td>
<td>82-0993366</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>COMMON MARKET PHILADELPHIA INC</td>
<td>428 E ERIE AVE PHILADELPHIA, PA 19134</td>
<td>74-3240184</td>
<td>501 (C) 3</td>
<td>151,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>COMMON PANTRY</td>
<td>3744 N DAMEN AVE CHICAGO, IL 60618</td>
<td>23-7136034</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>COMMON SENSE MEDIA</td>
<td>699 8TH ST STE C150 SAN FRANCISCO, CA 94103</td>
<td>41-2024986</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>COMMON STREET SPIRITUAL CENTER</td>
<td>13 COMMON ST NATICK, MA 1760</td>
<td>06-2135773</td>
<td>501 (C) 3</td>
<td>56,231.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>COMMONBOND COMMUNITIES</td>
<td>1080 MONTREAL AVE STE PAUL, MN 55116</td>
<td>41-1260469</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>COMMONWEAL</td>
<td>PO BOX 316 BOLINAS, CA 94924</td>
<td>94-2366094</td>
<td>501 (C) 3</td>
<td>61,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>COMMONWEALTH CLUB OF CALIFORNIA</td>
<td>110 THE EMBARCADERO SAN FRANCISCO, CA 94105</td>
<td>94-0339260</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11.</td>
<td>COMMONWEALTH FOUNDATION FOR PUBLIC POLICY A</td>
<td>225 STATE ST STE 302 HARRISBURG, PA 17101</td>
<td>23-2473845</td>
<td>501 (C) 3</td>
<td>3,313,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>COMMONWEALTH FOUNDATION INC</td>
<td>1442A WALNUT ST STE 42 BERKELEY, CA 94709</td>
<td>22-2543558</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990) 2020**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<table>
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</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
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<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>(1) COMMONWEALTH FUND FOR KET INC</td>
<td>560 COOPER DR LEXINGTON, KY 40502</td>
</tr>
<tr>
<td>(2) COMMONWEALTH SHAKESPEARE COMPANY INC</td>
<td>101 ARCH ST FL 8 BOSTON, MA 2110</td>
</tr>
<tr>
<td>(3) COMMUNITARIAN NETWORK</td>
<td>2700 VIRGINIA AVE NW # 1002 WASHINGTON, DC</td>
</tr>
<tr>
<td>(4) COMMUNITIES FIRST INC</td>
<td>415 W COURT ST FLINT, MI 48503</td>
</tr>
<tr>
<td>(5) COMMUNITIES FOR RESTORATIVE JUSTICE</td>
<td>PO BOX 65 CONCORD, MA 1742</td>
</tr>
<tr>
<td>(6) COMMUNITIES FOUNDATION OF TEXAS</td>
<td>5500 CARUTH HAVEN LN DALLAS, TX 75225</td>
</tr>
<tr>
<td>(7) COMMUNITIES IN SCHOOLS INC</td>
<td>2345 CRYSTAL DR STE 700 ARLINGTON, VA 22202</td>
</tr>
<tr>
<td>(8) COMMUNITIES IN SCHOOLS OF CAPE FEAR INC</td>
<td>PO BOX 398 WILMINGTON, NC 28402</td>
</tr>
<tr>
<td>(9) COMMUNITIES IN SCHOOLS OF CENTRAL TEXAS</td>
<td>3000 E IH 35 STR 200 AUSTIN, TX 78704</td>
</tr>
<tr>
<td>(10) COMMUNITIES IN SCHOOLS OF CROSBY COUNTY</td>
<td>PO BOX 903 SILER CITY, NC 27344</td>
</tr>
<tr>
<td>(11) COMMUNITIES IN SCHOOLS OF CHICAGO</td>
<td>815 W VAN BUREN ST CHICAGO, IL 60607</td>
</tr>
<tr>
<td>(12) COMMUNITIES IN SCHOOLS OF JACKSONVILLE</td>
<td>6261 DUPONT STATION CT E JACKSONVILLE, FL 3</td>
</tr>
</tbody>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>COMMUNITIES IN SCHOOLS OF LOS ANGELES INC</td>
<td>26-0404220</td>
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<tr>
<td>COMMUNITIES OF COASTAL GEORGIA FOUNDATION</td>
<td>20-2454729</td>
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<td>COMMUNITIES RISING INDIA INC</td>
<td>26-4445693</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>COMMUNITIES THAT CARE OF GREATER DOWNINGTON</td>
<td>82-1339531</td>
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<td>FMV</td>
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<td>COMMUNITY ACCESS INC</td>
<td>23-7399839</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>COMMUNITY ACTION CENTER OF NORTHFIELD INC</td>
<td>41-0970984</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
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<tr>
<td>COMMUNITY ACTION COUNCIL OF HOWARD COUNTY M</td>
<td>52-0823083</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>N/A</td>
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<td>COMMUNITY ACTION OF NAPA VALLEY</td>
<td>94-1610851</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to www.irs.gov/Form990 for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. [ ] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
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<tr>
<td>1</td>
<td>COMMUNITY ACTION PARTNERSHIP OF SAN LUIS OB</td>
<td>95-2410253</td>
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<td>FMV</td>
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<td>2</td>
<td>COMMUNITY ACTION SOUTHOLD TOWN INC</td>
<td>11-2129868</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
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<td>28,000.</td>
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<td>N/A</td>
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<td>4</td>
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<td>75-3003372</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
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<td>6</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
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<td>FMV</td>
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<td>8</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>COMMUNITY BIBLE CHURCH OF MARIETTA</td>
<td>23-1732806</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>COMMUNITY BIBLE CHURCH OF VALLEJO SOLANO CO</td>
<td>94-2755123</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020

JSA
OE1288 1.000
18674H 1467 V 20-7.21
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes ☑
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) COMMUNITY BIBLE STUDY 790 STOUT RD COLORADO SPRINGS, CO 80921</td>
<td>51-0233462</td>
<td>501 (C) 3</td>
<td>22,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) COMMUNITY BOATING CENTER INC 1641 PADANARAM AVE NEW BEDFORD, MA 2740</td>
<td>04-3401842</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) COMMUNITY BUSINESS PARTNERSHIP INC 6564 LOISDALE CT STE 600 SPRINGFIELD, VA 22</td>
<td>54-1760384</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) COMMUNITY CANCER FUND 510 W RIVERSIDE AVE STE 500 SPOKANE, WA 992</td>
<td>46-4735260</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) COMMUNITY CANCER SERVICES INC 1205 HIGHWAY 2 STE 101B SANDPOINT, ID 83864</td>
<td>71-0899963</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) COMMUNITY CENTER OF NORTHERN WESTCHESTER INC 84 BEDFORD RD KATONAH, NY 10536</td>
<td>13-3716471</td>
<td>501 (C) 3</td>
<td>8,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) COMMUNITY CHRISTIAN CHURCH 4601 MAIN ST KANSAS CITY, MO 64112</td>
<td>44-0565389</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) COMMUNITY CHURCH OF CHAPEL HILL 106 PUREFOY RD. CHAPEL HILL, NC 27514</td>
<td>56-6011578</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) COMMUNITY CHURCH OF VERO BEACH 1901 23RD ST VERO BEACH, FL 32960</td>
<td>59-0760199</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) COMMUNITY CHURCH OF WATERFORD 65154 COUNTY ROAD 21 GOSHEN, IN 46526</td>
<td>35-1949067</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) COMMUNITY COALITION 10 WEST MAIN STREET PHOENIXVILLE, PA 19460</td>
<td>23-2818481</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) COMMUNITY COLLEGE OF AURORA FOUNDATION 16000 E CENRETECH Pkwy AURORA, CO 80011</td>
<td>84-1078004</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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# SCHEDULE I
## (Form 990)
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► Attach to Form 990.
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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>COMMUNITY COLLEGE OF PHILADELPHIA FOUNDATION</td>
<td>1700 SPRING GARDEN ST FL 7 PHILADELPHIA, PA</td>
<td>23-2612698</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY COMMUNICATIONS INC</td>
<td>11510 E COLONIAL DR ORLANDO, FL 32817</td>
<td>59-6155012</td>
<td>501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY CONGREGATIONAL UCC</td>
<td>125 E UNADILLA ST FINCHLEY, MI 48169</td>
<td>38-2487508</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COMMUNITY CONNECTION OF NORTHEAST OREGON</td>
<td>2802 ADAMS AVE LA GRANDE, OR 97850</td>
<td>93-0575647</td>
<td>501 (C) 3</td>
<td>44,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY DEVELOPMENT FOR ALL PEOPLE</td>
<td>PO BOX 2143 FORT MYERS, FL 33902</td>
<td>59-2602772</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY CRISIS SERVICES AND FOOD BANK</td>
<td>1121 GILBERT CT IOWA CITY, IA 52240</td>
<td>42-0955992</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY DAY SCHOOL</td>
<td>6424 FORWARD AVE PITTSBURGH, PA 15217</td>
<td>25-0969468</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY DEVELOPMENT FOR ALL PEOPLE</td>
<td>946 PARSONS AVE COLUMBUS, OH 43206</td>
<td>51-0476886</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY DEVELOPMENT PROJECT INC</td>
<td>123 WILLIAM ST FL 16 NEW YORK, NY 10038</td>
<td>83-1441257</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COMMUNITY EMPOWERMENT NETWORK CORPORATION</td>
<td>9039 SILICO CREEK PKWY APT 207 SILVER SPRING</td>
<td>46-3229550</td>
<td>501 (C) 3</td>
<td>36,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY EVANGELICAL FREE CHURCH</td>
<td>PO BOX 324 ELVERSON, PA 19520</td>
<td>23-2237748</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>COMMUNITY FIRST FOUNDATION</td>
<td>5855 WADSWORTH BYP STE A ARVADA, CO 80003</td>
<td>51-0157964</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

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JSA 0E1288 1.000

18674H 1467 V 20–7.21
### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**  
   - Yes [X]  
   - No [ ]

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNITY FIRST FUND</td>
<td>51 S DUKE ST STE 400 LANCASTER, PA 17602</td>
<td>23-2689714</td>
<td>501 (C) 3</td>
<td>350,000.</td>
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<td>N/A</td>
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<td>COMMUNITY FOOD BANK INC</td>
<td>3003 S COUNTRY CLUB RD TUCSON, AZ 85713</td>
<td>51-0192519</td>
<td>501 (C) 3</td>
<td>123,975.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOOD BANK OF CENTRAL ALABAMA</td>
<td>107 WALTER DAVIS DR BIRMINGHAM, AL 35209</td>
<td>63-0837956</td>
<td>501 (C) 3</td>
<td>10,240.</td>
<td>FMV</td>
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<tr>
<td>COMMUNITY FOOD BANK OF CITRUS COUNTY INC</td>
<td>5259 W CARDINAL ST HOMOSASSA, FL 34446</td>
<td>80-0459100</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOOD BANK OF EASTERN OKLAHOMA INC</td>
<td>1304 N KENOSHA AVE TULSA, OK 74106</td>
<td>73-1184980</td>
<td>501 (C) 3</td>
<td>14,000.</td>
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<td>COMMUNITY FOOD BANK OF NEW JERSEY INC</td>
<td>31 EVANS TERMINAL HILLSIDE, NJ 7205</td>
<td>22-2423882</td>
<td>501 (C) 3</td>
<td>288,244.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY FOOD BANK OF SAN BENITO COUNTY</td>
<td>1133 SAN FELIPE RD HOLLISTER, CA 95023</td>
<td>77-0306871</td>
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<td>25,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOOD CUPBOARD INC</td>
<td>PO BOX 864 MANCHESTER CENTER, VT 5255</td>
<td>07-0335781</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY FOOD PANTRY OF SLEEPY HOLLOW TARR</td>
<td>43 S BROADWAY TARRYTOWN, NY 10591</td>
<td>45-2599486</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY FOOD SHARE INC</td>
<td>650 S TAYLOR AVE LOUISVILLE, CO 80027</td>
<td>74-2277331</td>
<td>501 (C) 3</td>
<td>86,684.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY FOUNDATION FOR GREATER NEW HAVEN</td>
<td>70 AUDUBON ST NEW HAVEN, CT 6510</td>
<td>06-0632106</td>
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<td>72,000.</td>
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<tr>
<td>COMMUNITY FOUNDATION FOR MONTEREY COUNTY</td>
<td>2354 GARDEN RD MONTEREY, CA 93940</td>
<td>94-1615897</td>
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<td>12,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1.</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | COMMUNITY FOUNDATION FOR NANTUCKET  
       PO BOX 204 NANTUCKET, MA 2554 | 13-4316755 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | COMMUNITY FOUNDATION FOR NORTHEAST MICHIGAN  
       100 N RIPLEY ST STE F ALPENA, MI 49707 | 23-7384822 | 501 (C) 3 | 85,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | COMMUNITY FOUNDATION FOR OCEANA COUNTY  
       PO BOX 902 PENTWATER, MI 49449 | 83-1970895 | 501 (C) 3 | 13,299. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | COMMUNITY FOUNDATION FOR PALM BEACH & MARTI  
       700 S DIXIE HWY STE 200 WEST PALM BEACH, FL | 23-7181875 | 501 (C) 3 | 200,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | COMMUNITY FOUNDATION FOR SOUTH CENTRAL NEW  
       520 COLUMBIA DR STE 100 JOHNSON CITY, NY 13 | 16-1512085 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | COMMUNITY FOUNDATION FOR SOUTHEAST MICHIGAN  
       333 W FORT ST STE 2010 DETROIT, MI 48226 | 38-2530980 | 501 (C) 3 | 11,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | COMMUNITY FOUNDATION FOR SOUTHERN ARIZONA  
       5849 E BROADWAY BLVD STE 201 TUCSON, AZ 857 | 94-2681765 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | COMMUNITY FOUNDATION FOR THE LAND OF LINCOL  
       205 S 5TH ST STE 530 SPRINGFIELD, IL 62701 | 20-4191391 | 501 (C) 3 | 100,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | COMMUNITY FOUNDATION OF ACADIANA  
       1035 CAMELLIA BLVD STE 100 LAFAYETTE, LA 70 | 72-1493023 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | COMMUNITY FOUNDATION OF COLLIER COUNTY  
       1110 PINE RIDGE RD STE 200 NAPLES, FL 34108 | 59-2396243 | 501 (C) 3 | 30,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | COMMUNITY FOUNDATION OF EASTERN CONNECTICUT  
       PO BOX 769 NEW LONDON, CT 6320 | 06-1080097 | 501 (C) 3 | 22,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | COMMUNITY FOUNDATION OF GREATER DUBUQUE  
       700 LOCUST ST STE 195 DUBUQUE, IA 52001 | 42-1526614 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>COMMUNITY FOUNDATION OF GREATER FORT WAYNE</td>
<td>35-1119450</td>
<td>501 (C) 3</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOUNDATION OF GREATER GREENSBORO</td>
<td>56-1380249</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>COMMUNITY FOUNDATION OF GREENVILLE INC</td>
<td>57-6019318</td>
<td>501 (C) 3</td>
<td>5,100</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOUNDATION OF HERKIMER AND ONEIDA</td>
<td>15-6016932</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOUNDATION OF JACKSON HOLE</td>
<td>83-0308856</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>COMMUNITY FOUNDATION OF JOHNSON</td>
<td>42-1508117</td>
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<tr>
<td>COMMUNITY FOUNDATION OF MACHINING VALLEY</td>
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<tr>
<td>COMMUNITY FOUNDATION OF MIDDLESBURY COUNTY IN</td>
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<td>FMV</td>
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<tr>
<td>COMMUNITY FOUNDATION OF NEW JERSEY</td>
<td>22-2281783</td>
<td>501 (C) 3</td>
<td>88,450</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**Part I**

General Information on Grants and Assistance

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>COMMUNITY FOUNDATION OF NORTH CENTRAL WISCO</td>
<td>500 N 1ST ST STR 2600 WAUSAU, WI 54403</td>
<td>39-1577472</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOUNDATION OF NORTHWEST FLORIDA I</td>
<td>17 W CEDAR ST STE 2 PENSACOLA, FL 32502</td>
<td>59-3371653</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY FOUNDATION OF SOUTH ALABAMA</td>
<td>PO BOX 990 MOBILE, AL 36601</td>
<td>63-0695166</td>
<td>501 (C) 3</td>
<td>10,000</td>
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<tr>
<td>COMMUNITY FOUNDATION OF SOUTHWEST LOUISIANA</td>
<td>1625 RYAN ST STE C LAKE CHARLES, LA 70601</td>
<td>72-1508036</td>
<td>501 (C) 3</td>
<td>30,000</td>
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<td>COMMUNITY FOUNDATION OF THE GUNNISON VALLEY</td>
<td>PO BOX 7057 GUNNISON, CO 81230</td>
<td>31-1650658</td>
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<td>31,000</td>
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</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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   - [X] Yes
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>PO BOX 23019 HILTON HEAD ISLAND, SC 29925</td>
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<tr>
<td>COMMUNITY FOUNDATION OF TOMPKINS COUNTY INC</td>
<td>16-1587553</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>200 E BUFFALO ST STE 202 ITHACA, NY 14855</td>
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<td></td>
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<td></td>
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<tr>
<td>COMMUNITY FOUNDATION OF WESTERN MASSACHUSET</td>
<td>22-3089640</td>
<td>501 (C) 3</td>
<td>29,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>335 BRIDGE ST SPRINGFIELD, MA 1103</td>
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<tr>
<td>COMMUNITY FOUNDATION OF WESTERN NEVADA</td>
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<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>50 WASHINGTON ST STE 300 RENO, NV 89503</td>
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<tr>
<td>COMMUNITY FOUNDATION PARTNERSHIP INC</td>
<td>35-1889139</td>
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<td>12,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1235 BEDFORD, IN 47421</td>
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</tr>
<tr>
<td>COMMUNITY FOUNDATION SANTA CRUZ COUNTY</td>
<td>94-2808039</td>
<td>501 (C) 3</td>
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<tr>
<td>7807 SOQUEL DR APTOS, CA 95003</td>
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<tr>
<td>COMMUNITY FOUNDATION SERVING SOUTHWEST COLO</td>
<td>84-1474900</td>
<td>501 (C) 3</td>
<td>166,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>909 3RD AVE FL 22 NEW YORK, NY 10022</td>
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<td>PO BOX 508 WEST BOLFORD, MA 1885</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>COMMUNITY GRACE LUTHERAN CHURCH</td>
<td>4000 LINDEN ST SAINT PAUL, MN 55110</td>
<td>41-0782876 501 (C) 3</td>
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<tr>
<td>COMMUNITY HARVEST FOOD BANK OF NORTHEAST IN</td>
<td>999 E TILLMAN RD FORT WAYNE, IN 46816</td>
<td>31-1100607 501 (C) 3</td>
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<td>4405 DESOTO RD SARASOTA, FL 34235</td>
<td>59-1305522 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>COMMUNITY HEALTH CARE</td>
<td>1148 BROADWAY STE 100 TACOMA, WA 98402</td>
<td>91-1349657 501 (C) 3</td>
<td>6,000.</td>
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<td>107 COMMERCIAL ST MASHpee, MA 2649</td>
<td>04-3370650 501 (C) 3</td>
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<td>2050 S BLOSSER RD SANTA MARIA, CA 93458</td>
<td>95-3253320 501 (C) 3</td>
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<td>COMMUNITY HEALTH NFP</td>
<td>2611 W CHICAGO AVE CHICAGO, IL 60622</td>
<td>36-3831793 501 (C) 3</td>
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<td>356 W 18TH ST NEW YORK, NY 10011</td>
<td>13-3409680 501 (C) 3</td>
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<td>COMMUNITY HELP IN PARK SLOPE INC</td>
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<td>11-2449994 501 (C) 3</td>
<td>32,375.</td>
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<td>COMMUNITY HIGH SCHOOL OF THE ROANOKE VALLEY</td>
<td>302 CAMPBELL AVE SE ROANOKE, VA 24013</td>
<td>20-1451735 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COMMUNITY HOSPICE OF NORTHEAST FLORIDA FOUN</td>
<td>4266 SUNBEAM RD JACKSONVILLE, FL 32257</td>
<td>59-3583920 501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<tr>
<td>COMMUNITY HOSPICE OF NORTHEAST FLORIDA INC</td>
<td>4266 SUNBEAM RD JACKSONVILLE, FL 32257</td>
<td>59-1940256 501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3 Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Attach to Form 990.

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---

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I 

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II 

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>COMMUNITY HOUSING PARTNERSHIP 20 JONES ST # 200 SAN FRANCISCO, CA 94102</td>
<td>94-3112338</td>
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<td>2</td>
<td>COMMUNITY HOUSING WORKS 3111 CAMINO DEL RIO N STE 800 SAN DIEGO, CA 92103</td>
<td>33-0317950</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
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<td>94-3255070</td>
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<td>4</td>
<td>COMMUNITY INITIATIVES FOUNDATION 304 LAUREL ST BATON ROUGE, LA 70801</td>
<td>20-5592914</td>
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<td>20,000</td>
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<tr>
<td>5</td>
<td>COMMUNITY KITCHEN OF MONROE COUNTY INC PO BOX 3286 BLOOMINGTON, IN 47402</td>
<td>31-1101408</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>COMMUNITY LEADERSHIP AND DEVELOPMENT INC PO BOX 3381 BILLINGS, MT 59103</td>
<td>81-0397424</td>
<td>501 (C) 3</td>
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<td>COMMUNITY LEARNING CENTER 2701 N BROAD ST PHILADELPHIA, PA 19132</td>
<td>23-2791129</td>
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<td>27-0741982</td>
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<td>9</td>
<td>COMMUNITY LEGAL AID INC 405 MAIN ST WORCESTER, MA 1608</td>
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<td>10</td>
<td>COMMUNITY LEGAL AID SOCIETY INC 100 W 10TH ST WILMINGTON, DE 19801</td>
<td>51-6000158</td>
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<td>FMV</td>
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</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>COMMUNITY LIBRARY ASSOCIATION INC KETCHUM S</td>
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<tr>
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<td>COMMUNITY OF HOPE INC</td>
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<tr>
<td>4 ATLANTIC ST SW WASHINGTON, DC 20032</td>
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</tbody>
</table>
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   ![Yes][1]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>COMMUNITY OF RECOVERING PEOPLE</td>
<td>1221 WAYZATA BLVD E WAYZATA, MN 55391</td>
<td>41-1701950</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>COMMUNITY OF SAINTS REGIONAL CATHOLIC SCHOOLS</td>
<td>335 HURLEY ST E SAINT PAUL, MN 55118</td>
<td>45-4804818</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>COMMUNITY OF ST PAUL INC</td>
<td>2512 WESTWOOD DR RACINE, WI 53404</td>
<td>39-1791509</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>COMMUNITY OF THE CROSS LUTHERAN CHURCH</td>
<td>10701 BLOOMINGTON FERRY RD MINNEAPOLIS, MN</td>
<td>41-1236378</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>COMMUNITY OF THE FRANCISCAN FRIARS OF THE RM</td>
<td>427 E 155TH ST BRONX, NY 10455</td>
<td>13-3450836</td>
<td>501 (c) 3</td>
<td>27,000.</td>
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<td>N/A</td>
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<td>6.</td>
<td>COMMUNITY OUTREACH INC</td>
<td>865 NW REIMAN ST CORVALLIS, OR 97330</td>
<td>93-0602094</td>
<td>501 (c) 3</td>
<td>53,299.</td>
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<td>7.</td>
<td>COMMUNITY PARTNERS</td>
<td>1000 N ALAMEDA ST LOS ANGELES, CA 90012</td>
<td>95-4302067</td>
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<td>188,800.</td>
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<td>8.</td>
<td>COMMUNITY PARTNERS INTERNATIONAL</td>
<td>580 CALIFORNIA ST FL 16 SAN FRANCISCO, CA 9</td>
<td>94-3375666</td>
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<td>9.</td>
<td>COMMUNITY PARTNERSHIP FOR PETS INC</td>
<td>112 FOUNDERS DR FLAT ROCK, NC 28731</td>
<td>20-2972350</td>
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<td>17,000.</td>
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<td>10</td>
<td>COMMUNITY PARTNERSHIP SCHOOL</td>
<td>303 WEST GLENWOOD AVE PHILADELPHIA, PA 1914</td>
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<td>51,500.</td>
<td>FMV</td>
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<td>11</td>
<td>COMMUNITY F PREGNANCY CLINICS INC</td>
<td>940 5TH AVE N NAPLES, FL 34102</td>
<td>51-0204833</td>
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<td>45,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>COMMUNITY PREPARATORY SCHOOL</td>
<td>135 PRAIRIE AVE PROVIDENCE, RI 2905</td>
<td>22-2485332</td>
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<td>53,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

---

**Note:** The table above is a simplified representation of the content from the form. For a complete and accurate version, please consult the original document.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **[X] Yes  [ ] No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) COMMUNITY PRESBYTERIAN CHURCH</td>
<td>94-1375814</td>
<td>501 (C) 3</td>
<td>16,818.</td>
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<td>N/A</td>
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<td>222 W EL PINTADO DANVILLE, CA 94526</td>
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<td>(2) COMMUNITY PRESBYTERIAN CHURCH - MT. PROSPEC</td>
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<td>407 NORTH MAIN STREET MOUNT PROSPECT, IL 60</td>
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<td>(3) COMMUNITY PRESBYTERIAN CHURCH IN CELEBRATION</td>
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<td>511 CELEBRATION AVE KISSIMMEE, FL 34747</td>
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<td>6015 STATE BRIDGE RD APT 5208 DULUTH, GA 30</td>
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<td>501 (C) 3</td>
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<td>1901 56TH AVE STE 200 GREELEY, CO 80634</td>
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<td>(6) COMMUNITY REFORM JEWISH CONGREGATION</td>
<td>36-3311904</td>
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<td>PO BOX 409 GLENCOE, IL 60022</td>
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<td>(7) COMMUNITY RENEWAL INTERNATIONAL INC</td>
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<tr>
<td>PO BOX 4678 SHREVEPORT, LA 71134</td>
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<td>(8) COMMUNITY RESOURCE CENTER</td>
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<td>26,000.</td>
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<td>650 2ND ST ENCINITAS, CA 92024</td>
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<td>(9) COMMUNITY RESOURCE INITIATIVE</td>
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<td>FMV</td>
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<tr>
<td>3012 16TH ST STE 211 SAN FRANCISCO, CA 9410</td>
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<td>(10) COMMUNITY ROOTS HOLDING FOUNDATION</td>
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<td>1620 12TH AVE STE 205 SEATTLE, WA 98122</td>
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<td>20 NONANTUM RD BRIGHTON, MA 2135</td>
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<td>(12) COMMUNITY SAILING NEW ORLEANS INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>141 ROBERT E LEE BLVD STE 260 NEW ORLEANS,</td>
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Schedule I (Form 990) 2020

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| 2. Enter total number of other organizations listed in the line 1 table ......................................................................................................................................................................................... |

JSA
0E1288 1.000

18674H 1467  V 20-7.21
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1 COMMUNITY SCHOOL ASSOCIATION</td>
<td>900 LAY RD SAINT LOUIS, MO 63124</td>
<td>43-0653286</td>
<td>501 (C) 3</td>
<td>12,300.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2 COMMUNITY SECURITY SERVICE</td>
<td>99 WALL ST # 3690 NEW YORK, NY 10005</td>
<td>26-0803826</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3 COMMUNITY SERVICES AGENCY</td>
<td>204 STIERLIN RD MOUNTAIN VIEW, CA 94043</td>
<td>94-1422465</td>
<td>501 (C) 3</td>
<td>117,000.</td>
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<td>4 COMMUNITY SERVICES LEAGUE OF JACKSON COUNTY</td>
<td>404 N NOLAND RD INDEPENDENCE, MO 64050</td>
<td>43-0976396</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>5 COMMUNITY SERVINGS INC</td>
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<td>22-3154028</td>
<td>501 (C) 3</td>
<td>167,200.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6 COMMUNITY SHARES OF WISCONSIN INC</td>
<td>612 W MAIN ST STE 200 MADISON, WI 53703</td>
<td>39-1172378</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7 COMMUNITY SHELTER BOARD</td>
<td>355 E CAMPUS VIEW BLVD STE 250 COLUMBUS, OH</td>
<td>31-1181284</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8 COMMUNITY SOLUTIONS FOR CHILDREN FAMILIES A</td>
<td>9015 MURRAY AVE STE 100 GILROY, CA 95020</td>
<td>23-7351215</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9 COMMUNITY SOLUTIONS INTERNATIONAL INC</td>
<td>PO BOX 3524 NEW YORK, NY 10008</td>
<td>27-3523909</td>
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<td>29,500.</td>
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<td>10 COMMUNITY SOUP KITCHEN AND OUTREACH CENTER</td>
<td>36 SOUTH ST MORRISTOWN, NJ 7960</td>
<td>22-3084025</td>
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<td>41,000.</td>
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<td>11 COMMUNITY SYNAGOGUE</td>
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<td>51,500.</td>
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<td>12 COMMUNITY SYNAGOGUE</td>
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<td>11-1992681</td>
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<td>9,145.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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<td>COMMUNITY TREEHOUSE CENTER DETROIT</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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</thead>
<tbody>
<tr>
<td><strong>(1)</strong> COMPANION ANIMAL CLINIC OF THE SANDHILLS PO BOX 148 SOUTHERN PINES, NC 28388</td>
<td>20-2886984</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(2)</strong> COMPASS BIBLE CHURCH 145 COLUMBIA ALISO VIEJO, CA 92656</td>
<td>20-2775756</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(3)</strong> COMPASS BIBLE CHURCH HUNTINGTON BEACH 5062 ARGOSY AVE HUNTINGTON BEACH, CA 92649</td>
<td>30-1130601</td>
<td>501 (C) 3</td>
<td>8,114.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(4)</strong> COMPASS COMMUNITY CHURCH OF GRASS VALLEY 22924 W HACIENDA DR GRASS VALLEY, CA 95949</td>
<td>94-2612861</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(5)</strong> COMPASS FAMILY SERVICES 37 GROVE ST SAN FRANCISCO, CA 94102</td>
<td>94-1156622</td>
<td>501 (C) 3</td>
<td>9,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(6)</strong> COMPASS FINANCES GODS WAY - GEORGIA INC 275 BRIDGEMARK LN NEWNAN, GA 30265</td>
<td>45-5571772</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(7)</strong> COMPASS HOUSING ALLIANCE 220 DEXTER AVE N SEATTLE, WA 98109</td>
<td>91-0578229</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(8)</strong> COMPASS WORKING CAPITAL INC 89 SOUTH ST STE 804 BOSTON, MA 2111</td>
<td>20-3975100</td>
<td>501 (C) 3</td>
<td>275,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(9)</strong> COMPASSION AND CHOICES 8156 S WADSORTH BLVD UNIT E # 162 LITTLETO 84-1328829</td>
<td>501 (C) 3</td>
<td>202,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>(10)</strong> COMPASSION FOR TRUTH AND HOPE MINISTRIES 2309 JUDY ST AMARILLO, TX 79106</td>
<td>81-2137752</td>
<td>501 (C) 3</td>
<td>6,480.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>(11)</strong> COMPASSION INTERNATIONAL INCORPORATED 12290 VOYAGER PKWY COLORADO SPRINGS, CO 809</td>
<td>36-2423707</td>
<td>501 (C) 3</td>
<td>1,350,557.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(12)</strong> COMPASSION WITHOUT BORDERS 1130 BUTLER AVE SANTA ROSA, CA 95407</td>
<td>20-4698227</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>COMPASSIONATE COMMUNICATION CENTER OF OHIO</td>
<td></td>
<td>501 (C) 3</td>
<td>20,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>COMPASSIONATE COMMUNITIES FOR CHILDREN</td>
<td>5120 MAIN ST DOWNERS GROVE, IL 60515</td>
<td>45-4430161</td>
<td>24,263</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>COMPASSIONATE RESPONSE</td>
<td>PO BOX 185 OREGON, WI 53750</td>
<td>20-8698375</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>COMPETITIVE ENTERPRISE INSTITUTE</td>
<td>1310 L ST NW FL 7 WASHINGTON, DC 20005</td>
<td>52-1351785</td>
<td>1,043,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>COMPOSITE RECYCLING TECHNOLOGY CENTER</td>
<td>2220 W 18TH ST PORT ANGELES, WA 98363</td>
<td>47-5271830</td>
<td>18,600</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
<td>COMPREHENSIVE YOUTH DEVELOPMENT INC</td>
<td>240 2ND AVE NEW YORK, NY 10003</td>
<td>13-3861648</td>
<td>35,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>COMP-U-DOPT</td>
<td>1602 AIRLINE DR HOUSTON, TX 77009</td>
<td>26-1460311</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>COMPUTER HISTORY MUSEUM</td>
<td>1401 N SHORELINE BLVD MOUNTAIN VIEW, CA 940</td>
<td>77-0507525</td>
<td>22,024</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CON SOLATIO</td>
<td>26 OLIVE ST BROOKLYN, NY 11211</td>
<td>20-0701395</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CONANICUT ISLAND LAND TRUST CORPORATION</td>
<td>PO BOX 106 JAMESTOWN, RI 2835</td>
<td>22-2608961</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>11</td>
<td>CONCERN FOR INDEPENDENT LIVING INC</td>
<td>312 EXPRESSWAY DR S MEDFORD, NY 11763</td>
<td>23-7259687</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CONCERN FOUNDATION</td>
<td>11111 W OLYMPIC BLVD STE 214 LOS ANGELES, C</td>
<td>23-7002878</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1</td>
<td>CONCERN WORLDWIDE U S INC</td>
<td>13-3712030</td>
<td>501 (C) 3</td>
<td>20,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CONCERNED CITIZENS FOR COMMUNITY HEALTH</td>
<td>95-3416943</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CONCERNED WOMEN FOR AMERICA</td>
<td>95-3580834</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CONCERT NOVA INC</td>
<td>26-1675639</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CONCORD ACADEMY</td>
<td>04-1200600</td>
<td>501 (C) 3</td>
<td>196,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6</td>
<td>CONCORD ANTIQUARIAN SOCIETY</td>
<td>04-2104035</td>
<td>501 (C) 3</td>
<td>93,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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<td>7</td>
<td>CONCORD ART ASSOCIATION</td>
<td>04-2275153</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CONCORD CENTER ASSOCIATION INC</td>
<td>35-0817149</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CONCORD FREE PUBLIC LIBRARY CORPORATION</td>
<td>04-2121328</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CONCORD HILL SCHOOL</td>
<td>52-0815539</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CONCORD REGIONAL VISITING NURSE ASSOCIATION</td>
<td>02-0222122</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CONCORD UNITED METHODIST CHURCH</td>
<td>25-6057822</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule I (Form 990) 2020
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

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General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>CONCORD UNITED METHODIST CHURCH</td>
<td>11202 ROANE DR KNOXVILLE, PA 15010</td>
<td>62-0672582</td>
<td>501 (C) 3</td>
<td>34,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONCORDANCE ACADEMY OF LEADERSHIP</td>
<td>1845 BORMAN CT SAINT LOUIS, MO 63146</td>
<td>43-1416762</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONCORDIA COLLEGE AT BRONXVILLE</td>
<td>171 WHITE PLAINS RD BRONXVILLE, NY 10708</td>
<td>33-1740448</td>
<td>501 (C) 3</td>
<td>58,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONCORDIA COLLEGE CORPORATION</td>
<td>901 8TH ST S MOORHEAD, MN 56562</td>
<td>41-0693977</td>
<td>501 (C) 3</td>
<td>62,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONCORDIA LUTHERAN CHURCH</td>
<td>4115 BLALOCK RD HOUSTON, TX 77080</td>
<td>74-1659466</td>
<td>501 (C) 3</td>
<td>12,220</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONCORDIA SEMINARY</td>
<td>801 SEMINARY PL SAINT LOUIS, MO 63105</td>
<td>43-0655865</td>
<td>501 (C) 3</td>
<td>16,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONCORDIA UNIVERSITY TEXAS</td>
<td>11400 CONCORDIA UNIV DRIVE AUSTIN, TX 78726</td>
<td>74-1161941</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONESTOGA AREA HISTORICAL SOCIETY</td>
<td>51 KENDIG RD CONESTOGA, PA 17516</td>
<td>23-2735560</td>
<td>501 (C) 3</td>
<td>68,817</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONESTOGA CHRISTIAN DAY SCHOOL ASSOCIATION</td>
<td>2760 MAIN ST MORGANTOWN, PA 19543</td>
<td>23-1518209</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONFEXIAN AMERICAS</td>
<td>800 18TH AVE S STE A NASHVILLE, TN 37203</td>
<td>62-1715618</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONFEDERATE MEMORIAL PARK INC</td>
<td>410 TRAIL VIEW WAY FRIENDSWOOD, TN 77546</td>
<td>36-4522774</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONFERENCE BOARD INC</td>
<td>845 3RD AVE FL 3 NEW YORK, NY 10022</td>
<td>13-1624198</td>
<td>501 (C) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

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**Name of the organization**

**Employer identification number**

23-2888152

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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<tbody>
<tr>
<td>CONFLUENCE HEALTH FOUNDATION 526 N CHELAN AVE STE A WENATCHEE, WA 98801</td>
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<td>FMV</td>
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<td>CONG GEMACH BNEI PINCHOS 621 DAHILL RD BROOKLYN, NY 11218</td>
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<td>CONG NEIMUS MOSHE 1662 47TH ST BROOKLYN, NY 11204</td>
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<td>FMV</td>
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<td>CONG SIMCHAT TZION - LEBI BMIRAH 1573 41ST ST BROOKLYN, NY 11218</td>
<td>11-3636715</td>
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<td>57-0937485</td>
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<td>04-2104029</td>
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<td>$11,570.</td>
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<td>CONGREGATION AGUDAS ACHIM 7300 HART LN AUSTIN, TX 78731</td>
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<td>CONGREGATION AGUDATH ISRAEL 20 ACADEMY RD C 8805 501 (C) 3</td>
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<td>CONGREGATION ARAVAS TZDOKAH VCHESED INC 1347 42ND ST BROOKLYN, NY 11219</td>
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<td>CONGREGATION AHAWAS ACHIM BNAI JACOB AND DA 700 PLEASANT VALLEY WAY WEST ORANGE, NJ 705</td>
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<td>$7,500.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

#### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

#### Part II: General Information on Grants and Assistance

Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

<table>
<thead>
<tr>
<th>(1)</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>(2)</td>
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<td>(6)</td>
<td>CONGREGATION AT DUK UNIVERSITY CHAPEL INC</td>
<td>56-1472890 501 (C) 3</td>
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<td>(9)</td>
<td>CONGREGATION BAIS MEDRASH KEREM SHLOM INC</td>
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<td>CONGREGATION BAIS TORAH OF MONSEY</td>
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<td>(12)</td>
<td>CONGREGATION BAITH ISRAEL ANSHAI EIMES</td>
<td>11-6003230 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>1248 53RD ST BROOKLYN, NY 11219</td>
<td>20-1530176</td>
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<td>74,000.</td>
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<td>2</td>
<td>CONGREGATION BENEMI YAKOV C O BENJAMIN ISAAC</td>
<td>1742 E 7TH ST BROOKLYN, NY 11223</td>
<td>11-2431198</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>3</td>
<td>CONGREGATION BET HAVERIM JEWISH FELLOWSHIP</td>
<td>1715 ANDERSON RD DAVIS, CA 95616</td>
<td>94-2201134</td>
<td>501 (C) 3</td>
<td>5,450.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION BETH AARON OF TEANECK</td>
<td>950 QUEEN ANNE RD TEANECK, NJ 7666</td>
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<td>27,600.</td>
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<td>5</td>
<td>CONGREGATION BETH ABRAHAM JACOB</td>
<td>380 WHITEHALL ROAD ALBANY, NY 12208</td>
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<td>CONGREGATION BETH ABRAHAM OF BERGENFIELD</td>
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<td>CONGREGATION BETH AM</td>
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<td>1301 NASYS FORD RD PENN VALLEY, PA 19072</td>
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<td>CONGREGATION BETH CHAIM</td>
<td>329 VILLAGE RD E PRINCETON JUNCTION, NJ 855</td>
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<td>16,690.</td>
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<td>CONGREGATION BETH CHAIM OF LOS ANGELES</td>
<td>7211 BEVERLY BLVD LOS ANGELES, CA 90036</td>
<td>95-4063165</td>
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<td>11,000.</td>
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<td>CONGREGATION BETH DAVID</td>
<td>20 W MAPLE AVE MONSAY, FL 33129</td>
<td>13-6163562</td>
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<td>14,000.</td>
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<td>CONGREGATION BETH DAVID</td>
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<td>59-0637812</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:

3. Enter total number of other organizations listed in the line 1 table:

---

JSA 0E1288 1.000  
18674H 1467 V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X], No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

#### Table

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>CONGREGATION BETH EL OF LA JOLLA</td>
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<td>95-2574602</td>
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<td>13,400.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>CONGREGATION BETH EL OF MONTGOMERY</td>
<td>8215 OLD GEORGTWN RD BETHESDA, MD 20814</td>
<td>52-0698176</td>
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<td>16,112.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION BETH EL-ATERETH ISRAEL</td>
<td>561 MARD ST NEWTON CENTER, MA 2459</td>
<td>04-2387209</td>
<td>501 (C) 3</td>
<td>9,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>CONGREGATION BETH ELOHIM</td>
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<td>11-1672755</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CONGREGATION BETH NAMEDROSH</td>
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<td>9</td>
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<td>36 CHATHAM RD SUMMIT, NJ 7901</td>
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<td>10</td>
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<td>22-6017205</td>
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<td>8,000.</td>
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<td>11</td>
<td>CONGREGATION BETH ISRAEL</td>
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<td>74-1143080</td>
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<td>5,703.</td>
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<td>12</td>
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<td>3901 SHAO CREEK BLVD AUSTIN, TX 77096</td>
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<td>6,800.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Total number of section 501(c)(3) and government organizations listed in the line 1 table: 12

Total number of other organizations listed in the line 1 table: 12
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONGREGATION BETH JACOB 1550 ALAMEDA DE LAS PULGAS REDWOOD CITY, CA 94-6019166 501 (C) 3 22,593. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION BETH OR 239 E WELSH RD AMBLER, PA 19002 23-6005909 501 (C) 3 6,140. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONGREGATION BETH SHALOM 3433 WALTERS AVE NORTHROCK, IL 60062 36-2661160 501 (C) 3 8,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION B'NAI ISRAEL 2710 PARK AVENUE BRIDGEPORT, CT 6604 06-0653159 501 (C) 3 90,941. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### Part II

<table>
<thead>
<tr>
<th>1</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>(9)</td>
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<td>(10)</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Schedule I (Form 990) 2020**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes ☒
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>(5) CONGREGATION EMANU-EL OF THE CITY OF NEW YO</td>
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<td>(12) CONGREGATION KHAL TSAMACH TSADIK VIZNITZ</td>
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</table>

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
- Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>CONGREGATION KOL AMI</td>
<td>252 SOUNTVIEW AVE WHITE PLAINS, NY 10606 13-1739991 501 (C) 3</td>
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<td>CONGREGATION KOL EMETH</td>
<td>4175 MANUELA AVE PALO ALTO, CA 94306 94-1566203 501 (C) 3</td>
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<td>3</td>
<td>CONGREGATION KOL HANESHAMA INC</td>
<td>PO BOX 21655 SARASOTA, FL 34276 26-1330090 501 (C) 3</td>
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<td>CONGREGATION KOL HAVERIM INC</td>
<td>1079 NEBRON AVE GLASTONBURY, CT 6033 22-2586288 501 (C) 3</td>
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<td>CONGREGATION LIOZNA</td>
<td>1603 41ST ST BROOKLYN, NY 11218 20-5125518 501 (C) 3</td>
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<td>CONGREGATION LUTZK INC</td>
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<td>CONGREGATION MARAH YECHZEKEL OF FLATBUSH</td>
<td>1014 E 15TH ST BROOKLYN, NY 11230 85-2690223 501 (C) 3</td>
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<td>9</td>
<td>CONGREGATION MESIVTA OF STATEN ISLAND INC</td>
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<td>CONGREGATION MIKVA TOBA OF LAKEWOOD</td>
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<td>777 KENT AVE BROOKLYN, NY 11205 11-3110098 501 (C) 3</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
<td>5,900</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>43-1695483</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>CONGREGATION OF DIVINE PROVIDENCE OF KENTUC 5300 SAINT ANNE DR MELBOURNE, KY 41059</td>
<td>61-0449660</td>
<td>501 (C) 3</td>
<td>125,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>CONGREGATION OF HOLY CROSS UNITED STATES PR PO BOX 774 NOTRE DAME, IN 46556</td>
<td>32-0344245</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION OF ROCATIONISTS 6635 TOBIAS AVE VAN NUYS, CA 91405</td>
<td>94-6079319</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONGREGATION OF ST JOHNS CATHEDRAL 831 N VAN BUREN ST MILWAUKEE, WI 53202</td>
<td>39-0806238</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION OF THE ORATORY OF ST PHILIP NE 10110 STATE ROUTE 56 OWENSBORO, KY 42301</td>
<td>20-2744528</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>CONGREGATION OF THE SISTERS OF CHARITY OF T 4503 BROADWAY ST SAN ANTONIO, TX 78209</td>
<td>74-1676917</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CONGREGATION OHEL YISHAR INC 270 MADISON AVE FL 9 NEW YORK, NY 10016</td>
<td>83-1563565</td>
<td>501 (C) 3</td>
<td>6,059</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CONGREGATION OHEV SHALOM 2 CHESTER RD WALLINGFORD, PA 19086</td>
<td>23-1457981</td>
<td>501 (C) 3</td>
<td>13,611</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>CONGREGATION OHR HATarah INC 36 RECTOR CT BERGENFIELD, NJ 7621</td>
<td>20-1384377</td>
<td>501 (C) 3</td>
<td>24,250</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONGREGATION OR AMI 708 RIDGE PIKE LAFAYETTE HILL, PA 19444</td>
<td>23-6050459</td>
<td>501 (C) 3</td>
<td>6,536</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................  

   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>CONGREGATION OR ATID</td>
<td>10625 Patterson Ave Henrico, VA 23238</td>
<td>54-1373958</td>
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<td>10,180.</td>
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<td>2</td>
<td>CONGREGATION ORACH CHAIM</td>
<td>1459 Lexington Avenue New York, NY 10128</td>
<td>13-1689385</td>
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<td>29,200.</td>
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<td>3</td>
<td>CONGREGATION RAMATH ORAN INC</td>
<td>150 W 110TH ST NEW YORK, NY 10025</td>
<td>13-1524868</td>
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<td>11,102.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CONGREGATION REB MEIR BAAL RANES</td>
<td>1161 45TH ST BROOKLYN, NY 11219</td>
<td>16-1629988</td>
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<td>18,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>CONGREGATION RINAT YISRAEL</td>
<td>389 W ENGLEWOOD AVE TEANECK, NJ 7666</td>
<td>22-2211015</td>
<td>501 (C) 3</td>
<td>27,600.</td>
<td>FMV</td>
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<td>6</td>
<td>CONGREGATION RODEF SHALOM</td>
<td>450 S KEARNY ST DENVER, CO 80224</td>
<td>84-0468847</td>
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<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>CONGREGATION RODEF SHOLOM OF MARIN</td>
<td>170 N SAN PEDRO RD SAN RAFAEL, CA 94903</td>
<td>94-6030040</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>8</td>
<td>CONGREGATION RODEF SHOLOM</td>
<td>7 W 83RD ST NEW YORK, NY 10024</td>
<td>13-1628164</td>
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<td>68,690.</td>
<td>FMV</td>
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<td>9</td>
<td>CONGREGATION RODEFI SHOLOM BMAI ISRAEL</td>
<td>3003 SHOLOM DR SAN ANTONIO, TX 78230</td>
<td>74-1394415</td>
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<td>11,800.</td>
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<td>10</td>
<td>CONGREGATION SHAAR HASHAMAYIM</td>
<td>71 E WILLOW TREE RD SPRING VALLEY, NY 10977</td>
<td>20-4605420</td>
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<td>12,500.</td>
<td>FMV</td>
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<td>11</td>
<td>CONGREGATION SHAARAI SHOMAYIM</td>
<td>75 EAST JAMES STREET LANCAS, PA 17602</td>
<td>23-1542828</td>
<td>501 (C) 3</td>
<td>7,120.</td>
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<td>12</td>
<td>CONGREGATION SHAARE EMETH</td>
<td>11645 LADUE RD SAINT LOUIS, MO 63141</td>
<td>43-0662463</td>
<td>501 (C) 3</td>
<td>14,044.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2</td>
<td>CONGREGATION SHEARIH JOSEPH INC</td>
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<td>FMV</td>
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<td>4</td>
<td>CONGREGATION SHOMREI EMUNAH</td>
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<td>34,016.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CONGREGATION TOLDOS YEHUDA INC</td>
<td>1621 61ST ST BROOKLYN, NY 11204</td>
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<td>FMV</td>
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<td>11</td>
<td>CONGREGATION TORAH EL JERSEY SHORE JEWISH S</td>
<td>22-1831670</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>12</td>
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<td>FMV</td>
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Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) CONGREGATION YESHIVA OF TEL SHE ALUMNI</td>
<td>4904 INDEPENDENCE AVE BRONX, NY 10471</td>
<td>22-2368223</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) CONGREGATION YETEV LEV OF LAKewood</td>
<td>225 HUDSON ST LAKewood, NJ 8701</td>
<td>11-2450788</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) CONGREGATION YMN</td>
<td>1368 39TH ST BROOKLIN, NY 11218</td>
<td>46-2915414</td>
<td>501 (C) 3</td>
<td>37,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) CONGREGATION ZICHURNE BINAYIM</td>
<td>701 PRINCETON AVE LAKewood, NJ 8701</td>
<td>22-3684722</td>
<td>501 (C) 3</td>
<td>385,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) CONGREGATIONAL CHURCH - NEW CANAAN, CT</td>
<td>23 PARK STREET NEW CANAAN, CT 6840</td>
<td>06-0653049</td>
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<td>62,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) CONGREGATIONAL CHURCH IN SOUTH GLASTONBURY</td>
<td>PO BOX 187 SOUTH GLASTONBURY, CT 6073</td>
<td>06-0770197</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) CONGREGATIONAL CHURCH OF ALGONQUIN</td>
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<td>13,200.</td>
<td>FMV</td>
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<td>(8) CONGREGATIONAL CHURCH OF MANHASSET</td>
<td>1845 NORTHERN BOULEVARD MANHASSET, NY 11030</td>
<td>11-1720244</td>
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<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(9) CONGREGATIONAL CHURCH OF NEEDHAM</td>
<td>1154 GREAT PLAINE AVE NEEDHAM, MA 2492</td>
<td>04-2123670</td>
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<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) CONGREGATIONAL CHURCH OF SAN MATEO</td>
<td>225 TILTON AVE SAN MATEO, CA 94401</td>
<td>94-1279821</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>(11) CONGREGATIONAL PRESBYTERIAN CHURCH</td>
<td>709 6TH ST LEWISTON, ID 83501</td>
<td>82-0230027</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) CONGRESO DE LATINOS UNIDOS INC</td>
<td>216 W SOMERSET ST PHILADELPHIA, PA 19133</td>
<td>23-2051143</td>
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<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<table>
<thead>
<tr>
<th>(1) Congress for Jewish Culture Inc</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>306 W 18TH ST APT 2B NEW YORK, NY 10011</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Congress of Neurological Surgeons Foundation</td>
<td>10 N MARTINGALE RD STE 190 SCHAUMBURG, IL 60193</td>
<td>90-0917138</td>
<td>501 (C) 3</td>
<td>5,001.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Congressional Progressive Caucus Center</td>
<td>80 F ST NW WASHINGTON, DC 20001</td>
<td>20-3714244</td>
<td>501 (C) 3</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Conifers Stagedoor Theatre Inc</td>
<td>PO BOX 71 CONIFER, CO 80433</td>
<td>84-1275007</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Connect to Compete Inc</td>
<td>413 K ST NW WASHINGTON, DC 20001</td>
<td>45-4868462</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Connecticut Challenge Inc</td>
<td>PO BOX 566 SOUTHPORT, CT 6890</td>
<td>20-2777748</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Connecticut Children's Medical Center Foundation</td>
<td>282 WASHINGTON ST HARTFORD, CT 6106</td>
<td>22-2619869</td>
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<td>113,500.</td>
<td>FMV</td>
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<td>Connecticut College</td>
<td>270 MOHEGAN AVE NEW LONDON, CT 6320</td>
<td>06-0664587</td>
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<td>Connecticut Community Foundation Inc</td>
<td>43 FIELD ST WATERBURY, CT 6702</td>
<td>06-6038074</td>
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<td>14,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>Connecticut Food Bank Inc</td>
<td>2 RESEARCH PKWY WALLINGFORD, CT 6492</td>
<td>06-1063025</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Connecticut Guitar Society Inc</td>
<td>PO BOX 1528 HARTFORD, CT 6144</td>
<td>22-2768662</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Connecticut Humane Society</td>
<td>701 RUSSELL RD NEWINGTON, CT 6111</td>
<td>06-0667605</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- **Attach to Form 990.**

- **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONNECTICUT INSTITUTE FOR REFUGEES AND IMMIGRATION</td>
<td>670 CLINTON AVE BRIDGEPORT, CT 6605</td>
<td>06-0696118</td>
<td>501 (C) 3</td>
<td>11,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONNECTICUT INSTITUTE FOR THE BLIND</td>
<td>120 HOLCOMB ST HARTFORD, CT 6112</td>
<td>06-0696111</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNECTICUT PLAYERS FOUNDATION INC</td>
<td>222 SARGENT DR NEW HAVEN, CT 6511</td>
<td>06-6073063</td>
<td>501 (C) 3</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNECTICUT PUBLIC BROADCASTING INC</td>
<td>1049 ASYLUM AVE HARTFORD, CT 6105</td>
<td>06-0758938</td>
<td>501 (C) 3</td>
<td>159,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNECTING POINT OF PARK CITIES</td>
<td>4516 LOVERS LN STE 212 DALLAS, TX 75225</td>
<td>46-1101711</td>
<td>501 (C) 3</td>
<td>6,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNECTION FOR WOMEN AND FAMILIES INC</td>
<td>79 MAPLE ST SUMMIT, NJ 7901</td>
<td>22-1489919</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONNECTION FOR THE HOMELESS INC</td>
<td>1800 N GREEN ST BROWNSBURG, IN 46112</td>
<td>35-1463906</td>
<td>501 (C) 3</td>
<td>45,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CONNELLY SCHOOL OF THE HOLY CHILD</td>
<td>2121 DEWEY AVE EVANSTON, IL 60201</td>
<td>36-3346917</td>
<td>501 (C) 3</td>
<td>18,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNECTICUT NEWS PROJECT</td>
<td>1049 ASYLUM AVE HARTFORD, CT 6105</td>
<td>27-0583046</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE HOLY CHILD 9029 BRADLEY BLVD POTOMAC, MD</td>
<td>810 MAXWELL AVE GREENWOOD, SC 29646</td>
<td>57-0324927</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CONNIE MAXWELL CHILDREN'S HOME</td>
<td>2318 MILL RD STE 800 ALEXANDRIA, VA 22314</td>
<td>31-1667995</td>
<td>501 (C) 3</td>
<td>32,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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#### Attach to Form 990.

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## Part I

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| CONSCIENCE INTERNATIONAL INC  
110 MANSKELL CIR STE 106 ROSWELL, GA 30075  
58-2385275  
501 (C) 3  
240,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSCIOUS CAPITALISM INC  
PO BOX 5458 WARREN, MI 48090  
20-2238653  
501 (C) 3  
81,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVANCY FOR CUYAHOGA VALLEY NATIONAL PA  
1403 W MINES HILL RD PENINSULA, OH 44264  
34-4917257  
501 (C) 3  
305,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION ACTION RESEARCH NETWORK  
3463 TUNA CANYON RD TOPANGA, CA 90290  
45-5045474  
501 (C) 3  
59,543  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION INTERNATIONAL FOUNDATION  
2011 CRYSTAL DR STE 600 ARLINGTON, VA 22202  
52-1497470  
501 (C) 3  
593,250  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION LAW FOUNDATION INC  
62 SUMMER ST BOSTON, MA 2110  
04-6149986  
501 (C) 3  
70,036  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION NW  
1829 10TH AVE W STE B SEATTLE, WA 98119  
94-3091547  
501 (C) 3  
42,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION SOCIETY OF CALIFORNIA  
PO BOX 5238 OAKLAND, CA 94665  
94-1687847  
501 (C) 3  
47,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION TRUST FOR NORTH CAROLINA  
PO BOX 33333 RALEIGH, NC 27636  
58-1552188  
501 (C) 3  
101,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION VALUE INSTITUTE  
PO BOX 2548 EL CERRITO, CA 94530  
20-0906982  
501 (C) 3  
15,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION VOTERS FOR IDAHO EDUCATION FUN  
PO BOX 2802 BOISE, ID 83701  
13-4361041  
501 (C) 3  
6,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| CONSERVATION VOTERS NEW MEXICO EDUCATION FUN  
121 SANDOVAL ST STE 200 SANTA FE, NM 87501  
91-1982332  
501 (C) 3  
53,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ..........................................

3. Enter total number of other organizations listed in the line 1 table. ..........................................

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

Schedule I (Form 990) 2020
Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   [ ] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>IRC section (if applicable)</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>CONSERVATIVE BAPTIST FOREIGN MISSION SOCIETY</td>
<td>20 INVERNESS PL E ENGLEWOOD, CO 80112</td>
<td>36-2216163</td>
<td>501 (C) 3</td>
<td>56,460.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>CONSERVATIVE ENERGY NETWORK</td>
<td>106 W ALLEGAN ST STE 200 LANSING, MI 48933</td>
<td>81-3459199</td>
<td>501 (C) 3</td>
<td>375,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>CONSERVATIVE PARTNERSHIP INSTITUTE</td>
<td>611 PENNSYLVANIA AVE SE STE 407 WASHINGTON,</td>
<td>82-1470217</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4)</td>
<td>CONSTITUTIONAL FUND</td>
<td>323 WASHINGTON AVE N FL 2 MINNEAPOLIS, MN 5</td>
<td>82-4027046</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5)</td>
<td>CONSTITUTING AMERICA INC</td>
<td>PO BOX 1988 COLLEGEVILLE, PA 76034</td>
<td>27-2083548</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6)</td>
<td>CONSTRUCTING HOPE PRE-APPRENTICESHIP PROGRAM</td>
<td>405 NE CHURCH ST PORTLAND, OR 97211</td>
<td>93-1155647</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>CONSTRUCTION ANGELS INC</td>
<td>2436 N FEDERAL HWY STE 313 FOMPANO BEACH, FL</td>
<td>45-3044158</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8)</td>
<td>CONSTRUCTION FOR WORLDWIDE EVANGELISM INC</td>
<td>4301 W SOUTH AVE TAMPA, FL 33614</td>
<td>59-3089492</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9)</td>
<td>CONSUMER REPORTS INC</td>
<td>101 TRUMAN AVE YORK, NY 10703</td>
<td>13-1776434</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>CONSUMER TECHNOLOGY ASSOCIATION FOUNDATION</td>
<td>1919 S KADS ST ARLINGTON, VA 22202</td>
<td>80-0194042</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11)</td>
<td>CONSUMERS FOR DENTAL CHOICE INC</td>
<td>316 F ST NW STE 210 WASHINGTON, DC 20002</td>
<td>52-2257385</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>CONTACT MINISTRIES</td>
<td>1100 E ADAMS ST SPRINGFIELD, IL 62703</td>
<td>37-1072627</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
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<tr>
<td>CONTEMPORARY ART GROUP</td>
<td>38-3859167</td>
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<tr>
<td>CONTEMPORARY AUSTIN MUSEUM INC</td>
<td>74-1233816</td>
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<tr>
<td>CONTINUUM NETWORK</td>
<td>83-1070820</td>
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<tr>
<td>CONTRA COSTA INTERFAITH TRANSITIONAL HOUSING</td>
<td>91-1797391</td>
</tr>
<tr>
<td>CONVENT OF SACRED HEART AND SCHOOL</td>
<td>36-2170839</td>
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<tr>
<td>CONVENT OF THE SACRED HEART</td>
<td>35-2425019</td>
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<tr>
<td>CONVENT OF THE SACRED HEART</td>
<td>13-1628166</td>
</tr>
<tr>
<td>CONVENTION OF P E CHURCH OF THE DIOCESE OF</td>
<td>52-0196608</td>
</tr>
<tr>
<td>CONVERGE</td>
<td>36-2181949</td>
</tr>
<tr>
<td>CONVERGENCE BALLET COMPANY</td>
<td>27-2266397</td>
</tr>
<tr>
<td>CONVERGENCE CENTER FOR POLICY RESOLUTION</td>
<td>32-0280279</td>
</tr>
<tr>
<td>CONVERSATIONS ON THE GREEN INC</td>
<td>83-4438861</td>
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</tbody>
</table>

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</thead>
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<tr>
<td>1</td>
<td>CONVOY OF HOPE 330 S PATTERSON AVE SPRINGFIELD, MO 65802</td>
<td>68-0051386</td>
<td>501 (C) 3</td>
<td>115,316.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>COOK CHILDRENS MEDICAL CENTER 801 7TH AVE FORT WORTH, TX 76104</td>
<td>75-2051646</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>COOKS HILL COMMUNITY CHURCH 2400 COOKS HILL RD CENTRALIA, WA 98531</td>
<td>91-1354201</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>COOL EARTH ACTION USA INC 1 HANSON PL APT 17D BROOKLYN, NY 11243</td>
<td>26-3688173</td>
<td>501 (C) 3</td>
<td>112,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>COOL EFFECT INC 100 DRAKES LANDING RD GREENBRAE, CA 94904</td>
<td>47-5068496</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>6</td>
<td>COOLIDGE CORNER THEATRE FOUNDATION INC 290 HARVARO ST BROOKLINE, MA 2446</td>
<td>04-3039722</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>COOPER UNION FOR THE ADVANCEMENT OF SCIENCE 30 COOPER SQUARE 2ND FL NEW YORK, NY 10003</td>
<td>13-5562985</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>COOPERATIVE EXTENSION ASSOCIATION IN THE ST 615 WILLOW AVE ITHACA, NY 14850</td>
<td>16-6072897</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>COOPERATIVE FOR ASSISTANCE AND RELIEF EVERY 151 ELLIS ST NE ATLANA, GA 30303</td>
<td>13-1685039</td>
<td>501 (C) 3</td>
<td>1,055,689.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>COOPERATIVE FOR EDUCATION 2300 MONTANA AVE STE 401 CINCINNATI, OH 452</td>
<td>31-1545464</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>COORDINATORS 2 INC 8100 THREE CHOFT RD STE 100 HENRICO, VA 232</td>
<td>54-1448387</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12</td>
<td>COPE FAMILY CENTER 707 RANDOLPH ST NAPA, CA 94559</td>
<td>94-2322399</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM 23-2888152

**Employer identification number**

220-7888152

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| **1** | COPENHAGEN CONSENSUS CENTER USA INC  
1215 MAIN ST PMB 5132 TEMSKIRBY, MA 1876 | 26-1214521 | 501 (C) 3 | 40,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **2** | COPPER CANYON PRESS  
PO BOX 271 PORT TOWNSEND, WA 98368 | 94-3118374 | 501 (C) 3 | 18,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **3** | COPPERTOWER FAMILY MEDICAL CENTER INC  
100 N 3RD ST CLOVERDALE, CA 95425 | 68-0345901 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **4** | COPTIC ORPHANS SUPPORT ASSOCIATION  
PO BOX 2881 MERRIFIELD, VA 22116 | 54-1637257 | 501 (C) 3 | 78,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **5** | CORA COMMUNITY OVERCOMING RELATIONSHIP ABUS  
2211 PALM AVE SAN MATEO, CA 94403 | 94-2481188 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **6** | CORACLE  
2883 QUICKSBURG RD QUICKSBURG, VA 22847 | 45-4838296 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **7** | CORAL RIDGE MINISTRIES MEDIA INC  
5555 N FEDERAL HWY STE 1 FORT LAUDERDALE, FL 3330 | 65-0496702 | 501 (C) 3 | 56,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **8** | CORAL RIDGE PRESBYTERIAN CHURCH  
5555 N FEDERAL HWY FORT LAUDERDALE, FL 3330 | 59-1026547 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **9** | CORBETT PREPARATORY SCHOOL OF IDS INC  
12015 ORANGE GROVE DR TAMPA, FL 33618 | 59-1282306 | 501 (C) 3 | 55,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **10** | CORD OF 3 STRANDS INC  
2600 E CARY ST APT 3103 RICHMOND, VA 23223 | 47-5102481 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **11** | CORD USA  
4545 WARWICK CIRCLE DR GRAND BLANC, MI 4843 | 27-0540459 | 501 (C) 3 | 12,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| **12** | CORINTH REFORMED CHURCH  
150 16TH AVENUE NORTHWEST HICKORY, NC 28601 | 56-0615195 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>COrINThIAN bAPTIST CHURCH</td>
<td>31-0685845</td>
<td>501 (c) 3</td>
<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2.</td>
<td>COmmONT mUSIC</td>
<td>02-0494634</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>CoRNEA RESEARCH FOUNDATION OF AMERICA INC</td>
<td>31-1243592</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4.</td>
<td>CORNELIA CORNEL CENTER FOR EDUCATION</td>
<td>13-3735244</td>
<td>501 (c) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>CORNELIUS ARTS COMMUNITY CENTER INC</td>
<td>81-4628087</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>CORNELL COLLEGE</td>
<td>42-0680335</td>
<td>501 (c) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>CORNELL DAILY SUN ALUMNI ASSOCIATION INC</td>
<td>13-4159426</td>
<td>501 (c) 3</td>
<td>59,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>CORNELL UNIVERSITY</td>
<td>15-0532082</td>
<td>501 (c) 3</td>
<td>6,772,726.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>CORNER FOOD PANTRY INC</td>
<td>46-3253476</td>
<td>501 (c) 3</td>
<td>5,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>CORNERSTONE BAPTIST CHURCH</td>
<td>76-0369227</td>
<td>501 (c) 3</td>
<td>40,885.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>CORNERSTONE BAPTIST CHURCH OF CLEVELAND, IN</td>
<td>58-2081554</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>CORNERSTONE CHAPEL</td>
<td>54-1688498</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CORNERSTONE CHRISTIAN CHURCH</td>
<td>775 N GREEN MOUNT RD BELLEVILLE, IL 62221</td>
<td>37-0682752</td>
<td>501 (c) 3</td>
<td>8,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>CORNERSTONE CHRISTIAN CHURCH OF WYCKOFF</td>
<td>495 WYCKOFF AVENUE WYCKOFF, NJ 7481</td>
<td>22-6019118</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CORNERSTONE CHURCH</td>
<td>H6W31449 ALBERTA DR DELAFIELD, WI 53018</td>
<td>39-1733227</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CORNERSTONE CHURCH OF BLUFFTON</td>
<td>PO BOX 2540 BLUFFTON, SC 29910</td>
<td>57-6078951</td>
<td>501 (c) 3</td>
<td>85,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CORNERSTONE CHURCH OF BOULDER VALLEY</td>
<td>1190 S LASHLEY LN BOULDER, CO 80305</td>
<td>84-1148313</td>
<td>501 (c) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>CORNERSTONE CHURCH SBC</td>
<td>9505 HARRISON ST LA VISTA, NE 68128</td>
<td>36-3284705</td>
<td>501 (c) 3</td>
<td>11,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CORNERSTONE COMMUNITY CHURCH PORTLAND INC</td>
<td>7460 SW HUNZIKER RD STE A PORTLAND, OR 9722</td>
<td>42-1755583</td>
<td>501 (c) 3</td>
<td>15,295.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>CORNERSTONE EVANGELICAL PRESBYTERIAN CHURCH</td>
<td>9455 HILTON RD BRIGHTON, MI 48114</td>
<td>38-2841147</td>
<td>501 (c) 3</td>
<td>36,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>CORNERSTONE FAMILY PROGRAMS</td>
<td>80 WASHINGTON ST MORRISTOWN, NJ 7960</td>
<td>22-1489900</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>CORNERSTONE FELLOWSHIP OF LIVERMORE CALIFORNIA</td>
<td>348 N CANYONS PKWY LIVERMORE, CA 94551</td>
<td>94-3178882</td>
<td>501 (c) 3</td>
<td>43,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>CORNERSTONE FOUNDATION</td>
<td>9032 WOLLMARKET RD BILOXI, MS 39532</td>
<td>64-0819423</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CORNERSTONE MONTESORRI ELEMENTARY SCHOOL</td>
<td>1611 AMES AVE SAINT PAUL, MN 55106</td>
<td>27-1556815</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CORNERSTONE MONTGOMERY INC</td>
<td>52-0937199</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CORNERSTONES INC</td>
<td>54-1037615</td>
<td>501 (C) 3</td>
<td>36,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>CORNOCOPIA PROJECT</td>
<td>26-1460809</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>CORPORATE CARE OF THE SIOUX EMPIRE</td>
<td>46-3260654</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>CORPORATION FOR PUBLIC BROADCASTING</td>
<td>13-3602322</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>CORPORATION FOR SUPPORTIVE HOUSING</td>
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<td>69,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>CORPORATION OF GONZAGA UNIVERSITY</td>
<td>91-0236600</td>
<td>501 (C) 3</td>
<td>13,500.</td>
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<td>2</td>
<td>CORPORATION OF HAVERFORD COLLEGE</td>
<td>23-6002304</td>
<td>501 (C) 3</td>
<td>314,950.</td>
<td>FMV</td>
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<td>3</td>
<td>CORPORATION OF ST TIMOTHYS SCHOOL</td>
<td>52-0591488</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>CORPORATION OF THE CATH ARCHBISHOP OF ANCHO</td>
<td>92-0033244</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>CORPORATION OF THE FINE ARTS MUSEUMS</td>
<td>94-3045948</td>
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<td>21,600.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>CORPUS CHRISTI CATHOLIC SCHOOL</td>
<td>38-3391622</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>CORPUS CHRISTI CHURCH</td>
<td>35-1089895</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>CORPUS CHRISTI FOUNDATION OF HOLLAND ZEALAN</td>
<td>38-3473661</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>CORPUS CHRISTI ROMAN CATHOLIC PARISH PHOENI</td>
<td>36-4644288</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>CORTE MADELA LARKSPUR FOUNDATION</td>
<td>94-2934350</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CORTLAND COLLEGE FOUNDATION INC</td>
<td>16-0979814</td>
<td>501 (C) 3</td>
<td>9,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| CORTLAND MEMORIAL FOUNDATION IND C O CORTLAND  
134 HOMER AVE CORTLAND, NY 13045 | 22-2230692 | 501 (C) 3 | 14,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| CORVALLIS CLINIC FOUNDATION INC  
444 NW ELKS DR CORVALLIS, OR 97330 | 93-6021898 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COTA CHILDREN'S ORGAN TRANSPLANT ASSOCIATION  
2501 W COTA DR BLOOMINGTON, IN 47403 | 35-1674365 | 501 (C) 3 | 12,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COTOCHESET HISTORIC PRESERVATION TRUST INC  
107 SEA VIEW AVE OSTERVILLE, MA 2655 | 61-1563684 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COTTEY COLLEGE  
1000 W AUSTIN BLVD NEVADA, MO 64772 | 44-0545271 | 501 (C) 3 | 6,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COTTING SCHOOL INC  
453 CONCORD AVE LEXINGTON, MA 2421 | 04-2104328 | 501 (C) 3 | 17,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COTTONWOOD GULCH EXPEDITIONS  
9223 4TH ST NW ALBUQUERQUE, NM 87114 | 43-6005587 | 501 (C) 3 | 12,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COULEE REGION HUMAN SOCIETY INC  
911 CRITTER CT ONALASKA, WI 54650 | 23-7366713 | 501 (C) 3 | 110,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COUNCIL FOR A STRONG AMERICA  
1212 NEW YORK AVE NW WASHINGTON, DC 20005 | 13-3840271 | 501 (C) 3 | 77,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COUNCIL FOR ECONOMIC EDUCATION  
122 E 42ND ST RM 1012 NEW YORK, NY 10168 | 13-1623848 | 501 (C) 3 | 30,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COUNCIL FOR LIFE  
4516 LOVERS LN PMB 103 DALLAS, TX 75225 | 05-0532415 | 501 (C) 3 | 16,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| COUNCIL FOR RELATIONSHIPS INC  
4025 CHESTNUT ST FL 1 PHILADELPHIA, PA 1910 | 23-6297362 | 501 (C) 3 | 165,500 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) COUNCIL FOR THE HOMELESS 2500 MAIN ST VANCOUVER, WA 98660 91-2001828 501 (c) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) COUNCIL OF PEOPLES ORGANIZATION 1081 CONEY ISLAND AVE BROOKLYN, NY 11230 75-3046891 501 (c) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(3) COUNCIL ON AGING OF CENTRAL OREGON 373 NE GREENWOOD AVE BEND, OR 97701 93-0661229 501 (c) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(4) COUNCIL ON ALCOHOLISM &amp; DRUG ABUSE 232 E CANON PERDIDO ST SANTA BARBARA, CA 93 95-1878858 501 (c) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) COUNCIL ON AMERICAN-ISLAMIC RELATIONS - OHIO 4242 TULLER RD STE B20 DUBLIN, OH 43017 31-1602287 501 (c) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
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<tr>
<td>(6) COUNCIL ON FOREIGN RELATIONS INC 58 E 68TH ST NEW YORK, NY 10065 13-1628166 501 (c) 3 353,850. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) COUNCIL ON TECHNOLOGY &amp; SOCIETY 2518 CRIST ST ALAMEDA, CA 94501 82-2960906 501 (c) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(8) COUNT BASIE THEATRE INC 99 MONMOUTH ST RED BANK, NJ 7701 22-1950890 501 (c) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) COUNTRY CLUB CHRISTIAN CHURCH 6101 WARD FWY KANSAS CITY, MO 64113 44-0545987 501 (c) 3 34,873. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>(10) COUNTRY DAY SCHOOL OF THE SACRED HEART INC 9101 ROCKVILLE PIKE BETHESDA, MD 20814 53-0196582 501 (c) 3 35,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(11) COUNTY OF FAUQUIER ATTN: ERIN KOZANECKI 10 HOTEL STREET WARREN 54-6001274 501 (c) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
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<tr>
<td>(12) COUNTY OF SCOTLAND PO BOX 489 LAURINBURG, NC 28353-0489 56-6000339 501 (c) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA

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18674H 1467 V 20-7.21

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for the latest information.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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1. (a) Name and address of organization or government  
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   (c) IRC section (if applicable)  
   (d) Amount of cash grant  
   (e) Amount of non-cash assistance  
   (f) Method of valuation (book, FMV, appraisal, other)  
   (g) Description of noncash assistance  
   (h) Purpose of grant or assistance

<table>
<thead>
<tr>
<th>No.</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>COUNTY THEATER INC 91 E COURT ST DOYLESTOWN, PA 18901</td>
<td>23-2230422</td>
<td>501 (C) 3</td>
<td>13,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>COURAGE INTERNATIONAL INC. 6450 MAIN STREET TRUMBULL, CT 6611</td>
<td>80-0615570</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>COURAGE KENNY FOUNDATION PO BOX 43 MINNEAPOLIS, MN 55440</td>
<td>41-1952989</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>COURT APPOINTED ADVOCATES FOR CHILDREN INC PO BOX 2107 COLUMBUS, IN 47202</td>
<td>35-1766564</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>COURT APPOINTED SPECIAL ADVOCATE 1505 E 17TH ST STE 214 SANTA ANA, CA 92705</td>
<td>33-0069334</td>
<td>501 (C) 3</td>
<td>75,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>COURT APPOINTED SPECIAL ADVOCATE OF HUMBOLD 2356 MYRTLE AVE EUREKA, CA 95501</td>
<td>68-0243040</td>
<td>501 (C) 3</td>
<td>8,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>COURT APPOINTED SPECIAL ADVOCATES CASA 10000 EMMETT F LOWRY EXPY STE 40 TEXAS CITY</td>
<td>46-4535359</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>COURT APPOINTED SPECIAL ADVOCATES INC 48 WALL ST STE 1100 NEW YORK, NY 10005</td>
<td>13-3172387</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>COURT APPOINTED SPECIAL ADVOCATES OF MERCER 1450 PARKSIDE AVE Ewing, NJ 8638</td>
<td>22-3770968</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>COURT APPOINTED SPECIAL ADVOCATES OF MORRIS 18 CATTANO AVE MORRISTOWN, NJ 7960</td>
<td>22-3123157</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>COURT APPOINTED SPECIAL ADVOCATES OF NEW JE 77 CHURCH ST NEW BRUNSWICK, NJ 8901</td>
<td>22-3679194</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>COURT APPOINTED SPECIAL ADVOCATES OF SANTA 2125 S BROADWAY STE 106 SANTA MARIA, CA 934</td>
<td>33-0662734</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ............................ Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>COURT APPOINTED SPECIAL ADVOCATES OF UNION</td>
<td>1143 E JERSEY ST SUITE 45 ELIZABETH, NJ 720</td>
<td>20-2603930</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COURT APPOINTED SPECIAL ADVOCATES PROGRAM I</td>
<td>2151 SALVIO ST STE 295 CONCORD, CA 94520</td>
<td>94-2897531</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COURT SPORTS FOR LIFE FOUNDATION</td>
<td>12030 SMYS LVL DR STE 450 RESTON, VA 20191</td>
<td>84-3550018</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CIV INC</td>
<td>4183 FRANKLIN RD STE B1 MURFREESBORO, TN 37</td>
<td>32-0582177</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COVE SCHOOL INC</td>
<td>350 LEE RD NORTHBROOK, IL 60062</td>
<td>39-0930993</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COVE UNITED METHODIST CHURCH</td>
<td>366 OLD HIGHWAY 431 OWENS CROSS ROADS, AL 3</td>
<td>63-1186620</td>
<td>501 (C) 3</td>
<td>11,808.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>COVENANT CHILDREN CENTER</td>
<td>670 E MEADOW DR PALO ALTO, CA 94306</td>
<td>80-0856991</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT CHRISTIAN REFORMED CHURCH OF APPLE</td>
<td>1601 S COVENANT LN APPLETON, WI 54915</td>
<td>39-1345569</td>
<td>501 (C) 3</td>
<td>38,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT CHURCH</td>
<td>211 KNOX DR WEST LAFAYETTE, IN 47906</td>
<td>35-6007432</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT CHURCH OF NAPLES</td>
<td>6926 TRAIL BLVD NAPLES, FL 34108</td>
<td>59-1098689</td>
<td>501 (C) 3</td>
<td>630,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT COLLEGE INC</td>
<td>14049 SCENIC HWY LOOKOUT MOUNTAIN, GA 30750</td>
<td>43-0719506</td>
<td>501 (C) 3</td>
<td>27,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT COMMUNITY CHURCH</td>
<td>2250 S YUKON PKW YUKON, OK 73099</td>
<td>73-1097718</td>
<td>501 (C) 3</td>
<td>15,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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Schedule I (Form 990) 2020

JSA

OE1288 1.000

18674H 1467

V 20-7.21
## SCHEDULE I
(Form 990)

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>COVENANT DAY SCHOOL INC 201 COVENANT CHURCH LN MATTHEWS, NC 28105 56-1656570 501 (c) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT HOUSE 5 PENN PLAZA NEW YORK, NY 10001 13-2725416 501 (c) 3 594,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT HOUSE CALIFORNIA 1325 N WESTERN AVE LOS ANGELES, CA 90027 13-3391210 501 (c) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>COVENANT HOUSE FLORIDA INC 733 BREAKERS AVE FORT LAUDERDALE, FL 33304 59-2323607 501 (c) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
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<tr>
<td>COVENANT HOUSE NEW JERSEY INC 330 WASHINGTON ST NEWARK, NJ 7102 13-3537710 501 (c) 3 138,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>COVENANT HOUSE NEW ORLEANS 611 N RAMPART ST NEW ORLEANS, LA 70112 58-1669937 501 (c) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>COVENANT HOUSE TEXAS 1111 LOVETT BLVD HOUSTON, TX 77006 76-0050882 501 (c) 3 29,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>COVENANT KNIGHTS SCHOOL 7300 VALLEY VIEW LN DALLAS, TX 75240 75-2642656 501 (c) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>COVENANT LIFE PRESBYTERIAN CHURCH 8490 MCINTOSH RD SARASOTA, FL 34238 59-2307463 501 (c) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT LIVING COMMUNITIES AND SERVICES 5700 OLD ORCHARD RD STE 100 SROKIE, IL 6007 36-3478388 501 (c) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVENANT PATHWAYS PO BOX 455 VANDERWAAGN, MN 87326 47-3515588 501 (c) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ❋ Yes ❋ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1 COVENANT PREPARATORY SCHOOL INC 135 BROAD ST HARTFORD, CT 6105 74-3238578 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2 COVENANT PRESBYTERIAN CHURCH 1831 DEVERLE ROAD SOUTHWEST ROANOKE, TN 383</td>
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<tr>
<td>3 COVENANT PRESBYTERIAN CHURCH 65 OLD MONTGOMERY HWY BIRMINGHAM, WI 53705</td>
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<td>4 COVENANT PRESBYTERIAN CHURCH PO BOX 10385 JACKSON, AL 35209</td>
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<td>6 COVENANT PRESBYTERIAN CHURCH AT LITTLE ROCK 1 COVENANT DR LITTLE ROCK, AR 72211</td>
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<td>7 COVENANT PRESBYTERIAN CHURCH OF ISSAQUAH 22116 SE 51ST PL ISSAQUAH, WA 98029</td>
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<tr>
<td>8 COVENANT PRESBYTERIAN CHURCH, INC. 1000 E MOREHEAD ST CHARLOTTE, NC 28204</td>
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<td>9 COVENANT REFORMED EPISCOPAL CHAPEL 127 W OAK ST BASKING RIDGE, NJ 7920</td>
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<td>10 COVENANT RETIREMENT COMMUNITIES WEST 2550 TREASURE DR SANTA BARBARA, CA 93105</td>
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<tr>
<td>11 COVENANT UNITED METHODIST CHURCH 4336 KING SPRINGS RD SE SYRMYA, GA 30082</td>
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<td>12 COVENANT UNITED METHODIST CHURCH 8555 CREEKISE GREEN DR SPRING, TX 77389</td>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization                    Employer identification number
VANGUARD CHARITABLE ENDOWMENT PROGRAM       23-2888152

Part I  General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVENANT UNITED PRESBYTERIAN CHURCH 400 LANCASTER AVE MALVERN, PA 19355</td>
<td>23-2008020</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVER HOME REPAIR INC 158 S MAIN ST WHITE RIVER JUNCTION, VT 5001</td>
<td>20-4597157</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COVID RELIEF FUND PO BOX 1339 FORT LAUDERDALE, FL 33302</td>
<td>84-5173130</td>
<td>501 (C) 3</td>
<td>130,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>COMICHE CANYON CONSERVANCY PO BOX 877 YAKIMA, WA 98907</td>
<td>91-1312184</td>
<td>501 (C) 3</td>
<td>100,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>COX EMPLOYEE RELIEF FUND INC 6205 PEACHTREE DUNWOODY RD ATLANTA, GA 30322</td>
<td>20-3401306</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>COXHEALTH 1423 N JEFFERSON AVE SPRINGFIELD, MO 65802</td>
<td>47-1087427</td>
<td>501 (C) 3</td>
<td>253,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COYOTE CENTRAL 2300 E CHERRY ST SEATTLE, WA 98122</td>
<td>91-1444797</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>COZY CAT COTTAGE 10344 SAWMILL RD POWELL, OH 43065</td>
<td>31-1622554</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CRADLE FOUNDATION 2049 RIDGE AVE EVANSTON, IL 60201</td>
<td>45-0506764</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CRADLES TO CRAYONS INC 281 NEWTONVILLE AVE NEWTONVILLE, MA 2460</td>
<td>04-3584367</td>
<td>501 (C) 3</td>
<td>68,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CRAIG HOSPITAL FOUNDATION 3425 S CLARKSON ST ENGLEWOOD, CO 80113</td>
<td>23-7352287</td>
<td>501 (C) 3</td>
<td>46,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>CRANBROOK EDUCATIONAL COMMUNITY 39221 WOODWARD AVE BLOOMFIELD HILLS, MI 483</td>
<td>38-2015048</td>
<td>501 (C) 3</td>
<td>37,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020

JSA 0E1288 1.000
18674H 1467 V 20-7.21
Part I | General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [YES/NO]
   
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------|--------|--------------------------------|-------------------------|-------------------------------|---------------------------------|---------------------------------|---------------------------------
| CRANE SCHOOL 1795 SAN LEANDRO LN SANTA BARBARA, CA 93108 | 95-1643315 | 501 (C) 3 | 47,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRATERIAN PERFORMANCES COMPANY 23 S CENTRAL AVE MEDFORD, OR 97501 | 94-3137852 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRAWFORD AVE BAPTIST CHURCH 507 CRAWFORD AVE AUGUSTA, GA 30904 | 58-0684091 | 501 (C) 3 | 45,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRAWFORD STEWARDSHIP PROJECT LTD PO BOX 284 GAYS MILLS, WI 54631 | 26-1210395 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRAYONS TO CLASSROOMS 1750 WOODMAN DR DAYTON, OH 45420 | 26-1594574 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRAYONS TO COMPUTERS INC 1350 TENNESSEE AVE CINCINNATI, OH 45229 | 31-1507076 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CRAZY HORSE MEMORIAL FOUNDATION 12151 AVENUE OF THE CHIEFS CRAZY HORSE, SD | 46-0220678 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CREATIVE ACTION 1023 SPRINGDALE RD BLDG3 AUSTIN, TX 78721 | 74-2856925 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CREATIVE ARTS WORKSHOP INC 80 AUDUBON ST NEW HAVEN, CT 6510 | 06-6067336 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CREATIVE CAPITAL FOUNDATION 15 MAIDEN LN NEW YORK, NY 10038 | 31-1605982 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CREATIVE CENTER OF LOS ALTOS 327 FREMONT AVE LOS ALTOS, CA 94024 | 94-1527492 | 501 (C) 3 | 40,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| CREATIVE CENTER OF NORTH CAROLINA INC 4820 BETHANIA STATION RD WINSTON SALEM, NC | 84-2683881 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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(1) CREATIVE CHICAGO REUSE EXCHANGE
5530 S SHORE DR APT 15B CHICAGO, IL 60637 47-4679301 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM

(2) CREATIVE COMMONS CORPORATION
211 HOPE ST UNIT 1866 MOUNTAIN VIEW, CA 940 06-3585301 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM

(3) CREATIVE GROWTH INC
355 24TH ST OAKLAND, CA 94612 23-7319028 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM

(4) CREATIVE MINDS NYC INC
35 W 35TH ST RM 701 NEW YORK, NY 10001 02-0720786 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM

(5) CREATIVE PORTLAND CORPORATION
PO BOX 4675 PORTLAND, ME 4112 27-0843775 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM

(6) CREATIVE VISIONS FOUNDATION
18820 PACIFIC COAST HWY STE 201 MALIBU, CA 39-1902814 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM

(7) CREATIVITY EXPLORED
3245 16TH ST SAN FRANCISCO, CA 94103 96-2801050 501 (C) 3 29,500. FMV N/A FOR RECIPIENT'S EXEM

(8) CREEKWOOD CHRISTIAN CHURCH
2660 FOREST VISTA DR FLOWER MOUND, TX 75028 75-2463435 501 (C) 3 16,800. FMV N/A FOR RECIPIENT'S EXEM

(9) CREFIELD SCHOOL
8836 CREFELD ST PHILADELPHIA, PA 19118 23-1726313 501 (C) 3 25,500. FMV N/A FOR RECIPIENT'S EXEM

(10) CROOKTON PREPARATORY SCHOOL
7400 WESTERN AVE OMAHA, NE 68114 47-0438012 501 (C) 3 50,220. FMV N/A FOR RECIPIENT'S EXEM

(11) CROOKTON UNIVERSITY
2500 CALIFORNIA PLZ OMAHA, NE 68178 47-0376583 501 (C) 3 44,650. FMV N/A FOR RECIPIENT'S EXEM

(12) CRESCENT COVE
3440 BELT LINE BLVD STE 207 MINNEAPOLIS, MN 27-1035515 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM

2  Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3  Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Part I** General Information on Grants and Assistance

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   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>CRESTON CHRISTIAN REFORMED CHURCH</td>
<td>38-1358178</td>
<td>501 (C) 3</td>
<td>15,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>CRESTWOOD UNITED METHODIST CHURCH</td>
<td>61-0525162</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CRIME STOPPERS OF HOUSTON INC</td>
<td>74-2137744</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>CRISPUS ATTUCKS ASSOCIATION OF YORK PENNSYLVANIA</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>11 E ADAMS ST STE 800 CHICAGO, IL 60603</td>
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<td>(3) CRISTO REY PHILADELPHIA HIGH SCHOOL</td>
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<td>(7) CROHNS &amp; COLITIS FOUNDATION INC</td>
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<td>(9) CROSS AND CROWN LUTHERAN CHURCH</td>
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<td>1008 N MCKINLEY AVE OKLAHOMA CITY, OK 73106</td>
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<td>600 SW 3RD ST STE 2201 POMPANO BEACH, FL 33</td>
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<td>1709 JOHNSON ROAD SPRINGDALE, AR 72762</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..............................................

3 Enter total number of other organizations listed in the line 1 table .................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>CROSS CREEK CHURCH PCA</td>
<td>26-4126634</td>
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<tr>
<td>CROSS INTERNATIONAL INC</td>
<td>14600 N PORTLAND AVE OKLAHOMA CITY, OK 7313</td>
<td>73-6082499</td>
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<td>42,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
# SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
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<td>501 (C) 3</td>
<td>8,000. FMV</td>
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<td>2</td>
<td>CROSS-OVER MINISTRY INC</td>
<td>54-1371067</td>
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<td>24,000. FMV</td>
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<td>501 (C) 3</td>
<td>150,000. FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
<td></td>
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<tr>
<td>7</td>
<td>CROSSROADS ACADEMY</td>
<td>02-0451454</td>
<td>501 (C) 3</td>
<td>110,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
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</tr>
<tr>
<td>8</td>
<td>CROSSROADS AT BIG CREEK INC</td>
<td>05-0560158</td>
<td>501 (C) 3</td>
<td>6,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>9</td>
<td>CROSSROADS BAPTIST CHURCH</td>
<td>74-1948443</td>
<td>501 (C) 3</td>
<td>22,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>10</td>
<td>CROSSROADS BAPTIST CHURCH</td>
<td>76-0410355</td>
<td>501 (C) 3</td>
<td>9,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>11</td>
<td>CROSSROADS BIBLE CHURCH</td>
<td>91-0897868</td>
<td>501 (C) 3</td>
<td>20,100. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
<td></td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>CROSSROADS COMMUNITY CHURCH</td>
<td>14885 GREENFIELD AVE FISHERS, IN 46037</td>
<td>35-2044151</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS COMMUNITY CHURCH</td>
<td>1N100 GARY AVE CAROL STREAM, WA 98662</td>
<td>36-4433881</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS COMMUNITY CHURCH</td>
<td>4170 E AMITY AVE NAMPA, IL 60188</td>
<td>82-0488001</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS COMMUNITY CHURCH INC</td>
<td>7708 NE 78TH ST VANCOUVER, ID 83687</td>
<td>91-0949794</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS COMMUNITY CHURCH INC</td>
<td>3500 MADISON RD CINCINNATI, OH 45209</td>
<td>31-1442447</td>
<td>501 (C) 3</td>
<td>69,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS COMMUNITY CHURCH OF THE NAZARENE</td>
<td>57415 ALPHA DR GOSHEN, IN 46528</td>
<td>35-0992108</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS FAMILY MINISTRIES</td>
<td>351 FULTON ST SAYRE, PA 18840</td>
<td>16-1047890</td>
<td>501 (C) 3</td>
<td>16,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS FELLOWSHIP</td>
<td>2721 E MILLBROOK RD RALEIGH, NC 27604</td>
<td>56-1615957</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS GOSPEL ASSOCIATION INC</td>
<td>BALBOA-ANCON REPUBLIC OF PANAMA, PA 0</td>
<td>23-7327757</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CROSSROADS PREGNANCY CARE</td>
<td>256 TRUMBAUERSVILLE RD QUAKERTOWN, PA 18951</td>
<td>23-2446917</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS RHODE ISLAND</td>
<td>160 BROAD ST PROVIDENCE, RI 2903</td>
<td>05-0259094</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CROSSROADS SCHOOL</td>
<td>500 DE BALIVIERE AVE SAINT LOUIS, MO 63112</td>
<td>23-7363267</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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</tr>
<tr>
<td>(1)</td>
<td>CROSSROADS SCHOOL FOR ARTS AND SCIENCES 1714 21ST ST SANTA MONICA, CA 90404 23-7120625 501 (C) 3 $91,500. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(2)</td>
<td>CROSSWATER COMMUNITY CHURCH 211 DAVIS PARK RD PONTE VEDRA, FL 32081 501 (C) 3 $25,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(3)</td>
<td>CROSSWATER COMMUNITY CHURCH PO BOX 1751 SULTAN, WA 98294 26-0418345 501 (C) 3 $14,400. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(4)</td>
<td>CROSSWINDS CHURCH 485 OLDE WATERFORD WAY BELVILLE, NC 28451 26-2647814 501 (C) 3 $12,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(5)</td>
<td>CROSSWORLD 10000 N OAK TRFY KANSAS CITY, MO 64155 23-1352564 501 (C) 3 $79,120. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(6)</td>
<td>CROUSE HEALTH FOUNDATION INC 736 IRVING AVE SYRACUSE, NY 13210 16-1035427 501 (C) 3 $50,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(7)</td>
<td>CROW CANYON ARCHAEOLOGICAL CENTER 23390 ROAD K CORTEZ, CO 81321 84-0631786 501 (C) 3 $15,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(8)</td>
<td>CROWCARE FOUNDATION INC PO BOX 1286 DRAFTER, UT 84020 45-5354811 501 (C) 3 $6,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(9)</td>
<td>CROWN CENTER 8350 DELCREST DR SAINT LOUIS, MO 63124 43-1695861 501 (C) 3 $7,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(10)</td>
<td>CROWN FINANCIAL MINISTRIES INC 8351 E WALKER SPRINGS LN STE 40 KNOXVILLE, 58-1260812 501 (C) 3 $6,600. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(11)</td>
<td>CROWS NEST RESEARCH CENTER 6349 GEORGETOWN PIKE MC LEAN, VA 22101 82-2205353 501 (C) 3 $75,000. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(12)</td>
<td>CROZET UNITED METHODIST CHURCH PO BOX 70 CROZET, VA 22932 54-1073317 501 (C) 3 $9,600. FMV N/A FOR RECIPIENT’S EXEM</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3 Enter total number of other organizations listed in the line 1 table.

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**SCHEDULE I**  
(Form 990)  
Grant and Other Assistance to Organizations, Governments, and Individuals in the United States  
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**Part I** General Information on Grants and Assistance

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<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
<td>X Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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</table>
| 1 | CRUMS UNITED METHODIST CHURCH  
2832 CRUMS CHURCH ROAD BERRYVILLE, VA 22611 | 54-6044637 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | CRY4HUMANITY INC  
3832 JACINTO DR SAINT LOUIS, MO 63125 | 38-4067071 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | CRY-CHILD RIGHTS AND YOU AMERICA INC  
639 GRANITE ST BRAINERS, MA 2184 | 02-0659244 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | CRYSTAL BRIDGES MUSEUM OF AMERICAN ART INC  
600 MUSEUM WAY BENTONVILLE, AR 72712 | 20-1359710 | 501 (C) 3 | 27,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | CRYSTAL LAKE FOOD PANTRY INC  
PO BOX 1071 CRYSTAL LAKE, IL 60039 | 36-3242915 | 501 (C) 3 | 19,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | CRYSTAL SPRINGS UPLANDS SCHOOL  
400 UPLANDS DR HILLSBOROUGH, CA 94010 | 94-1247265 | 501 (C) 3 | 122,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | CSULB 49ER FOUNDATION  
6300 E STATE UNIVERSITY DR LONG BEACH, CA 9 | 45-2163910 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | CTC ACADEMY INC  
29-01 BERKSHIRE RD FAIR LAWN, NJ 7410 | 22-1508549 | 501 (C) 3 | 100,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | CU CHRISTIAN CHURCH  
107 S WEBBER ST URBANA, IL 61802 | 82-1432611 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | CUES FUND  
2207 WIRT ST OMAHA, NE 68110 | 47-0818922 | 501 (C) 3 | 9,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | CUFI CHURCH ASSOCIATION  
18410 SONTERRA PL STE 100 SAN ANTONIO, TX 7 | 20-4413244 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | CULINARY INSTITUTE OF AMERICA  
1946 CAMPUS DR HYDE PARK, NY 12538 | 06-0653264 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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<tr>
<td><strong>(1) CULTIVATE CULINARY SCHOOL AND CATERING INC</strong></td>
<td>4845 3B RD BREMEN, IN 46506</td>
<td>81-3306113</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>(2) CULTURAL HERITAGE RESEARCH INC</strong></td>
<td>292 NEWBURY ST BOSTON, MA 2115</td>
<td>83-4568531</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(3) CULTURE FOR ONE INC</strong></td>
<td>110 E 42ND ST RM 1818 NEW YORK, NY 10017</td>
<td>46-2137020</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>(4) CULTURE PUSH INC</strong></td>
<td>241 E 7TH ST NEW YORK, NY 10009</td>
<td>26-3250931</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(5) CULTURE SHOCK DANCE TROUPE INC</strong></td>
<td>2110 HANCOCK ST STE 200 SAN DIEGO, CA 92110</td>
<td>33-0682422</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(6) CULTURETRUST GREATER PHILADELPHIA</strong></td>
<td>1315 WALNUT ST STE 320 PHILADELPHIA, PA 191</td>
<td>46-3109411</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(7) CULVER EDUCATIONAL FOUNDATION</strong></td>
<td>1300 ACADEMY ROAD NO 159 CULVER, IN 46511</td>
<td>35-0868071</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(8) CULVER PALMS MEALS ON WHEELS</strong></td>
<td>4427 OVERLAND AVE CULVER CITY, CA 90230</td>
<td>85-2891033</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(9) CUMBERLAND ACADEMY OF GEORGIA INC</strong></td>
<td>650 MT VERNON HWY NE ATLANTA, GA 30328</td>
<td>71-1043712</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(10) CUMBERLAND COUNTY BOARD OF EDUCATION</strong></td>
<td>368 FOURTH STREET CROSSVILLE, TN 38555</td>
<td>62-6000551</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(11) CUPERTINO CHURCH OF THE NAZARENE</strong></td>
<td>20900 MCCLELLAN RD CUPERTINO, CA 95014</td>
<td>23-7198173</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td><strong>(12) CURATORS OF THE UNIVERSITY OF MISSOURI</strong></td>
<td>1000 W HIFONG BLDG 7 SUITE 300 COLUMBIA, MO</td>
<td>43-6003859</td>
<td>501 (C) 3</td>
<td>633,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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(Form 990)

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<td>1</td>
<td>CURATORS OF THE UNIVERSITY OF MISSOURI SPEC</td>
<td>26-6440629</td>
<td>501 (C) 3</td>
<td>1,017,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CURE CHILDHOOD CANCER INC</td>
<td>58-1244138</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CURE INTERNATIONAL INC</td>
<td>58-2248383</td>
<td>501 (C) 3</td>
<td>42,994.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CURE VIOLENCE GLOBAL</td>
<td>82-3471223</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>CURIEPSP INC</td>
<td>52-1704978</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>CURIODYSSEY</td>
<td>94-1262434</td>
<td>501 (C) 3</td>
<td>560,225.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>CURIOUS LEARNING A GLOBAL LITERACY PROJECT</td>
<td>47-1892766</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8</td>
<td>CURRENT A CHRISTIAN CHURCH</td>
<td>76-0344951</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9</td>
<td>CURRIER MUSEUM OF ART</td>
<td>02-0223322</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>CURRY COLLEGE</td>
<td>04-2199867</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>CURTIS INSTITUTE OF MUSIC</td>
<td>23-1585611</td>
<td>501 (C) 3</td>
<td>52,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>CURTIS SCHOOL FOUNDATION</td>
<td>51-0188298</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3 Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>CUSTOM COLLABORATIVE</td>
<td>102 BRADHURST AVE APT 908 NEW YORK, NY 1003</td>
<td>47-5036606</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CUTANEOUS LYMPHOMA FOUNDATION INC</td>
<td>PO BOX 374 BIRMINGHAM, AL 35203</td>
<td>38-3443113</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CUTTING BALL THEATER</td>
<td>141 TAILOR ST SAN FRANCISCO, CA 94102</td>
<td>20-5270275</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CUYAHOGA COMMUNITY COLLEGE FOUNDATION</td>
<td>700 CARNEGIE AVE CLEVELAND, OH 44115</td>
<td>23-7320719</td>
<td>501 (c) 3</td>
<td>201,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CUYAHOGA COUNTY PUBLIC LIBRARY FOUNDATION</td>
<td>2111 SNOW RD CLEVELAND, OH 44134</td>
<td>26-0042432</td>
<td>501 (c) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CUYAHOGA VALLEY CHRISTIAN ACADEMY</td>
<td>4687 WYOGA LAKE RD STOW, OH 44224</td>
<td>34-1027005</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CWC ALLIANCE INC</td>
<td>3376 PEACHTREE RD NE UNIT 45B ATLANTA, GA 30324</td>
<td>83-2758024</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>CYBER SIKH ORGANIZATION</td>
<td>23800 VIA DEL RIO YORBA LINDA, CA 92887</td>
<td>85-4813739</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CYCLE KIDS INC</td>
<td>955 MASSACHUSETTS AVE STE 322 CAMBRIDGE, MA 02139</td>
<td>20-1169399</td>
<td>501 (c) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CY-HOPE INC</td>
<td>12715 TELEGE RD CYPRESS, TX 77429</td>
<td>45-2346150</td>
<td>501 (c) 3</td>
<td>102,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CYPRESS COMMUNITY ASSISTANCE MINISTRIES</td>
<td>11202 HUFFMEISTER RD HOUSTON, TX 77065</td>
<td>76-0313478</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>CYPRESS COVE AT HEALTHPARK FLORIDA INC</td>
<td>10200 CYPRESS COVE DR FORT MYERS, FL 33908</td>
<td>65-0610085</td>
<td>501 (c) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [x]  
   - No 

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CYPRESS WOODLANDS JUNIOR FORUM</td>
<td>14015 PARK DR STE 206 TOMBALL, TX 77377</td>
<td>76-0037858</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>CYSTIC FIBROSIS FOUNDATION</td>
<td>4550 MONTGOMERY AVE BETHESDA, MD 20814</td>
<td>13-1930701</td>
<td>501 (C) 3</td>
<td>106,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>CYSTIC FIBROSIS RESEARCH FUND</td>
<td>100 SAINT GEORGES RD UNIT G1 ARDMORE, PA 19</td>
<td>45-3768161</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>CYSTINOSIS RESEARCH FOUNDATION</td>
<td>19200 VON KARMAN AVE IRVINE, CA 92612</td>
<td>32-0067668</td>
<td>501 (C) 3</td>
<td>251,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>D &amp; R GREENWAY LAND TRUST INC</td>
<td>1 PRESERVATION PL PRINCETON, NJ 8540</td>
<td>22-3035836</td>
<td>501 (C) 3</td>
<td>9,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>D A BLODGETT- ST JOHNS</td>
<td>805 LEONARDO ST NE GRAND RAPIDS, MI 49503</td>
<td>38-1358163</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>D M STEARNS MISSIONARY FUND</td>
<td>501 N WALES RD NORTH WALES, PA 19454</td>
<td>23-135973</td>
<td>501 (C) 3</td>
<td>541,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>D39C COLLABORATIVE</td>
<td>17050 DEL SUR RIDGE RD SAN DIEGO, CA 92127</td>
<td>47-2102844</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>DAILY AUDIO BIBLE</td>
<td>PO BOX 1996 SPRING HILL, TN 37174</td>
<td>27-0868610</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>DAILY BREAD - AN ECUMENICAL FOOD PANTRY INC</td>
<td>25 WEST ST DANBURY, CT 6810</td>
<td>06-1152682</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>DAILY BREAD INC</td>
<td>815 E FEE AVE MELBOURNE, FL 32901</td>
<td>59-2846212</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>DAILY BREAD SOUP KITCHEN INC</td>
<td>PO BOX 648 CHAMPAIGN, IL 61824</td>
<td>27-0935172</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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

**Schedule I (Form 990) 2020**
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAILY PRAYER MINISTRIES INC</td>
<td>61-1719346</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>DAIRY CENTER FOR THE ARTS</td>
<td>84-1149609</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>DAKOTA STATE UNIVERSITY FOUNDATION</td>
<td>23-7299995</td>
<td>501 (C) 3</td>
<td>97,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>DALAI LAMA CENTER FOR ETHICS AND TRANSFORMATION</td>
<td>27-0819710</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>DALIT SOLIDARITY</td>
<td>25-1865082</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DALLAS 24 HOUR CLUB INC</td>
<td>75-2231077</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DALLAS ARBORETUM &amp; BOTANICAL</td>
<td>23-7375815</td>
<td>501 (C) 3</td>
<td>10,380.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DALLAS AREA HABITAT FOR HUMANITY INC</td>
<td>75-2097161</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DALLAS BAPTIST UNIVERSITY</td>
<td>75-6001300</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>DALLAS BIBLE CHURCH</td>
<td>75-2260198</td>
<td>501 (C) 3</td>
<td>11,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DALLAS CASA</td>
<td>75-2890371</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>DALLAS FOUNDATION A TX NONPROFIT CORPORATION</td>
<td>8617 GARLAND RD DALLAS, TX 75218</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2020
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>1 (b) EIN</th>
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<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) DALLAS HOLOCAUST MUSEUM 300 N HOUSTON ST DALLAS, TX 75202 75-2113723 501 (C) 3 61,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DALLAS MUSEUM OF ART 1717 N HARMWOOD ST DALLAS, TX 75201 75-0808774 501 (C) 3 21,040. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(3) DALLAS OPERA 2403 FLORA ST STE 500 DALLAS, TX 75201 75-6004746 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) DALLAS SYMPHONY ASSOCIATION INC 2301 FLORA ST STE 300 DALLAS, TX 75201 75-0705442 501 (C) 3 29,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) DALLAS THEATER CENTER 2400 FLORA STREET DALLAS, TX 75201 75-0959992 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) DALLAS THEOLOGICAL SEMINARY 3909 SWISS AVE DALLAS, TX 75204 75-0827421 501 (C) 3 47,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>(7) DALLAS ZOOLOGICAL SOCIETY 650 S R L THORNTON FWY DALLAS, TX 75203 75-0964982 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(8) DALTON SCHOOLS INC 108 E 89TH ST NEW YORK, NY 10128 13-2751872 501 (C) 3 592,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) DANA HALL SCHOOLS PO BOX 9010 BELLEFONTE, PA 16824 04-2103562 501 (C) 3 193,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<td>(10) DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVE # BP418 BOSTON, MA 2215 04-2263040 501 (C) 3 946,397. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) DANBURY HOSPITAL &amp; NEW MILFORD HOSPITAL FOUN 24 HOSPITAL AVE DANBURY, CT 6810 23-7425557 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(12) DANCE NEW ENGLAND INC 29 DAMON RD MEDFORD, MA 2155 46-2662624 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  .................................................................................................................................................... Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>DANCE THEATRE OF HARLEM INC</td>
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<td>31,750.</td>
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<td>DARE TO CARE INC</td>
<td>23-7345952</td>
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<td>99,600.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................

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

Schedule I (Form 990) 2020
## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) DARIEN ATHLETIC FOUNDATION INC</td>
<td>46-1788767</td>
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<td>(2) DARIEN COMMUNITY ASSOCIATION INC</td>
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<td>FMV</td>
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<tr>
<td>(3) DARIEN EMS POST 53 INC</td>
<td>06-1625224</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(4) DARIEN LIBRARY INC</td>
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<td>(5) DARKHEI NOAM</td>
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<td>(6) DARLINGTON SCHOOL</td>
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<td>(7) DARROW SCHOOL</td>
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<td>FMV</td>
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<td>(8) DARTMOUTH NATURAL RESOURCES TRUST</td>
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<td>(11) DASRA</td>
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<td>(12) DASVANDH NETWORK</td>
<td>27-2077232</td>
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<td>16,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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   - Yes □ No ☑

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) DAUGHTERS OF CARMEL - CONGREGATION OF PUTRI</td>
<td>320 MIDDLEFIELD RD MENLO PARK, CA 94025</td>
<td>27-1486170</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) DAUGHTERS OF SARAH JEWISH FOUNDATION INC</td>
<td>180 WASHINGTON AVENUE EXT ALBANY, NY 12203</td>
<td>14-1344803</td>
<td>501 (C) 3</td>
<td>5,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) DAUGHTERS OF THE SACRED HEART</td>
<td>7621 CORTLAND AVE DALLAS, TX 75235</td>
<td>52-2422689</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) DAVAR PARTNERS INTERNATIONAL</td>
<td>6300 BRIDGE POINT PKWY AUSTIN, TX 78730</td>
<td>27-0642468</td>
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<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(5) DAVE THOMAS FOUNDATION FOR ADOPTION</td>
<td>4900 TUTTLE CROSSING BLVD DUBLIN, OH 43016</td>
<td>31-1356151</td>
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<td>(6) DAVID HOROWITZ FREEDOM CENTER</td>
<td>14724 VENTURA BLVD STE 820 SHERMAN OAKS, CA 91403</td>
<td>95-4194642</td>
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<td>(7) DAVID LAWRENCE MENTAL HEALTH CENTER INC</td>
<td>6075 BATHEY LN NAPLES, FL 34116</td>
<td>59-2206025</td>
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<td>FMV</td>
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<td>(8) DAVID LYNCH FOUNDATION FOR CONSCIOUSNESS-BA</td>
<td>128 EAST 45TH STREET 15TH FLOOR NEW YORK, N Y 10017</td>
<td>83-0436453</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>(9) DAVID NICKLAS ORGAN DONOR AWARENESS FOUNDATION</td>
<td>2935 S BELT LINE RD GRAND PRAIRIE, TX 75052</td>
<td>75-2596046</td>
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<td>(10) DAVIDSON COLLEGE</td>
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<td>56-0529961</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tr>
<td>800 SOUTHWOOD BLVD STE 204 INCLINE VILLAGE,</td>
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<td>(5) DAVIS MEMORIAL FUND INC</td>
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<td>25 LAWRENCE AVE LAWRENCE, NY 11559</td>
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<td>(9) DAWSON COVENANT CHURCH DAWSON MN</td>
<td>23-7168156</td>
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<td>204 2ND AVE # 732 SAN MATEO, CA 94401</td>
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<td>(12) DAY WORKER CENTER OF MOUNTAIN VIEW</td>
<td>20-2874108</td>
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<td>FMV</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ......................................................

Enter total number of other organizations listed in the line 1 table: ......................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ......................................................... [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1. Name and address of organization or government
2. EIN
3. IRC section (if applicable)
4. Amount of cash grant
5. Amount of non-cash assistance
7. Description of noncash assistance
8. Purpose of grant or assistance

<table>
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<tr>
<th>(1) DAYBREAK COMMUNITY CHURCH</th>
<th>(b) EIN</th>
<th>(c) IRC section</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>6515 AMBROSIA LN CARLSBAD, CA 92011</td>
<td>33-0435454</td>
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<td>(3) DAYS END FARM HORSE RESCUE INC</td>
<td>PO BOX 309 LISBON, MD 21765</td>
<td>52-1759077</td>
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<td>(4) DAYS FOR GIRLS INTERNATIONAL</td>
<td>21328 BLUE JAY PL MOUNT VERNON, WA 98274</td>
<td>45-3934671</td>
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<td>FMV</td>
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<td>(5) DAYSPRING BAPTIST CHURCH</td>
<td>1001 MUNICIPAL CENTER DR SAINT LOUIS, MO 63</td>
<td>43-0678828</td>
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<td>21,712.</td>
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<td>(6) DAYSPRING CHRISTIAN ACADEMY</td>
<td>120 COLLEGE AVE MOUNTVILLE, PA 17554</td>
<td>23-2833032</td>
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<td>7,750.</td>
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<td>(7) DAYSTAR LIFE CENTER INC</td>
<td>1055 28TH S ST ST PETERSBURG, FL 33712</td>
<td>65-0523539</td>
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<td>11,000.</td>
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<td>FMV</td>
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<td>(8) DAYTON CHILDRENS HOSPITAL</td>
<td>1 CHILDRENS PLAZA DAYTON, OH 45404</td>
<td>31-0672132</td>
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<td>(9) DAYTON CHILDRENS HOSPITAL FOUNDATION</td>
<td>1 CHILDRENS PLZ DAYTON, OH 45404</td>
<td>31-1045247</td>
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<td>(10) DAYTON EARLY COLLEGE ACADEMY INC</td>
<td>300 COLLEGE PARK AVE DAYTON, OH 45469</td>
<td>26-0463618</td>
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<td>(11) DAYTON FOUNDATION</td>
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<td>31-6027287</td>
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<tr>
<td>(12) DAYTON PERFORMING ARTS ALLIANCE</td>
<td>126 N MAIN ST STE 210 DAYTON, OH 45402</td>
<td>31-6000101</td>
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<td>399,500.</td>
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<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table ..................................................................................
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| (1) | DAYTON VISUAL ARTS CENTER | 118 N JEFFERSON ST DAYTON, OH 45402 | 31-1332017 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | DBT PARTNERSHIP INC | 1015 VANCE NECK RD MIDDLETOWN, DE 19709 | 74-3200362 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | DC BAR PRO BONO CENTER | 501 4TH ST NW WASHINGTON, DC 20001 | 52-1574217 | 501 (C) 3 | 21,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | DC CENTRAL KITCHEN INC | 425 2ND ST NW WASHINGTON, DC 20001 | 52-1584936 | 501 (C) 3 | 114,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | DC KINcare ALLIANCE | 1101 CONNECTICUT AVE NW STE 450 WASHINGTON, DC 20036 | 82-1855402 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | DDC CLINIC FOR SPECIAL NEEDS CHILDREN | 14567 MADISON RD MIDDLETOWN, OH 45042 | 34-1914344 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | DE LA SALLE ACADEMY | 332 W 43RD ST NEW YORK, NY 10036 | 13-3228140 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | DE LA SALLE INC | 1106 N JEFFERSON AVE SAINT LOUIS, MO 63106 | 43-1932840 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | DE LA SALLE INSTITUTE | 4401 REDWOOD RD NAPA, CA 94558 | 94-1156312 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | DE LA SALLE NORTH CATHOLIC HIGH SCHOOL PO BOX 11068 PORTLAND, OR 97211 | 93-1287554 | 501 (C) 3 | 45,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | DE LASALLE INSTITUTE | 3434 S MICHIGAN AVE CHICAGO, IL 60616 | 36-2167047 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | DE NOVO CENTER FOR JUSTICE AND HEALING INC | 1 WEST ST CAMBRIDGE, MA 2139 | 06-2470335 | 501 (C) 3 | 92,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

06.2881.000

18674H 1467 V 20-7.21
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>EIN</th>
<th>IRC section</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>DE PAUL CATHOLIC HIGH SCHOOL INC</td>
<td>45-3656265</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DE TOLEDO HIGH SCHOOL</td>
<td>95-4805188</td>
<td>501 (c) 3</td>
<td>7,400.</td>
<td>FMV</td>
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<td>DEAF MINISTRIES INTERNATIONAL</td>
<td>33-0889853</td>
<td>501 (c) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>DEAN COLLEGE</td>
<td>04-2104149</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>DEAN AND THE DYNAMOS INC</td>
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<td>501 (c) 3</td>
<td>140,000.</td>
<td>FMV</td>
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<td>DEATH WITH DIGNITY NATIONAL CENTER</td>
<td>93-1162366</td>
<td>501 (c) 3</td>
<td>10,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEBBIE-RAND MEMORIAL SERVICE LEAGUE INC</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>DECARCERATE</td>
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<td>DECORDOVA SCULPTURE PARK AND MUSEUM</td>
<td>04-2067315</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) DEENA MOTECHIN JACOBS GEMILAS CHESED FUND</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(2) DEEP SOUTH CENTER FOR ENVIRONMENTAL JUSTICE</td>
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<td>(4) DEEPWATER EXPERIENTIAL EDUCATION PROJECT IN</td>
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<td>(5) DEER CREEK MACKINAW CUSD 701</td>
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<td>(6) DEER LAKE CONSERVANCY INCORPORATED</td>
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<td>(7) DEER LAKE UNITED METHODIST CHURCH</td>
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<td>(8) DEER VALLEY FAMILY CAMP</td>
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<td>(9) DEERMEADOWS BAPTIST CHURCH</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>9780 BAYMEADOWS RD JACKSONVILLE, FL 32256</td>
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<td>(10) DEFENDER ASSOCIATION OF PHILADELPHIA</td>
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<td>FMV</td>
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<tr>
<td>1441 SANSOM STREET PHILADELPHIA, PA 19102</td>
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<td>FMV</td>
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<tr>
<td>1130 17TH ST NW WASHINGTON, DC 20036</td>
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<td>(12) DEFINE AMERICAN</td>
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<tr>
<td>822 E BROADWAY LOUISVILLE, KY 40204</td>
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<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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<th>Part I General Information on Grants and Assistance</th>
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</tr>
<tr>
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</table>

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<tbody>
<tr>
<td>1. DEL E. WEBB CENTER FOR THE PERFORMING ARTS</td>
<td>86-0873249</td>
<td>501 (c) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. DELANCY STREET CALIFORNIA</td>
<td>23-7102690</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. DELANO AREA COUNCIL FOR ARTS AND CULTURE</td>
<td>81-5050533</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. DELANO UNITED METHODIST CHURCH</td>
<td>41-1489952</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5. DELAWARE ART MUSEUM</td>
<td>2301 KENTMERE PKWY WILMINGTON, DE 19806</td>
<td>501 (c) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6. DELAWARE COUNTY CHRISTIAN SCHOOL FOUNDATION</td>
<td>84-3343456</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. DELAWARE COUNTY CHRISTIAN SCHOOL SOCIETY</td>
<td>462 MALIN RD NEWTOWN SQUARE, PA 19073</td>
<td>501 (c) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. DELAWARE CHRISTIAN SOCIETY FOR THE PREV OF CRU</td>
<td>555 SANDY BANK RD MEDIA, PA 19063</td>
<td>501 (c) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. DELAWARE SPECIAL OLYMPICS INC</td>
<td>619 S COLLEGE AVE NEWARK, DE 19716</td>
<td>501 (c) 3</td>
<td>5,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10. DELAWARE VALLEY CLASSICAL SCHOOLS INC</td>
<td>903 E BASIN RD NEW CASTLE, DE 19720</td>
<td>501 (c) 3</td>
<td>13,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11. DELAWARE VALLEY FAIRNESS PROJECT</td>
<td>81-1289427</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. DELAWARE VALLEY FRIENDS SCHOOL</td>
<td>133 N BREAD ST Unit 3C PHILADELPHIA, PA 191</td>
<td>501 (c) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ❑ Yes  ❑ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>DELAWARE VALLEY GOLDEN RETRIEVER RESCUE INC</td>
<td>23-2775413</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELAWARE WILD LANDS INC 350</td>
<td>51-0101678</td>
<td>501 (C) 3</td>
<td>42,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELMAR REFORMED CHURCH</td>
<td>14-1431081</td>
<td>501 (C) 3</td>
<td>85,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELLOITTE FOUNDATION</td>
<td>13-6400341</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELRAY BEACH HISTORICAL SOCIETY INC</td>
<td>23-7375280</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELRAY BEACH PRESERVATION TRUST INC</td>
<td>26-0257807</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELRAY JEWISH LIFE CENTER INC</td>
<td>84-4131001</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELTA DELTA DELTA FOUNDATION</td>
<td>14951 DALLAS P KWE ST 500 DALLAS, TX 75254</td>
<td>501 (C) 3</td>
<td>105,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELTA GAMMA FOUNDATION</td>
<td>31-6034001</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELTA TAU DELTA EDUCATIONAL FOUNDATION INC</td>
<td>10000 ALLISONVILLE RD FISHERS, IN 46038</td>
<td>501 (C) 3</td>
<td>139,502.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELTA UPSILON EDUCATIONAL FOUNDATION INC</td>
<td>8705 FOUNDERS RD INDIANAPOLIS, IN 46268</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DELTA WATERFOWL FOUNDATION</td>
<td>1412 BASIN AVE BISMARCK, ND 58504</td>
<td>53-0259796</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [□]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>DEMENTIAMATTERS</td>
<td>84-2424819</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOCRACY FORWARD FOUNDATION</td>
<td>82-1007988</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOCRACY NORTH CAROLINA</td>
<td>56-2271150</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOCRACY NOW PRODUCTIONS INC</td>
<td>01-0708733</td>
<td>501 (C) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOCRACY UNLIMITED OF HUMBOLDT COUNTY</td>
<td>68-0394751</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOCRACY WORKS INC</td>
<td>27-2460359</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEMOS A NETWORK FOR IDEAS AND ACTION LTD</td>
<td>13-4105066</td>
<td>501 (C) 3</td>
<td>100,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DENISON UNIVERSITY</td>
<td>31-4379459</td>
<td>501 (C) 3</td>
<td>117,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>DENT COUNTY ANIMAL WELFARE SOCIETY</td>
<td>43-1561296</td>
<td>501 (C) 3</td>
<td>13,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DENTON BIBLE CHURCH</td>
<td>75-1607582</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>DENTON UNITARIAN UNIVERSALIST FELLOWSHIP</td>
<td>75-1491613</td>
<td>501 (C) 3</td>
<td>12,779.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DENVER ART MUSEUM INC</td>
<td>84-6038240</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

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<tr>
<td>(1) DENVER BAPTIST CHURCH  PO BOX 383 DENVER, CO 28037  75-3140662  501 (C) 3  13,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) DENVER BOTANIC GARDEN INC  909 YORK ST DENVER, CO 80206  84-0440359  501 (C) 3  15,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) DENVER CENTER FOR THE PERFORMING ARTS  1101 13TH ST DENVER, CO 80204  84-0407760  501 (C) 3  28,250.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) DENVER DUMB FRIENDS LEAGUE  2080 S QUEBEC ST DENVER, CO 80231  84-0405254  501 (C) 3  22,500.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) DENVER KIDS INC  1617 S ACOMA ST DENVER, CO 80223  84-1244211  501 (C) 3  30,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) DENVER RESCUE MISSION  6100 SMITH RD DENVER, CO 80216  84-6038762  501 (C) 3  35,600.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) DENVER RESCUE MISSION FOUNDATION  6100 SMITH RD DENVER, CO 80216  30-0896004  501 (C) 3  10,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) DENVER SEMINARY  6399 S SANTA FE DR LITTLETON, CO 80120  84-0421879  501 (C) 3  7,500.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) DENVER STREET SCHOOL  PO BOX 140069 DENVER, CO 80214  84-1216351  501 (C) 3  7,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) DENVER YOUTH PROGRAM  1625 E 35TH AVE DENVER, CO 80205  74-2486208  501 (C) 3  15,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) DENVER ZOOLOGICAL FOUNDATION INC  2300 N STEELE ST DENVER, CO 80205  84-0502539  501 (C) 3  6,450.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) DEPARTMENT OF TEXAS VETERANS OF FOREIGN WAR  8503 N IH 35 AUSTIN, TX 78753  32-0021539  501 (C) 3  20,000.  FMV  N/A  FOR RECIPIENT'S EXEM</td>
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<td></td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Attach to Form 990.**

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<tr>
<td>DEPARTURE INSTITUTE INC 120 ROGERS ST NE ATLANTA, GA 30317 83-1250262 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>DEPAUL CATHOLIC SCHOOL 44 W LOGAN ST PHILADELPHIA, PA 19134 23-2407829 501 (C) 3 30,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DEPAUL SCHOOL FOR HEARING AND SPEECH 6202 ALDER ST PITTSBURGH, PA 15206 25-0965321 501 (C) 3 18,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>DEPAUL UNIVERSITY 1 E JACKSON BLVD CHICAGO, IL 60604 36-2167048 501 (C) 3 315,450. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>DEPAW UNIVERSITY 313 S LOCUST ST GREENCASTLE, IN 46135 35-0869045 501 (C) 3 95,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
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<td>DEPELCHIN CHILDREN'S CENTER 4950 MEMORIAL DR HOUSTON, TX 77007 76-0318867 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>DEPRESSION AND BIPOLAR SUPPORT ALLIANCE 55 E JACKSON BLVD CHICAGO, IL 60604 36-3379124 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>DERBY ACADEMY TRUSTEES 56 BURDITT AVE HINGHAM, MA 02043 04-2137227 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>DEKER PRINCE MINISTRIES PO BOX 19501 CHARLOTTE, NC 28219 65-0231845 501 (C) 3 10,700. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DERRY PRESBYTERIAN CHURCH 248 E DERRY ROAD HERSHEY, PA 17033 23-1971692 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DERRYFIELD SCHOOL 2108 RIVER RD MANCHESTER, NH 3104 02-0265542 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DES MOINES PERFORMING ARTS 221 WALMUT ST DES MOINES, IA 50309 51-0138181 501 (C) 3 30,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table .................................................................
### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

Yes  

No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DESCANSO GARDENS GUILD INC</td>
<td>1418 DESCANSO DR LA CANADA FLINTRIDGE, CA 9</td>
<td>95-2511202</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>DESCHUTES BASIN LAND TRUST</td>
<td>210 NW IRVING AVE BEND, OR 97703</td>
<td>93-1186407</td>
<td>501 (C) 3</td>
<td>13,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>DESCHUTES COUNTY CHILDREN'S FOUNDATION</td>
<td>1010 NW 14TH ST BEND, OR 97703</td>
<td>93-1032896</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>DESCHUTES UNITED WAY</td>
<td>PO BOX 5969 BEND, OR 97708</td>
<td>93-6012576</td>
<td>501 (C) 3</td>
<td>43,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>DESERET TRUST CO</td>
<td>PO BOX 11558 SALT LAKE CITY, UT 84147</td>
<td>87-0291656</td>
<td>501 (C) 3</td>
<td>23,726.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>DESERT AIDS PROJECT</td>
<td>1695 N SUNRISE WAY PALM SPRINGS, CA 92262</td>
<td>33-0068583</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>DESERT BOTANICAL GARDEN</td>
<td>1201 N GALVIN PKWY PHOENIX, AZ 85008</td>
<td>86-0136925</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>DESERT COMMUNITY FOUNDATION</td>
<td>75105 MERLE DR STE 300 PALM DESERT, CA 92211</td>
<td>95-4725924</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>DESERT FOOTHILLS LIBRARY ASSOCIATION</td>
<td>38443 N SCHOOL HOUSE RD CAVE CREEK, AZ 85331</td>
<td>51-0153556</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>DESERT MISSION INC</td>
<td>8125 N HAYDEN RD SCOTTSDALE, AZ 85258</td>
<td>86-0096941</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>DESERT PALMS PRESBYTERIAN CHURCH - SUN CITY</td>
<td>13459 WEST STARDUST BOULEVARD SUN CITY WEST</td>
<td>86-0397656</td>
<td>501 (C) 3</td>
<td>131,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>DESERT STREAM MINISTRIES</td>
<td>706 MAIN ST GRANDVIEW, MO 64030</td>
<td>95-3889820</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [X] 
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESERVING CAUSES INDIA FOUNDATION</td>
<td>12457 OSPREY LN APT 1 PLAYA VISTA, CA 90094</td>
<td>81-4476304 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESIGN LEADERSHIP FOUNDATION INC</td>
<td>60 BACKUS AVE DANBURY, CT 6810</td>
<td>85-3092687 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESIRE STREET MINISTRIES</td>
<td>1566 DONALD LEE HOLLOWELL PKWY NW ATLANTA,</td>
<td>72-1218825 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESIRING GOD MINISTRIES</td>
<td>2112 BROADWAY ST NE STE 150 MINNEAPOLIS, MN</td>
<td>01-0797083 501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESTINATION COLLEGE</td>
<td>81 PONDFIELD RD STE 290 BRONXVILLE, NY 1070</td>
<td>13-3782557 501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESTINATION HOME SV</td>
<td>2440 W EL CAMINO REAL STE 300 MOUNTAIN VIEW</td>
<td>82-3353174 501 (C) 3</td>
<td>67,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESTINY COMMUNITY CHURCH, INC.</td>
<td>2709 WOODLAWN WAY LEXINGTON, KY 40511</td>
<td>20-0681295 501 (C) 3</td>
<td>8,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DESTINY WORSHIP CENTER INC</td>
<td>PO BOX 6340 MIRAMAR BEACH, FL 32550</td>
<td>59-3741856 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DETERMINED TO SUCCEED</td>
<td>2525 OCEAN PARK BLVD STE 116 SANTA MONICA,</td>
<td>82-1454808 501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DETROIT ACTION COMMONWEALTH</td>
<td>1238 FERDON RD ANN ARBOR, MI 48104</td>
<td>32-0446001 501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DETROIT CHAMBER WINDS</td>
<td>24901 NORTHWESTERN HWY SOUTHFIELD, MI 48075</td>
<td>38-2445218 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DETROIT CHINESE ALLIANCE CHURCH</td>
<td>31329 JOHN R RD MADISON HEIGHTS, MI 48071</td>
<td>38-2210616 501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................... (X) Yes  No

2  Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>DETROIT EDUCATIONAL TELEVISION</td>
<td>38-1440200</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>DETROIT RESCUE MISSION MINISTRIES GENESIS HOUSE</td>
<td>38-1459371</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>DETROIT SYMPHONY ORCHESTRA HALL INC</td>
<td>38-1385132</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>DEVELOPMENT ASSOCIATES INTERNATIONAL</td>
<td>23-2838716</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>DETROIT IN GARDENING</td>
<td>20-4708212</td>
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<td>14,811.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>DEVELOPMENTS IN LITERACY INC</td>
<td>33-0843213</td>
<td>501 (C) 3</td>
<td>26,000.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>DEVEREUX FOUNDATION</td>
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<td>N/A</td>
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<td>DEVON PREPARATORY SCHOOL</td>
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<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>DEVOTED FRIENDS ANIMAL SOCIETY INC</td>
<td>27-1796117</td>
<td>501 (C) 3</td>
<td>10,175.</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>DEXTER SOUTHFIELD INC</td>
<td>04-2194152</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>Dharma Civilization Foundation INC</td>
<td>45-5428131</td>
<td>501 (C) 3</td>
<td>11,008.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> DIO ROSE PRESERVE</td>
<td>5200 SANTA MONICA BLVD, CA 90401</td>
<td>94-3367956</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>2</strong> DIA CENTER FOR THE ARTS INC</td>
<td>535 W 22ND ST FL 4 NEW YORK, NY 10011</td>
<td>23-7397946</td>
<td>501 (c) 3</td>
<td>30,940.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>3</strong> DIABETES RESEARCH CONNECTION</td>
<td>1400 MAIDEN LN DEL MAR, CA 92014</td>
<td>90-0815395</td>
<td>501 (c) 3</td>
<td>50,199.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>4</strong> DIAMOND HEAD THEATRE</td>
<td>520 MAKAPUU AVE HONOLULU, HI 96816</td>
<td>99-0073495</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>5</strong> DIAMOND WILLOW MINISTRIES</td>
<td>PO BOX 438 FORT THOMPSON, SD 57339</td>
<td>46-0463077</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>6</strong> DICKINSON COLLEGE</td>
<td>PO BOX 1733 CARLISLE, PA 17013</td>
<td>23-1365954</td>
<td>501 (c) 3</td>
<td>158,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>7</strong> DIDI HIRSCH PSYCHIATRIC SERVICE</td>
<td>4760 SEPULVEDA BLVD CULVER CITY, CA 90230</td>
<td>95-1816023</td>
<td>501 (c) 3</td>
<td>250,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>8</strong> DIGAMBAR JAIN SANGH OF NORTHERN CALIFORNIA</td>
<td>18832 ARATA WAY CUPERTINO, CA 95014</td>
<td>47-5636025</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>9</strong> DIGDEEP RIGHT TO WATER PROJECT</td>
<td>3308 DESCANSO DR LOS ANGELES, CA 90026</td>
<td>46-0686920</td>
<td>501 (c) 3</td>
<td>59,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>10</strong> DIGITAL ASSAULT DEFENSE FUND INC</td>
<td>PO BOX 821 LONG BEACH, NY 11561</td>
<td>82-1772743</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>11</strong> DIGITAL WISH INC</td>
<td>PO BOX 255 MILTON, DE 19968</td>
<td>26-1119413</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>12</strong> DIGNITY FREEDOM NETWORK</td>
<td>16432 N MIDLAND BLVD STE 127 NAMPA, ID 8368</td>
<td>41-2075995</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

 Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   Yes [x]  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>DIGNITY HEALTH FOUNDATION</td>
<td>46-2037641</td>
<td>501 (C) 3</td>
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<tr>
<td>185 BERRY ST STRE 200 SAN FRANCISCO, CA 9410</td>
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<td>DIKEMBE MUTOMBO FOUNDATION INC</td>
<td>58-2359589</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>400 INTERSTATE NORTH PKWY WEST SE STE 1040</td>
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<tr>
<td>DILLARD UNIVERSITY</td>
<td>72-0408929</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2601 GENTILLY BLVD NEW ORLEANS, LA 70122</td>
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<tr>
<td>DILLER-QUAILE SCHOOL OF MUSIC INC</td>
<td>13-1843420</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>24 E 95TH ST NEW YORK, NY 10128</td>
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<td>DILLON COMMUNITY CHURCH</td>
<td>84-6037598</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PO BOX 1979 DILLON, CO 80435</td>
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<td>DILWORTH CENTER FOR CHEMICAL DEPENDENCY INC</td>
<td>56-2130300</td>
<td>501 (C) 3</td>
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<td>DIMOCK COMMUNITY FOUNDATION INC</td>
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<td>9,500.</td>
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<tr>
<td>DING DARLING WILDLIFE SOCIETY INC</td>
<td>59-2240895</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>1 WILDLIFE DR SANIBEL, FL 33957</td>
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<td>DIOCESAN COUNCIL FOR THE SOCIETY OF ST VINC</td>
<td>86-0096789</td>
<td>501 (C) 3</td>
<td>97,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 13600 PHOENIX, AZ 85002</td>
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<tr>
<td>DIOCESE OF BIRMINGHAM IN ALABAMA INC</td>
<td>63-0581368</td>
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<td>26,000.</td>
<td>FMV</td>
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<td>2121 3RD AVE N BIRMINGHAM, AL 35203</td>
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<td>901 ORANGE GROVE ROAD CHARLESTON, SC 29407</td>
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<tr>
<td>1633 WAVERLY RD PAVLEYS ISLAND, SC 29585</td>
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3. Enter total number of other organizations listed in the line 1 table ...............................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Schedule I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | DIOCESE OF COLORADO SPRINGS  
228 N CASCADE AVE COLORADO SPRINGS, CO 8090 | 84-0936629 | 501 (C) 3 | 142,690. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | DIOCESE OF DAVENPORT  
780 W CENTRAL PARK AVE DAVENPORT, IA 52804 | 42-0680472 | 501 (C) 3 | 7,612. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | DIOCESE OF EAST TENNESSEE  
814 EPISCOPAL SCHOOL WAY KNOXVILLE, TN 37933 | 62-1218955 | 501 (C) 3 | 80,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | DIOCESE OF FT WAYNE SOUTH BEND INC  
PO BOX 390 FORT WAYNE, IN 46801 | 35-0876373 | 501 (C) 3 | 33,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | DIOCESE OF HARRISBURG  
4800 UNION DEPOSIT RD HARRISBURG, PA 17111 | 23-1494791 | 501 (C) 3 | 14,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | DIOCESE OF KALAMAZOOG  
215 N WESTNEDGE AVE KALAMAZOOG, MI 49007 | 38-1961750 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | DIOCESE OF KANSAS CITY-ST JOSEPH  
PO BOX 419337 KANSAS CITY, MO 64141 | 44-0546494 | 501 (C) 3 | 8,950. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | DIOCESE OF LA CROSSE  
PO BOX 4004 LA CROSSE, WI 54602 | 39-0807229 | 501 (C) 3 | 6,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | DIOCESE OF MADISON  
702 S HIGH POINT RD MADISON, WI 53719 | 39-0852862 | 501 (C) 3 | 12,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | DIOCESE OF METUCHEN  
146 METLARS LN PISCATAWAY, NJ 8854 | 22-2385423 | 501 (C) 3 | 8,205. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | DIOCESE OF OAKLAND CA DEPARTMENT OF EDUCATION  
2121 HARRISON ST OAKLAND, CA 94612 | 94-1535363 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | DIOCESE OF PALM BEACH  
9995 N MILITARY TRL PALM BEACH GARDENS, FL | 59-2438903 | 501 (C) 3 | 70,700. | FMV | N/A | FOR RECIPIENT'S EXEM |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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#### Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   ![Yes][1]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) DIOCESE OF PENSACOLA-TALLAHASSEE</td>
<td>59-6586125</td>
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<td>11 N B ST PENSACOLA, FL 32502</td>
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<td>(2) DIOCESE OF ROCKFORD-SOCIAL SERVICES</td>
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<td>PO BOX 7044 ROCKFORD, IL 61125</td>
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<td>(3) DIOCESE OF SOUTHEAST FLORIDA INC ST PHILIPS</td>
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<td>1121 ANDALUSIA AVE CORAL GABLES, FL 33134</td>
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<td>(4) DIOCESE OF ST AUGUSTINE</td>
<td>59-3746849</td>
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<td>11625 OLD SAINT AUGUSTINE RD JACKSONVILLE,</td>
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<td>701 LAWRENCE RD LAWRENCE TOWNSHIP, NJ 8648</td>
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<td>(7) DIOCESE OF VENICE IN FLORIDA</td>
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<td>(8) DIOCESE OF VENICE IN FLORIDA INC</td>
<td>27-1988145</td>
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<td>57,050.</td>
<td>FMV</td>
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<td>1000 PINNEBROOK RD VENICE, FL 34285</td>
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<td>(9) DIRECT ACTION EVERYWHERE</td>
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<tr>
<td>PO BOX 4782 BERKELEY, CA 94704</td>
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<td>(10) DIRECT ACTION FOR WOMEN NOW WORLDWIDE INC</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>11 MAGAZINE ST CAMBRIDGE, MA 2139</td>
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<td>(12) DISABLED AMERICAN VETERANS CHARITABLE SERVI</td>
<td>52-1521276</td>
<td>501 (C) 3</td>
<td>220,574.</td>
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<td>860 DOLNICK DR ERLANGER, KY 41018</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

---

3. Enter total number of other organizations listed in the line 1 table:  

---

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☒  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>1</td>
<td>DISABLED SPORTS EASTERN SIERRA</td>
<td>501-001</td>
<td>501 (C) 3</td>
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<td>2</td>
<td>DISABLED SPORTS USA</td>
<td>501-002</td>
<td>501 (C) 3</td>
<td>6,001.</td>
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<td>3</td>
<td>DISASTER AID USA INCORPORATED</td>
<td>501-003</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>DISCALEED CARMELITE NUNS</td>
<td>501-004</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>5</td>
<td>DISCOVERY INSTITUTE</td>
<td>501-005</td>
<td>501 (C) 3</td>
<td>86,000.</td>
<td>FMV</td>
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<td>6</td>
<td>DISCOVERY LEADERSHIP</td>
<td>501-006</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>DISCOVERY LIVING INC</td>
<td>501-007</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>8</td>
<td>DISCOVERY WORLD LTD</td>
<td>501-008</td>
<td>501 (C) 3</td>
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<tr>
<td>9</td>
<td>DISNAS OF VERMONT INC</td>
<td>501-009</td>
<td>501 (C) 3</td>
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<tr>
<td>10</td>
<td>DISPLACED HOMEMAKERS CENTER OF TOMPKINS COU</td>
<td>501-010</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>DISPUTE RESOLUTION CENTERS OF MICHIGAN INC</td>
<td>501-011</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>12</td>
<td>DISTRICT 214 EDUCATION FOUNDATION</td>
<td>501-012</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>DISTRICT COUNCIL OF CONTRA COSTA CTY SOCIETY</td>
<td>2210 GLADSTONE DR PITTSBURG, CA 94565</td>
<td>94-1448577</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DISTRICT COUNCIL OF MADISON INC SOCIETY OF</td>
<td>PO BOX 259686 MADISON, WI 53725</td>
<td>39-0824876</td>
<td>501 (C) 3</td>
<td>96,125.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>DISTRICT OF COLUMBIA COALITION AGAINST DOME</td>
<td>5 THOMAS CIR NW WASHINGTON, DC 20005</td>
<td>52-1515600</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>DIVERSITY RICHMOND</td>
<td>1407 SHERWOOD AVE RICHMOND, VA 23220</td>
<td>31-1669279</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>DIVINE MERCY PROVINCE OF HERALDS OF GOOD NE</td>
<td>1 SAINT LOUIS ST STE 4000 MOBILE, AL 36602</td>
<td>82-3484726</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DIVINE SAVIOR LUTHERAN CHURCH</td>
<td>10311 NW 58TH ST DORAL, FL 33178</td>
<td>65-0322444</td>
<td>501 (C) 3</td>
<td>13,250.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DIX HILLS JEWISH CENTER</td>
<td>555 VANDERBILT PKWY DIX HILLS, NY 11746</td>
<td>11-2166192</td>
<td>501 (C) 3</td>
<td>5,038.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DIXBORO UNITED METHODIST CHURCH</td>
<td>5221 CHURCH ROAD ANN ARBOR, MI 48105-9792</td>
<td>38-1840198</td>
<td>501 (C) 3</td>
<td>43,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>DIY GIRLS</td>
<td>13172 VAN NUYS BLVD PACOIMA, CA 91311</td>
<td>35-2681315</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOCTORS FOR GLOBAL HEALTH INC</td>
<td>PO BOX 1761 DECATUR, GA 30031</td>
<td>58-2194069</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOCTORS OF THE WORLD-USA INC</td>
<td>222 BROADWAY FL 19 NEW YORK, NY 10038</td>
<td>35-2426718</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOCUMENTARY FOUNDATION</td>
<td>1530 CASCET DR SACRAMENTO, CA 95864</td>
<td>26-1373837</td>
<td>501 (C) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

---

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>DODGE COUNTY HUMANE SOCIETY INC</td>
<td>39-6126940</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>DOE FUND INC</td>
<td>13-3412540</td>
<td>501 (C) 3</td>
<td>104,201</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOERNHECHER CHILDRENS HOSPITAL FOUNDATION</td>
<td>93-0579589</td>
<td>501 (C) 3</td>
<td>72,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOING 4 OTHERS</td>
<td>82-2982177</td>
<td>501 (C) 3</td>
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<td>DOLLYWOOD FOUNDATION</td>
<td>62-1348105</td>
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<td>DOMESTIC AND FOREIGN MISSIONARY SOCIETY OF</td>
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<td>73,000</td>
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<td>DOMESTIC VIOLENCE RESOURCE CENTER OF SOUTH DAKOTA</td>
<td>05-0377538</td>
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<td>DOMESTIC VIOLENCE SHELTER AND SERVICES INC</td>
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<td>DOMINICAN HOUSE OF STUDIES</td>
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<td>FMV</td>
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<td>DOMINICAN NUNS OF THE PERPETUAL ROSARY</td>
<td>22-1614707</td>
<td>501 (C) 3</td>
<td>50,500</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

JSA
OE1288 1.000

18674H 1467 V 20-7.21
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [  ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>DOMINICAN SISTERS OF MARY MOTHER OF EUCHARI</td>
<td>4597 WARREN RD ANN ARBOR, MI 48105</td>
<td>38-3349686 501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>DOMUS DEI CLERICAL SOCIETY OF APOSTOLIC LIFE</td>
<td>PO BOX 29451 NEW ORLEANS, LA 70189</td>
<td>72-1491195 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>DOMUS KIDS INC</td>
<td>83 LOCKWOOD AVE STAMFORD, CT 6902</td>
<td>06-0891998 501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>DON BOSCO CRISTO REY HIGH SCHOOL OF THE ARCH</td>
<td>HIGH SCHOOL 1010 LARCH AVENUE TAKOMA PARK,</td>
<td>06-1786297 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>DONALD DANFORTH PLANT SCIENCE CENTER</td>
<td>975 N WARSON RD SAINT LOUIS, MO 63132</td>
<td>31-1584621 501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>DONORS FUND INC</td>
<td>328 3RD ST LAKWOOD, NJ 8701</td>
<td>47-4844275 501 (C) 3</td>
<td>77,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>DONORS TRUST INC</td>
<td>1800 DIAGONAL RD STE 280 ALEXANDRIA, VA 223</td>
<td>52-2166327 501 (C) 3</td>
<td>1,901,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>DONORSCHOOSE ORG</td>
<td>134 W 37TH ST FL 11 NEW YORK, NY 10018</td>
<td>13-4129457 501 (C) 3</td>
<td>426,079.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>DON'T FORGET US PET US A NON PROFIT CORPORAT</td>
<td>PO BOX 79124 NORTH DARTMOUTH, MA 2747</td>
<td>27-1076903 501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>DON'T SHOOT PORTLAND</td>
<td>1811 NW COUCH ST APT 303 PORTLAND, OR 97209</td>
<td>81-3128753 501 (C) 3</td>
<td>6,812.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>DOOR COUNTY COMMUNITY FOUNDATION INC</td>
<td>222 N 3RD AVE STURGEON BAY, WI 54235</td>
<td>39-1980685 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>DOOR COUNTY LAND TRUST INC</td>
<td>PO BOX 65 STURGEON BAY, WI 54235</td>
<td>39-1561243 501 (C) 3</td>
<td>7,525.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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## Part I General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
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<td>501 (C) 3</td>
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<td>DOOR OF HOPE</td>
<td>38-4135173</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>PO BOX 90455 PASADENA, TX 75010</td>
<td>95-4044568</td>
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<td>N/A</td>
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<td>DOORWAYS FOR WOMEN &amp; FAMILIES INC</td>
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<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOR SET THEATRE FESTIVAL</td>
<td>81-4741774</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>DORSON HOME CARE CENTER INC</td>
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<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOG PEUROS ENGINEERING ACADEMY FOUNDATION</td>
<td>22-3361975</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>DOG EDUCATION</td>
<td>26-1115393</td>
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<td>DOTERRA HEALING HANDS FOUNDATION</td>
<td>82-0670099</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOROTHY DAY HOUSE A NONPROFIT PUBLIC BENEFICI</td>
<td>94-3158511</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOROT INC</td>
<td>171 W 85TH ST NEW YORK, NY 10024</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOROTHY DAY HOUSE</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
<thead>
<tr>
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</tr>
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<tbody>
<tr>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of noncash assistance</td>
<td>(h) Purpose of grant or assistance</td>
</tr>
<tr>
<td>1</td>
<td>DOUBLE UP DRIVE INC</td>
<td>85-0762875</td>
<td>304 S JONES BLVD STE 121 LAS VEGAS, NV 8910</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>DOUGLAS COUNTY SHERIFF'S ADVISORY COUNCIL</td>
<td>20-11008918</td>
<td>PO BOX 1022 MINDEN, NV 89423</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>DOUSOS DISCOVERY MINISTRIES</td>
<td>04-3691667</td>
<td>PO BOX 3080 BURNSVILLE, MN 55337</td>
<td>501 (C) 3</td>
<td>16,400.</td>
<td>FMV</td>
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<td>4</td>
<td>DOUSOS PARTNERS</td>
<td>26-2009162</td>
<td>700 MONTGOMERY HWY STE 100 VESTAVIA HILLS,</td>
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<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>DOVER FIRST BAPTIST CHURCH</td>
<td>59-0764392</td>
<td>3223 GALLAGHER RD DOVER, FL 33527</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>DOWN SYNDROME ASSOCIATION OF GREATER CINCIN</td>
<td>42-6284173</td>
<td>1400 BUFFALO RD WEST DES MOINES, IA 50265</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>7</td>
<td>DOWNTOWN EMERGENCY SERVICE CENTER</td>
<td>31-1051378</td>
<td>4623 WESLEY AVE STE A CINCINNATI, OH 45212</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>DOWNEAST COASTAL CONSERVANCY</td>
<td>01-0430078</td>
<td>PO BOX 762 MACHIAS, ME 04654</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>9</td>
<td>DOWNS SYNDROME ASSOCIATION OF GREATER RICH</td>
<td>54-1252305</td>
<td>PO BOX 70789 HENRICO, VA 23255</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
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<td>10</td>
<td>DOWNTOWN JIMMIE HALE MISSION</td>
<td>26-0110939</td>
<td>303 E MAIN ST BERRYVILLE, VA 22611</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>11</td>
<td>DOWNTOWN JIMMIE HALE MISSION</td>
<td>91-1275815</td>
<td>515 3RD AVE SEATTLE, WA 98104</td>
<td>501 (C) 3</td>
<td>26,750.</td>
<td>FMV</td>
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<td>12</td>
<td>DOWNTOWN JIMMIE HALE MISSION</td>
<td>63-0358757</td>
<td>PO BOX 10472 BIRMINGHAM, AL 35202</td>
<td>501 (C) 3</td>
<td>16,250.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▲ Attach to Form 990.

▲ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2</th>
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<td>1. DOWNTOWN LITTLE SCHOOL INC</td>
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<td>15 DUTCH ST NEW YORK, NY 10038</td>
<td>13-4057312</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2. DOWNTOWN WINSTON-SALEM COMMUNITY CINEMA</td>
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<td>311 W 4TH ST WINSTON SALEM, NC 27101</td>
<td>81-3111992</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. DOWNTOWN WOMENS CENTER</td>
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<td>442 S SAN PEDRO ST LOS ANGELES, CA 90013</td>
<td>31-1597223</td>
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<td>FMV</td>
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<td>4. DOXOLOGY BIBLE CHURCH</td>
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<td>4805 ARBORLAWN DR FORT WORTH, TX 76109</td>
<td>75-1446859</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5. DOYLESTOWN HEALTH FOUNDATION</td>
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<td>595 W STATE ST DOYLESTOWN, PA 18901</td>
<td>23-2368196</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. DOYLESTOWN PRESBYTERIAN CHURCH</td>
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<td>127 E COURT ST DOYLESTOWN, PA 18901</td>
<td>23-1433863</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. DR HUEY P NEWTON FOUNDATION</td>
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<tr>
<td>PO BOX 1244 LINDEN, CA 95236</td>
<td>94-3191239</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. DR JAMES DORSON FAMILY INSTITUTE</td>
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<td>540 ELKTON DR STE 201 COLORADO SPRINGS, CO</td>
<td>27-1394708</td>
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<td>FMV</td>
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<td>9. DR MARTIN LUTHER COLLEGE</td>
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<td>1995 LUTHER CT NEW ULM, MN 56073</td>
<td>41-0695520</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10. DR PHILLIPS CENTER FOR THE PERFORMING ARTS</td>
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<td>155 E ANDERSON ST ORLANDO, FL 32801</td>
<td>20-0695917</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>42-0680460</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes ☑️
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>DRAWING CENTER INC</td>
<td>13-2887872</td>
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<td>N/A</td>
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<td>DREAM CENTERS OF COLORADO SPRINGS</td>
<td>27-4876080</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>DREAM CITY FOUNDATION</td>
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<td>FMV</td>
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<td>DRESS FOR SUCCESS PALM BEACHES INC</td>
<td>27-0579164</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>36-3670953</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>94-2219550</td>
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<td>DREXEL NEUMANN ACADEMY</td>
<td>20-8083164</td>
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<td>FMV</td>
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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>DREXEL UNIVERSITY 3201 ARCH ST STE 420 PHILADELPHIA, PA 19104</td>
<td>23-1352630</td>
<td>501 (C) 3</td>
<td>235,085.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DRIFTLESS AREA LAND CONSERVANCY INC 206 S IOWA ST DODGEVILLE, WI 53533</td>
<td>39-2017802</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>DRIPPING SPRINGS UNITED METHODIST CHURCH 28900 RR 12 N DRIPPING SPRINGS, TX 78620</td>
<td>74-2315824</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>DRIVING FORE MS 4524 HALIFAX AVE N MINNEAPOLIS, MN 55422</td>
<td>82-4311580</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DRUGS FOR NEGLICTED DISEASESINITIATIVE NORT 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006</td>
<td>20-87734179</td>
<td>501 (C) 3</td>
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<td>84-2494757</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>DUBUQUE SYMPHONY ORCHESTRA</td>
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<td>817 CONCORDIA DR COLLIerville, TN 38017</td>
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<td>10000 N 31ST AVE STE D200 PHOENIX, AZ 85051</td>
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<td>501 (C) 3</td>
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<td>324 BLACKWELL ST BLDG N DURHAM, NC 27701</td>
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<td>12100 SE LANTANA AVE NOBE SOUND, FL 33455</td>
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<td>PO BOX 412 DUNSMUIR, CA 96025</td>
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<tr>
<td>301 N WASHINGTON ST NAPERVILLE, IL 60540</td>
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<td>3000 WOODCREEK DR DONNERS GROVE, IL 60515</td>
<td>36-3978733</td>
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### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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---

#### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(2) DUQUESNE UNIVERSITY OF THE HOLY SPIRIT</td>
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<td>(3) DURANGO FOOD BANK</td>
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<td>(4) DURHAM CRISIS RESPONSE CENTER</td>
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<td>(7) DUTCH SHEETS MINISTRIES INC</td>
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<td>(9) DUTTON CHRISTIAN SCHOOL</td>
<td>38-1539995</td>
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<td>FMV</td>
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<td>(10) DUNAMISH TRIBAL SERVICES</td>
<td>91-1122115</td>
<td>501 (C) 3</td>
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<tr>
<td>(11) DUNAMISH TRIBAL SERVICES</td>
<td>315 E PALISADE AVE ENGLEWOOD, NJ 7631</td>
<td>22-1487165</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) DYNAMIC CATHOLIC INSTITUTE</td>
<td>901 ADAMS CROSSING CINCINNATI, OH 45202</td>
<td>26-4549213</td>
<td>81,323.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<thead>
<tr>
<th>Name of the organization</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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**Part I**
General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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Schedule I (Form 990) 2020

JSA
OE1288 1,000

V 20-7.21
**Schedule I (Form 990)**
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [ ] No [x]</td>
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<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>PO BOX 3016 EDWARDS, CO 81632</td>
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<td>(3) EAGLE VALLEY MENTAL HEALTH</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 4000 VAIL, CO 81658</td>
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<td>(4) EAGLES AUTISM CHALLENGE INC</td>
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<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
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<td>1 NOVACARE WAY PHILADELPHIA, PA 19145</td>
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<td>601 CAMP CRAFT RD WEST LAKE HILLS, TX 78746</td>
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<td>(7) EARLHAM COLLEGE</td>
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<tr>
<td>801 NATIONAL RD W RICHMOND, IN 47374</td>
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<td>(8) EARLY CHILDHOOD MENTAL HEALTH PROGRAM</td>
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<td>501 (C) 3</td>
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<tr>
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<td>PO BOX 3281 EARLY, TX 76803</td>
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<td>(10) EARLY MUSIC GUILD OF SEATTLE</td>
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<tr>
<td>PO BOX 25893 SEATTLE, WA 98165</td>
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<td>(11) EARTH ISLAND INSTITUTE INC</td>
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<td>(12) EARTH OVERSHEET INC</td>
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<td>117 GLENN RD ARDMORE, PA 19003</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. EARTH SANGHA INC 5101 BACKLICK ROAD SUITE 1 ANNANDALE, VA 22110</td>
<td>54-1868546</td>
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<td>25,000</td>
<td>FMV</td>
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<tr>
<td>2. EARTH UNIVERSITY FOUNDATION 151 ELLIS ST NE PL 1 ATLANTA, GA 30303</td>
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<td>FMV</td>
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<tr>
<td>3. EARTH WIND FIRE AND WATER PO BOX 183 AMBLER, PA 19002</td>
<td>46-3393699</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>4. EARTHCORPS 6310 NE 74TH ST STE 201E SEATTLE, WA 98115</td>
<td>91-1592071</td>
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<td>FMV</td>
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<td>5. EARTHENABLE 11 CANDLEBERRY LN WESTON, MA 2493</td>
<td>46-5540643</td>
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<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6. EARTHJUSTICE 50 CALIFORNIA ST STE 500 SAN FRANCISCO, CA 94104</td>
<td>94-1730465</td>
<td>501 (C) 3</td>
<td>1,953,515</td>
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<tr>
<td>7. EARTHSHARE 7735 OLD GEORGETOWN RD BETHESDA, MD 20814</td>
<td>52-1601960</td>
<td>501 (C) 3</td>
<td>15,400</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8. EARTHWATCH INSTITUTE INC 1380 SOLDIERS FIELD RD STE 2700 BRIGHTON, MA 02135</td>
<td>23-7168440</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9. EASLEY PRESBYTERIAN CHURCH 200 SOUTH FIRST STREET EASLEY, SC 29640</td>
<td>57-6044117</td>
<td>501 (C) 3</td>
<td>16,000</td>
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<tr>
<td>10. EAST AFRICAN CHILDREN'S FUND 100 MAPLE PARK BLVD STE 130 SAINT CLAIR SHORES, MI 48076</td>
<td>47-3912134</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
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<tr>
<td>11. EAST AFRICAN COMMUNITY SERVICES 7050 32ND AVE S STE 207 SEATTLE, WA 98118</td>
<td>91-2138852</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>12. EAST AVON FIRST PRESBYTERIAN CHURCH PO BOX 189 AVON, NY 14414</td>
<td>16-0960955</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.  

OMB No. 1545-0047  
Open to Public Inspection  

Name of the organization  
VANGUARD CHARITABLE ENDOWMENT PROGRAM  
Employer identification number  
23-2888152  

Part I  General Information on Grants and Assistance  

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes [x]  
   No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.  

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>EAST BAY CENTER FOR THE PERFORMING ARTS</td>
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<td>EAST BAY COMMUNITY BRIDGE CENTER INC</td>
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<td>FMV</td>
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<td>94-6070996</td>
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<td>EAST BAY COMMUNITY LAW CENTER</td>
<td>94-3042565</td>
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<td>EAST BAY SOCIETY FOR THE PREVENTION OF CRUE</td>
<td>94-1322202</td>
<td>501 (C) 3</td>
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<td>EAST CAROLINA UNIVERSITY FOUNDATION INC</td>
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<td>EAST CAROLINA UNIVERSITY MEDICAL &amp; HEALTH S</td>
<td>23-7138921</td>
<td>501 (C) 3</td>
<td>14,340.</td>
<td>FMV</td>
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<td>EAST CENTRAL UNIVERSITY FOUNDATION INC</td>
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<td>FMV</td>
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<td>EAST CHAPEL HILL ROTARY CLUB FOUNDATION</td>
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<td>501 (C) 3</td>
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<td>EAST COAST INTERNATIONAL CHURCH</td>
<td>65 MUNROE ST LINN, NY 1901</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>501 (C) 3</td>
<td>137,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Enter total number of other organizations listed in the line 1 table.  

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Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<table>
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<tr>
<td>(1) EAST COBB UNITED METHODIST CHURCH</td>
<td>2325 ROSWELL RD MARIETTA, GA 30062</td>
<td>58-0968522</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>(2) EAST COOPER BAPTIST CHURCH</td>
<td>361 EGYPT RD MOUNT PLEASANT, SC 29464</td>
<td>57-0697258</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>(3) EAST COOPER COMMUNITY OUTREACH</td>
<td>1145 SIX MILE RD MOUNT PLEASANT, SC 29466</td>
<td>57-0939280</td>
<td>501 (C) 3</td>
<td>52,750.</td>
<td>FMV</td>
</tr>
<tr>
<td>(4) EAST COUNTY TRANSITIONAL LIVING CENTER INC</td>
<td>1527 E MAIN ST EL CAJON, CA 92021</td>
<td>27-0865318</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>(5) EAST CROSS UNITED METHODIST CHURCH</td>
<td>820 SOUTH MADISON BOULEVARD BARTLESVILLE, OK 74003</td>
<td>73-6084237</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>(6) EAST END FOOD INSTITUTE</td>
<td>PO BOX 356 SOUTHAMPTON, NY 11969</td>
<td>27-1962169</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(7) EAST END HOSPICE INC</td>
<td>PO BOX 1048 WESTHAMPTON, NY 11978</td>
<td>11-2878502</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>(8) EAST HAMPTON FOOD PANTRY INC</td>
<td>PO BOX 505 EAST HAMPTON, NY 11937</td>
<td>27-0109312</td>
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<td>FMV</td>
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<tr>
<td>(9) EAST HARLEM TUTORIAL PROGRAM INC</td>
<td>2035 2ND AVE NEW YORK, NY 10029</td>
<td>23-7439789</td>
<td>501 (C) 3</td>
<td>8,500.</td>
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<td>(10) EAST HIGH ANGEL FOUNDATION</td>
<td>PO BOX 6015 DENVER, CO 80206</td>
<td>32-0069773</td>
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<tr>
<td>(11) EAST LYCOMING EDUCATION FOUNDATION</td>
<td>349 CEMETERY ST HUGHESVILLE, PA 17737</td>
<td>46-1158209</td>
<td>501 (C) 3</td>
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<td>(12) EAST PALO ALTO ACADEMY FOUNDATION</td>
<td>PO BOX 5083 PALO ALTO, CA 94303</td>
<td>20-2699147</td>
<td>501 (C) 3</td>
<td>340,000.</td>
<td>FMV</td>
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</table>

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<th>Name of the organization</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
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<tr>
<td>(1) EAST PALO ALTO TENNIS AND TUTORING</td>
<td>641 CAMPUS DR STANFORD, CA 94305</td>
<td>26-3316879</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) EAST PEORIA SCHOOL DISTRICT 309</td>
<td>1401 EAST WASHINGTON STREET EAST PEORIA, IL</td>
<td>37-6004694</td>
<td>501 (C) 3</td>
<td>59,247.</td>
<td>FMV</td>
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<tr>
<td>(3) EAST SAN GABRIEL VALLEY JAPANESE COMMUNITY</td>
<td>1203 W FUENTE AVE WEST COVINA, CA 91790</td>
<td>95-6100417</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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</tr>
<tr>
<td>(4) EAST SHORE UNITARIAN CHURCH</td>
<td>12700 SE 32ND ST BELLEVUE, WA 98005</td>
<td>91-6016043</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) EAST SIDE HOUSE INC</td>
<td>337 ALEXANDER AVE BRONX, NY 10454</td>
<td>13-1623989</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) EAST STROUDSBURG UNIVERSITY FOUNDATION</td>
<td>200 PROSPECT ST EAST STROUDSBURG, PA 18301</td>
<td>22-2826714</td>
<td>501 (C) 3</td>
<td>7,220.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) EAST TENNESSEE CHILDREN'S HOSPITAL ASSOCIATION</td>
<td>2018 W CLINCH AVE KNOXVILLE, TN 37916</td>
<td>62-6002604</td>
<td>501 (C) 3</td>
<td>5,334.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) EAST TENNESSEE FOUNDATION</td>
<td>520 W SUMMIT HILL DR STE 1101 KNOXVILLE, TN</td>
<td>62-0807696</td>
<td>501 (C) 3</td>
<td>32,210.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) EAST TENNESSEE PUBLIC COMMUNICATIONS CORPORATION</td>
<td>1611 E MAGNOLIA AVE KNOXVILLE, TN 37917</td>
<td>62-1173293</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) EAST TENNESSEE STATE UNIVERSITY FOUNDATION</td>
<td>PO BOX 7061 JOHNSON CITY, TN 37614</td>
<td>23-7092731</td>
<td>501 (C) 3</td>
<td>14,508.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) EASTBROOK CHURCH INC</td>
<td>5385 N GREEN BAY AVE MILWAUKEE, WI 53209</td>
<td>39-1364853</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(12) EASTERN SEALS DELAWARE &amp; MARYLANDS EASTERN S</td>
<td>61 CORPORATE CIR NEW CASTLE, DE 19720</td>
<td>51-0066728</td>
<td>501 (C) 3</td>
<td>5,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**  
   - Yes [X]  
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) EASTERN SEALS MASSACHUSETTS INC</td>
<td>04-2103867</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) EASTERN SEALS METROPOLITAN CHICAGO INC</td>
<td>36-2169153</td>
<td>501 (C) 3</td>
<td>17,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) EASTERN SEALS NEW HAMPSHIRE INC</td>
<td>02-0272825</td>
<td>501 (C) 3</td>
<td>115,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) EASTERN SEALS SERVING DC-MD-VA INC</td>
<td>53-0212296</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) EASTERN SEALS SOUTHERN CALIFORNIA INC</td>
<td>94-3068149</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) EASTERN AVENUE CHRISTIAN REFORMED CHURCH</td>
<td>38-1368331</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) EASTERN CHRISTIAN SCHOOL ASSOCIATION</td>
<td>22-1511329</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) EASTERN ILLINOIS FOODBANK</td>
<td>37-1130252</td>
<td>501 (C) 3</td>
<td>42,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) EASTERN KENTUCKY UNIV FOUNDATION INC GILTNE</td>
<td>61-1131682</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) EASTERN Mennonite Board of Missions and CHA</td>
<td>23-6005847</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) EASTERN SHORE LAND CONSERVANCY INC</td>
<td>20-1711989</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) EASTERN SHORE PRESBYTERIAN CHURCH</td>
<td>63-0868015</td>
<td>501 (C) 3</td>
<td>36,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**  

3. **Enter total number of other organizations listed in the line 1 table.**  

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes
   - [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| EASTERN TRAIL ALLIANCE  
PO BOX 250 SACO, ME 04072  
01-0523949  
501 (C) 3  
15,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 2 | | | | | | |
| EASTERN UNIVERSITY  
1300 EAGLE RD WAYNE, PA 19087  
23-1409675  
501 (C) 3  
14,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 3 | | | | | | |
| EASTMINISTER PRESBYTERIAN CHURCH, INC.  
3200 TRENHOLM ROAD COLUMBIA, SC 29204  
57-0370001  
501 (C) 3  
27,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 4 | | | | | | |
| EASTON COUNTRY DAY SCHOOL INC  
660 MOREHOUSE RD EASTON, CT 06602  
06-1375555  
501 (C) 3  
50,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 5 | | | | | | |
| EASTPOINT CHRISTIAN CHURCH  
345 CLARKS FOND PKWY SOUTH PORTLAND, ME 410  
20-0484077  
501 (C) 3  
41,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 6 | | | | | | |
| EASTSIDE ARTS ALLIANCE  
PO BOX 17088 OAKLAND, CA 94601  
74-3073621  
501 (C) 3  
211,765.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 7 | | | | | | |
| EASTSIDE COLLEGE PREPARATORY SCHOOL INC  
1041 MYRTLE ST EAST PALO ALTO, CA 94303  
94-3187806  
501 (C) 3  
459,083.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 8 | | | | | | |
| EASTSIDE PREPARATORY SCHOOL  
10613 NE 38TH PL KIRKLAND, WA 98033  
37-1430960  
501 (C) 3  
24,100.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 9 | | | | | | |
| EASTSIDE RETIREMENT ASSOCIATION  
10901 176TH CT NE REDMOND, WA 98052  
91-1261904  
501 (C) 3  
7,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 10 | | | | | | |
| EASTWEST FOOD RESCUE  
PO BOX 593 BOTHELL, WA 98041  
85-1100467  
501 (C) 3  
25,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 11 | | | | | | |
| EAST-WEST MINISTRIES INTERNATIONAL  
2001 W PLANO PKWY STE 3000 PLANO, TX 75075  
75-2486132  
501 (C) 3  
28,278.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | 12 | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .............................................................. X Yes  No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>EATS PARK CITY</td>
<td>46-4131176</td>
<td>501 (C) 3</td>
<td>11,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>EAU CLAIRE PUBLIC SCHOOLS FOUNDATION INC</td>
<td>26-1877961</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3</td>
<td>EBENEZER AFRICAN METHODIST EPISCOPAL CHURCH</td>
<td>52-1404817</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>EBENEZER EC CHURCH</td>
<td>23-2020916</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>ECD GLOBAL ALLIANCE INC</td>
<td>27-0759192</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ECHO CHURCH</td>
<td>22-3979908</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>ECHO FOUNDATION</td>
<td>95-2654447</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>ECHO INC</td>
<td>54-0852799</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ECHO INC</td>
<td>23-7275283</td>
<td>501 (C) 3</td>
<td>48,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>ECHOING GREEN INC</td>
<td>13-3424419</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>ECHELON COLLEGE</td>
<td>59-0859121</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>ECHO CENTER INC</td>
<td>80-0308638</td>
<td>501 (C) 3</td>
<td>126,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3  Enter total number of other organizations listed in the line 1 table ..............................................................
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   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. ECOCATALYST FOUNDATION INC  
   PO BOX 105 THE PLAINS, VA 20198  
   52-2213922  
   501 (c) 3  
   50,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 2. ECO-CYCLE INC  
   1901 63RD ST BOULDER, CO 80301  
   84-0730811  
   501 (c) 3  
   11,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 3. ECO-INSTITUTE AT PICKARDS MOUNTAIN INC  
   8519 PICKARDS MEADOW RD CHAPEL HILL, NC 275  
   82-2032530  
   501 (c) 3  
   26,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 4. ECOLE BILINGUE  
   1009 HEINZ AVE BERKELEY, CA 94710  
   94-2427286  
   501 (c) 3  
   25,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 5. ECONOMIC POLICY INSTITUTE  
   1225 EYE ST NW 600 WASHINGTON, DC 20005  
   52-1368964  
   501 (c) 3  
   11,080.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 6. ECONOMICS CENTER FOR EDUCATION AND RESEARCH  
   225 CALHOUN ST STE 370 CINCINNATI, OH 45219  
   31-0898481  
   501 (c) 3  
   34,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 7. ECOTRUST  
   721 NW 9TH AVE STE 200 PORTLAND, OR 97209  
   93-1050144  
   501 (c) 3  
   14,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 8. ECUMENICAL ASSEMBLY OF BARTHOLOMEW COUNTY C  
   311 CENTER ST COLUMBUS, IN 47201  
   35-6226589  
   501 (c) 3  
   36,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 9. ECUMENICAL HUNGER PROGRAM  
   2411 PULGAS AVE EAST PALO ALTO, CA 94303  
   94-2476942  
   501 (c) 3  
   88,100.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 10. ECUMENICAL MINISTRIES OF OREGON  
   0245 SW BANCROFT ST PORTLAND, OR 97239  
   93-0625359  
   501 (c) 3  
   7,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 11. EDCHOICE INC  
   111 MONUMENT CIR STE 2650 INDIANAPOLIS, IN  
   35-1978359  
   501 (c) 3  
   460,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |
| 12. EDEN HOME INC  
   631 LAKEVIEW BLVD NEW BRAUNFELS, TX 78130  
   74-1143030  
   501 (c) 3  
   25,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM | | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>EDEN REFORESTATION PROJECTS</td>
<td>95-4804581</td>
<td>501 (C) 3</td>
<td>66,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>EDEN VILLAGE OF WILMINGTON</td>
<td>84-4629801</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
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<td>3</td>
<td>EDESIA INC</td>
<td>26-0359866</td>
<td>501 (C) 3</td>
<td>16,611.</td>
<td>FMV</td>
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<td>EDGECOMB FIRE DEPARTMENT AUXILIARY</td>
<td>27-0526731</td>
<td>501 (C) 3</td>
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<td>5</td>
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<td>39-6020036</td>
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<td>6</td>
<td>EDGEWOOD BAPTIST CHURCH, INC.</td>
<td>61-0738804</td>
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<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>EDGEWOOD CENTER FOR CHILDREN AND FAMILIES</td>
<td>94-1186168</td>
<td>501 (C) 3</td>
<td>14,000.</td>
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<td>8</td>
<td>EDGEWOOD HIGH SCHOOL</td>
<td>39-1299613</td>
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<td>9</td>
<td>EDIFY</td>
<td>27-0892545</td>
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<td>10</td>
<td>EDINA ARC FOUNDATION</td>
<td>23-7151499</td>
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<td>11</td>
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<td>12</td>
<td>EIDAVITCH JEWISH COMMUNITY CENTER OF WASHING</td>
<td>52-1398151</td>
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<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>EDMONDS COMMUNITY COLLEGE FOUNDATION</td>
<td>91-1186554</td>
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<td>EDMONDS FOOD BANK</td>
<td>84-2209131</td>
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<td>3</td>
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<td>52-0883668</td>
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<td>FMV</td>
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<td>4</td>
<td>EDUCATING COMMUNITIES FOR PARENTING</td>
<td>23-2344278</td>
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<td>EDUCATION AND HOPE</td>
<td>06-1532033</td>
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<td>6</td>
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<td>27-0832096</td>
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<td>8</td>
<td>EDUCATION FOUNDATION OF EAGLE COUNTY</td>
<td>84-1585417</td>
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<td>9</td>
<td>EDUCATION LAW CENTER - PA</td>
<td>23-2581102</td>
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<td>EDUCATION LAW CENTER INC</td>
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<td>11</td>
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<td>83-1086088</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>EDUCATION THROUGH MUSIC INC</td>
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<td>501 (c) 3</td>
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<td>EDUCATION TRUST INC</td>
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<td>FMV</td>
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<td>EDUCATIONAL ALLIANCE INC</td>
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<td>EDUCATIONAL FUND TO STOP GUN VIOLENCE</td>
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<td>501 (c) 3</td>
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<td>EDUCATORS FOR EXCELLENCE</td>
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<td>EDWARD HOFER HOUSE MUSEUM AND STUDY CENTER</td>
<td>23-7189734</td>
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<td>EDWARD ILL EXCELLENCE IN MEDICINE ASSOCIAT</td>
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<td>EDWARD M KENNEDY INSTITUTE FOR THE UNITED S</td>
<td>27-0963869</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<td>EDWARDS CENTER INC PO BOX 6269 BEAVERTON, OR 97007 93-0630002 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EDWARDSVILLE FIRST PRESBYTERIAN CHURCH 3601 RIDGE VIEW ROAD EDWARDSVILLE, IL 62025 37-0673500 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EPCF TEXAS OKLAHOMA 1638 MEADOW SKY NEW BRAUNFELS, TX 78132 74-6181417 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EHLERS- ANDLOS RESEARCH FOUNDATION 1700 REISTERSTOWN RD STE 226 PIKESVILLE, MD 84-4482546 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EIGHT DAYS OF HOPE INC PO BOX 3208 TUPELO, MS 38803 75-3212540 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EIGHT STREET MENNONITE CHURCH 602 SOUTH 8TH STREET GOSHEN, IN 46526 35-1078922 501 (C) 3 19,775. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EISENHOWER EXCHANGE FELLOWSHIPS INC 250 S 16TH ST PHILADELPHIA, PA 19102 23-1505095 501 (C) 3 200,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EISENHOWER MEDICAL CENTER 39000 BOB HOPE DR RANCHO MIRAGE, CA 92270 85-6130458 501 (C) 3 212,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EITTELJORG MUSEUM OF AMERICAN INDIANS AND WE 500 W WASHINGTON ST INDIANAPOLIS, IN 46204 31-1139447 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>EKAL VIDYALAYA FOUNDATION OF USA INC PO BOX 821369 HOUSTON, TX 77282 77-0554248 501 (C) 3 72,097. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EKVNV YEFOCLEVLYKE 16391 COOSA COUNTY ROAD 29 WEOGUFKA, AL 351 81-2293314 501 (C) 3 235,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EL CAMINO COMMUNITY COLLEGE DISTRICT FOUND 16007 CHERNASH BLVD TORRANCE, CA 90506 95-3874302 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990. 

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td><strong>1</strong> EL CAMINO HOSPITAL FOUNDATION</td>
<td>94-2823235</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2500 GRANT RD MOUNTAIN VIEW, CA 94040</td>
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<td><strong>2</strong> EL CENTRO HISPANO INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>346 S LEXINGTON AVE WHITE PLAINS, NY 10606</td>
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</tr>
<tr>
<td><strong>3</strong> EL EDUCATION INC</td>
<td>06-1576405</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>247 W 35TH ST FL 8 NEW YORK, NY 10001</td>
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<tr>
<td><strong>4</strong> EL HOGAR MINISTRIES INC</td>
<td>04-3580644</td>
<td>501 (C) 3</td>
<td>24,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>29 CUMMINGS PARK STE 404 WOBURN, MA 1801</td>
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<tr>
<td><strong>5</strong> EL MONTECITO PRESBYTERIAN CHURCH</td>
<td>95-2281443</td>
<td>501 (C) 3</td>
<td>30,000.</td>
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<td>1455 E VALLEY RD SANTA BARBARA, CA 93108</td>
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<td><strong>6</strong> EL MONTE-SOUTH EL MONTE EMERGENCY RESOURCES</td>
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<td>11,000.</td>
<td>FMV</td>
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<tr>
<td>10900 MULHALL ST EL MONTE, CA 91731</td>
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<td><strong>7</strong> EL PADRECITO MINISTRIES</td>
<td>20-5986583</td>
<td>501 (C) 3</td>
<td>201,000.</td>
<td>FMV</td>
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<tr>
<td>960 GUADALUPE ST STE A GUADALUPE, CA 93434</td>
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<tr>
<td><strong>8</strong> EL PASO BORDER YOUTH ATHLETIC ASSOCIATION</td>
<td>74-2942336</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6801 COMMERCE AVE EL PASO, TX 79915</td>
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<tr>
<td><strong>9</strong> EL PASOANS FIGHTING HUNGER</td>
<td>45-2893839</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td><strong>10</strong> EL PASOANS FOR LIFE INC</td>
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<tr>
<td>PO BOX 963338 EL PASO, TX 79996</td>
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<tr>
<td><strong>11</strong> EL RIO HEALTH CENTER FOUNDATION INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>450 W PASEO REDONDO TUCSON, AZ 85701</td>
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<td><strong>12</strong> EL SISTEMA USA</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 945 DURHAM, NC 27702</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>EL TRIUNFO CONSERVATION FOUNDATION</td>
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<tr>
<td>PO BOX 41 DELMAR, NY 12054</td>
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<tr>
<td>ELAINA KAUFMAN CULTURAL CENTER-LUCY MOSES S</td>
<td>13-1991118</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
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<tr>
<td>129 W 67TH ST NEW YORK, NY 10023</td>
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<td>ELAM MINISTRIES INC</td>
<td>58-2134253</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5755 N POINT PKWY STE 217 ALPHARETTA, GA 30</td>
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<td>ELDERGHOSTEL INC</td>
<td>04-2632526</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11 AVENUE DE LAFAYETTE BOSTON, MA 2111</td>
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<td>ELDERNET OF LOWER MERION AND NARBERTH</td>
<td>23-2005485</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9 S BRYN MAWR AVE BRYN MAWR, PA 19010</td>
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<td>ELEANOR WHITMORE EARLY CHILDHOOD CENTER INC</td>
<td>11-2202589</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 63 EAST HAMPTON, NY 11937</td>
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<td>ELECTRONIC FRONTIER FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>353,231.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>815 EDDY ST SAN FRANCISCO, CA 94109</td>
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<td>ELECTRONIC PRIVACY INFORMATION CENTER</td>
<td>52-2225921</td>
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<td>32,500.</td>
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<tr>
<td>1519 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20</td>
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<td>ELEMENTARY INSTITUTE OF SCIENCE</td>
<td>94-1669545</td>
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<td>100,000.</td>
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<tr>
<td>608 51ST ST SAN DIEGO, CA 92114</td>
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<td>ELEPHANT CLUB</td>
<td>81-3209656</td>
<td>501 (C) 3</td>
<td>44,090.</td>
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<td>N/A</td>
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<tr>
<td>110 E AVENIDA PALIZADA STE 301 SAN CLEMENTE</td>
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<td>ELES PLACE INC</td>
<td>38-2976751</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1145 W OAKLAND AVE LANSING, MI 48915</td>
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<tr>
<td>ELEVATE NEW ENGLAND INC</td>
<td>81-2111126</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>403 ANDOVER ST LOWELL, MA 1852</td>
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</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td><strong>(1) ELEVATE USA</strong></td>
<td>5310 WARD RD STE G05 ARVADA, CO 80002</td>
<td>46-3637392</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(2) ELEVATED THOUGHT FOUNDATION INC</strong></td>
<td>15 UNION ST LAWRENCE, MA 1840</td>
<td>27-3519031</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(3) ELEVATOR REPAIR SERVICE THEATER INC</strong></td>
<td>47 GREAT JONES ST FL 3 NEW YORK, NY 10012</td>
<td>12-3787877</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(4) EL WHITNEY MUSEUM INC</strong></td>
<td>915 WHITNEY AVE HAMDEN, CT 6517</td>
<td>06-0952478</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(5) ELIJAH HOUSE ACADEMY</strong></td>
<td>6627 JAHNKE RD STE B RICHMOND, VA 23225</td>
<td>54-1522331</td>
<td>501 (C) 3</td>
<td>600,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(6) ELIJAH MINYAN</strong></td>
<td>3207 CADENCIA ST CARLSBAD, CA 92009</td>
<td>33-0526370</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(7) ELIJAH PROMISE</strong></td>
<td>211 LIVINGSTON AVE NEW BRUNSWICK, NJ 8901</td>
<td>22-3055539</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(8) ELLING S PARK FOUNDATION</strong></td>
<td>1298 LAS POSITAS RD SANTA BARBARA, CA 93105</td>
<td>95-3500475</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(9) ELIZABETH MORROW SCHOOL</strong></td>
<td>480 NEXT DAY HILL DRIVE ENGLEWOOD, NJ 7631</td>
<td>22-1487171</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(10) ELSHA FOUNDATION INC</strong></td>
<td>818 SW 3RD AVE # 1415 PORTLAND, OR 97204</td>
<td>20-5458291</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(11) ELIZABETH CITY EVANGELICAL METHODIST CHURCH</strong></td>
<td>GIVING 820 OLD OKISKO ROAD ELIZABETH CITY,</td>
<td>56-1299169</td>
<td>501 (C) 3</td>
<td>22,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(12) ELIZABETH F GAMBLE GARDEN</strong></td>
<td>1431 WAVELEY ST PALO ALTO, CA 94301</td>
<td>77-0094213</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [X]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ELIZABETH SETON HIGH SCHOOL UNITED STATES C</td>
<td>52-0729718</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
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<td>3</td>
<td>ELIZABETH SETON RESIDENCE INC</td>
<td>04-2648872</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>ELIZABETHTOWN BRETHREN IN CHRIST CHURCH</td>
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<td>23-1352632</td>
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<td>FMV</td>
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<td>6</td>
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<td>23-7071154</td>
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<td>16,000.</td>
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<td>N/A</td>
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<td>ELLA BAKER CENTER FOR HUMAN RIGHTS IN CALIF</td>
<td>94-3252009</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>ELLIS SCHOOL</td>
<td>25-0965329</td>
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<td>36,500.</td>
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<td>11</td>
<td>ELLYN SATTER INSTITUTE INC</td>
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<td>39-1159457</td>
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<td>FMV</td>
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## SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

**Part II**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>(a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
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## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) EMERALD CITY MUSIC 3520 HOADLY ST SE TUMWATER, WA 98501</td>
<td>47-4275662</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) EMERALD NECKLACE CONSERVANCY INC 125 PENWAY BOSTON, MA 2115</td>
<td>04-3414988</td>
<td>501 (C) 3</td>
<td>24,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) EMERGE COMMUNITY DEVELOPMENT 1179 15TH AVE SE MINNEAPOLIS, MN 55414</td>
<td>41-1277423</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<tr>
<td>(4) EMERGE FELLOWSHIP 11251 NORTHWEST FWY STE 330 HOUSTON, TX 770</td>
<td>45-4077397</td>
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<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) EMERGENCY ASSISTANCE FOUNDATION INC 700 S DIXIE HWY STE 200 WEST PALM BCH, FL 3</td>
<td>45-1813056</td>
<td>501 (C) 3</td>
<td>357,500</td>
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<tr>
<td>(6) EMERGENCY FAMILY ASSISTANCE ASSOCIATION INC 1575 YARMOUTH AVE BOULDER, CO 80304</td>
<td>84-0454115</td>
<td>501 (C) 3</td>
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<td>(7) EMERGENCY FOOD NETWORK OF TACOMA AND PIERCE 3318 92ND ST S LAKWOOD, WA 98499</td>
<td>94-313776</td>
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<td>FMV</td>
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<tr>
<td>(8) EMERGENT ORDER FOUNDATION INC 4450 FRONTIER TRL AUSTIN, TX 78745</td>
<td>85-3369351</td>
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<td>100,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) EMERGING PRAIRIE 122 12 NORTH BROADWAY FARGO, ND 58102</td>
<td>81-0742137</td>
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<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) EMILY GRIFFITH FOUNDATION INC 1860 N LINCOLN ST STE 605 DENVER, CO 80203</td>
<td>84-1169001</td>
<td>501 (C) 3</td>
<td>18,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) EMILY KRZYZEWSKI FAMILY LIFE CENTER INC 904 W CHAPEL HILL ST DURHAM, NC 27701</td>
<td>56-2230469</td>
<td>501 (C) 3</td>
<td>18,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) EMMA WILLARD SCHOOL 285 PAWLING AVE TROY, NY 12180</td>
<td>14-1338390</td>
<td>501 (C) 3</td>
<td>40,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) EMANUEL BAPTIST CHURCH</td>
<td>4612 RICE MINE ROAD NE TUSCALOOSA, TX 77808</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) EMANUEL BAPTIST CHURCH</td>
<td>7320 STEEP HOLLOW RD BRYAN, AL 35406</td>
<td>501 (C) 3</td>
<td>8,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) EMANUEL BAPTIST CHURCH OF XENIA, OHIO</td>
<td>1120 SOUTH DETROIT STREET XENIA, OH 45385</td>
<td>501 (C) 3</td>
<td>10,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) EMANUEL COLLEGE</td>
<td>400 THE FENWAY ADM 336 BOSTON, MA 2115</td>
<td>501 (C) 3</td>
<td>61,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) EMANUEL EPISCOPAL CHURCH - MERCER ISLAND</td>
<td>4400 86TH AVENUE SOUTHEAST MERCER ISLAND, W</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) EMANUEL EPISCOPAL PARISH OF ORCAS ISLAND</td>
<td>PO BOX 8 EASTSOUND, WA 98245</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) EMANUEL FAITH COMMUNITY CHURCH INC</td>
<td>633 E 17TH AVE ESCONDIDO, CA 92025</td>
<td>501 (C) 3</td>
<td>70,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) EMANUEL GOSPEL CENTER INC</td>
<td>44 MOULTRIE ST DORCHESTER, MA 2124</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(10) EMANUEL KINGDOM MINISTRIES</td>
<td>PO BOX 147 EL PASO, TX 79942</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(11) EMANUEL LUTHERAN CHURCH</td>
<td>2589 CHAIN BRIDGE RD VIENNA, VA 22181</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>790 TAMIAMI TRL S VENICE, FL 34285</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..................................................

Enter total number of other organizations listed in the line 1 table ..................................................
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. EMMANUS INSTITUTE FOR BIBLICAL STUDIES</td>
<td>3901 NORMAL BLVD STE 101 LINCOLN, NE 68506</td>
<td>83-1313821</td>
<td>501 (C) 3</td>
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<td>2. EMMANUS PUBLIC LIBRARY</td>
<td>11 E MAIN ST EMMANUS, PA 18049</td>
<td>23-1443435</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. EMMANUS UNITED METHODIST CHURCH</td>
<td>715 MORRIS ST. ALBANY, NY 12208</td>
<td>33-1043017</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. EMORY UNIVERSITY</td>
<td>PO BOX 201 ATLANTA, GA 30322</td>
<td>58-2298500</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. EMORY UNIVERSITY</td>
<td>1599 CLIFTON ROAD 3RD FLOOR 3101 ATLANTA, GA</td>
<td>58-0566256</td>
<td>501 (C) 3</td>
<td>170,200.</td>
<td>FMV</td>
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<tr>
<td>6. EMPIRE CENTER FOR PUBLIC POLICY INC</td>
<td>30 S PEARL ST ALBANY, NY 12207</td>
<td>46-1987418</td>
<td>501 (C) 3</td>
<td>94,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. EMPIRE STATE COLLEGE FDN INC</td>
<td>2 UNION AVE SARATOGA SPRINGS, NY 12866</td>
<td>51-0193595</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8. EMPORIA COMMUNITY FOUNDATION</td>
<td>527 COMMERCIAL ST STE B EMPORIA, KS 66801</td>
<td>48-1169158</td>
<td>501 (C) 3</td>
<td>11,250.</td>
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<td>9. EMPORIA STATE UNIVERSITY FOUNDATION</td>
<td>1500 HIGHLAND ST EMPORIA, KS 66801</td>
<td>48-6088461</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>137 WASHINGTON ST NORWELL, MA 0621</td>
<td>46-3196791</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>11. EMPOWER MISSISSIPPI FOUNDATION</td>
<td>1000 NORTH PARK DR RIDGELAND, MS 39157</td>
<td>46-4565274</td>
<td>501 (C) 3</td>
<td>26,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12. EMPOWER TEXANS FOUNDATION</td>
<td>1501 LEANDER DR STE 1 LEANDER, TX 78641</td>
<td>27-1553324</td>
<td>501 (C) 3</td>
<td>1,680,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) EMPOWER WORK INC  
PO BOX 170562 SAN FRANCISCO, CA 94117  
82-2696116  
501 (C) 3  
13,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (2) EMPOWER-EMERGING MARKETS FOUNDATION  
111 JOHN ST RM 2410 NEW YORK, NY 10038  
03-0529006  
501 (C) 3  
122,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (3) EMPOWERING ACTION  
3609 HILL ST FAIRFAX, VA 22030  
46-1509861  
501 (C) 3  
12,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (4) EMPOWERING STUDENTS FOR SUCCESS INC  
623 BEAR CLAW WAY MIDDLETON, WI 53562  
83-4554057  
501 (C) 3  
25,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (5) EMPOWERS AFRICA INC  
2 BEERMAN PL NEW YORK, NY 10022  
32-0403737  
501 (C) 3  
6,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (6) EMS PONY HELP FUND  
PO BOX 25253 BROOKLYN, NY 11202  
82-3543257  
501 (C) 3  
19,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (7) EMUNAH OF AMERICA INC  
500 FASHION AVE FL 8A NEW YORK, NY 10018  
13-2670365  
501 (C) 3  
5,800.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (8) ENACTE ARTS INC  
7 RIVERWAY UNIT 2008 HOUSTON, TX 77056  
45-5339203  
501 (C) 3  
11,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (9) ENCAMPMENT FOR CITIZENSHIP  
PO BOX 1210 APTOS, CA 95001  
30-0694938  
501 (C) 3  
7,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (10) ENCOUNTER COMMUNITY CHURCH  
2111 SUMMER WALK OWENSBORO, KY 42303  
46-3272793  
501 (C) 3  
37,200.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (11) ENCOUNTER PROGRAMS INCORPORATED  
25 BROADWAY FL 9 NEW YORK, NY 10004  
26-0593832  
501 (C) 3  
22,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| (12) END FUND INC  
2 PARK AVE FL 18 NEW YORK, NY 10016  
27-3941186  
501 (C) 3  
30,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>END OF LIFE CHOICES - OREGON</td>
<td>81-3874094</td>
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<td>91-1412987</td>
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<td>6</td>
<td>ENDOIDMENT OF THE UNITED STATES INSTITUTE OF</td>
<td>52-1503251</td>
<td>501 (C) 3</td>
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<td>ENDURING WORD</td>
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<td>ENERGIZE THE CHAIN</td>
<td>32-0321770</td>
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<td>ENGAGED LATINO PARENTS ADVANCING STUDENT OU</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

3. Enter total number of other organizations listed in the line 1 table:  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1. ENGENDERSHEALTH INC 505 9TH ST NW STE 601 WASHINGTON, DC 20004 13-1623838 501 (C) 3</td>
<td>N/A</td>
<td>N/A</td>
<td>7,645.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2. ENGINEERING MINISTRIES INTERNATIONAL USA 130 E KIOMA ST STE 200 COLORADO SPRINGS, CO 74-2213629 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3. ENGINEERS ALLIANCE FOR THE ARTS 2125 IGNACIO VALLEY RD WALNUT CREEK, CA 945 94-3320685 501 (C) 3</td>
<td>N/A</td>
<td>N/A</td>
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<td>FMV</td>
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<td>4. ENGINEERS IN ACTION 6910 E 14TH ST TULA, OK 74112 26-1746131 501 (C) 3</td>
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<td>5. ENGINEERS WITHOUT BORDERS USA INC 1031 33RD ST STE 210 DENVER, CO 80205 84-1589324 501 (C) 3</td>
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<tr>
<td>6. ENGLISH CIVIC THEATRE INC NON PROFIT 221 E WASHINGTON ST IOWA CITY, IA 52240 42-1508154 501 (C) 3</td>
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<td>7. ENGLEWOOD COMMUNITY CARE CLINIC INC PO BOX 189 ENGLEWOOD, FL 34295 27-1035312 501 (C) 3</td>
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<td>8. ENGLEWOOD HOSPITAL AND MEDICAL CENTER FOUND 350 ENGLE ST ENGLEWOOD, NJ 7631 22-3367281 501 (C) 3</td>
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<td>9. ENGLISH FOR NEW BOSTONIANS INC 105 CHAUNCY ST FL 4 BOSTON, MA 2111 46-3202177 501 (C) 3</td>
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<td>101,000.</td>
<td>FMV</td>
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<tr>
<td>10. ENGLISH LANGUAGE INSTITUTE IN CHINA 1629 BLUE SPRUCE DR FORT COLLINS, CO 80524 95-3551085 501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>11. ENID SPORTS ASSOCIATION 3514 MILTON AVE DALLAS, TX 75205 82-2116597 501 (C) 3</td>
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<tr>
<td>12. ENLIE HOSPITAL FOUNDATION 1531 ELSONAE CHICO, CA 95926 94-2989552 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>ENSEMBLE THEATRE OF CINCINNATI</td>
<td>ENSEMBLE THEATRE OF CINCINNATI</td>
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<td>1127 VINE ST CINCINNATI, OH 45202</td>
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<tr>
<td>7401 HIGHWAY 100 NASHVILLE, TN 37221</td>
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<td>ENVIRONMENTAL ADVOCATES NY INC</td>
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<td>501 (C) 3</td>
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<td>ENVIRONMENTAL ADVOCATES NY INC</td>
<td>ENVIRONMENTAL ADVOCATES NY INC</td>
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<tr>
<td>353 HAMILTON ST ALBANY, NY 12210</td>
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<tr>
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<td>52-1268030</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td>ENVIRONMENTAL AND ENERGY STUDY INSTITUTE</td>
<td>ENVIRONMENTAL AND ENERGY STUDY INSTITUTE</td>
</tr>
<tr>
<td>1020 19TH ST NW STE 650 WASHINGTON, DC 2003</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>ENVIRONMENTAL AND ENERGY STUDY INSTITUTE</td>
</tr>
</tbody>
</table>

**18674H 1467**

V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>ENVIRONMENTAL DEFENSE CENTER</td>
<td>77-0061994</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>3</td>
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<td>FMV</td>
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<td>4</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

Grants and Other Assistance to Governments,  
Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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

Name of the organization:  
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number:  
23-2888152

Part I  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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3. Enter total number of other organizations listed in the line 1 table: ________________

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

Schedule I (Form 990) 2020
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

#### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  No [-]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

#### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th></th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.

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

**Schedule I (Form 990) 2020**
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

[Attach to Form 990.]

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>EPISCOPAL DIOCESE OF GEORGIA 18 E 34TH ST SAVANNAH, GA 31401</td>
<td>58-0566215</td>
<td>501 (C) 3</td>
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<td>72-0650540</td>
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<td>7,500.</td>
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<td>EPISCOPAL RELIEF AND DEVELOPMENT 815 2ND AVE FL 3 NEW YORK, NY 10017</td>
<td>73-1635264</td>
<td>501 (C) 3</td>
<td>71,821.</td>
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<td>EPISCOPAL SCHOOL IN THE CITY OF NEW YORK 35 E 69TH ST NEW YORK, NY 10021</td>
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<td>EPISCOPAL SCHOOL OF DALLAS INC</td>
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<td>EPISCOPAL THEOLOGICAL SEMINARY OF THE SOUTH 501 E 32ND ST AUSTIN, TX 78705</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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---

## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td><strong>EQUAL CITIZENS FOUNDATION</strong></td>
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<tr>
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<td><strong>EQUAL JUSTICE AMERICA INC</strong></td>
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<tr>
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<td>6</td>
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<td>FMV</td>
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<td>7</td>
<td><strong>EQUALITY FEDERATION INSTITUTE</strong></td>
<td>818 SW 3RD AVE # 141 PORTLAND, OR 97204</td>
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<td>8</td>
<td><strong>EQUALITY NORTH CAROLINA FOUNDATION</strong></td>
<td>PO BOX 28768 RALEIGH, NC 27611</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td><strong>EQUALLY AMERICAN LEGAL DEFENSE AND EDUCATION</strong></td>
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<td>11</td>
<td><strong>EQUAMORE FOUNDATION</strong></td>
<td>4723 HIGHWAY 66 ASHLAND, OR 97520</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA

DE1288 1.000

18674H 1467 V 20-7.21
### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>PO BOX 331821 NASHVILLE, TN 37203</td>
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<td>12. ESALEN INSTITUTE</td>
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<tr>
<td>548 MARKET ST FMB 48853 SAN FRANCISCO, CA 9</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ☑ Yes  ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>ESCAPE YGK 202 E 32ND ST HOLLAND, MI 49423</td>
<td>45-3015164</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>ESCUELA DE GUADALUPE ELEMENTARY SCHOOL 660 JULIAN ST DENVER, CO 80204</td>
<td>31-1652842</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ESF COLLEGE FOUNDATION INC PO BOX 6486 SYRACUSE, NY 13217</td>
<td>15-6023443</td>
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<td>227,800.</td>
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<td>ESHEL 115 E 23RD ST NEW YORK, NY 10010</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ESPECIALLY THE FAMILY 4009 CLOUDCREST DR PLANO, TX 75074</td>
<td>45-3788352</td>
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<td>ESPERANZA INC 1911 W EARLL DR PHOENIX, AZ 85015</td>
<td>23-7087997</td>
<td>501 (C) 3</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ESPERANZA ACADEMY INC 198 GARDEN ST LAWRENCE, MA 1840</td>
<td>73-1722348</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ESPERANZA INC 2800 TATES CREEK RD LEXINGTON, KY 40502</td>
<td>37-1910596</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ESPERANZA INTERNATIONAL FOUNDATION 13219 NE 20TH ST STE 208 BELLEVUE, WA 98005</td>
<td>91-1585511</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ESPERANZA SHELTER FOR BATTERED FAMILIES 3130 RUFINA ST SANTA FE, NM 87507</td>
<td>85-0313174</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
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<td>ESPLANADE ASSOCIATION INC 575 BOYOLSTON ST STE 4R BOSTON, MA 2116</td>
<td>04-3550635</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ESSEX ALLIANCE CHURCH OF THE CHRISTIAN MISS 36 OLD STAGE RD ESSEX JUNCTION, VT 5452</td>
<td>03-0274481</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*> Attach to Form 990.*

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>175 ANDOVER ST STE 101 DANVERS, MA 01923</td>
<td>04-3407816</td>
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<td>74 S COMMON ST LYNN, MA 01922</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>82 EASTERN AVE ESSEX, MA 01929</td>
<td>04-2664297</td>
<td>501 (c) 3</td>
<td>54,390.</td>
<td>FMV</td>
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3. Enter total number of other organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>ETHNOS360 INC 312 W 1ST ST SANFORD, FL 32771</td>
<td>93-6024926</td>
<td>501 (C) 3</td>
<td>37,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ETHOS DISCOVERY 150 PRESIDENTIAL WAY STE 200 WOBURNS, MA 180</td>
<td>81-1002068</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<tr>
<td>ETTA PROJECTS 509 N J ST TACOMA, WA 98403</td>
<td>33-1055457</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ETV ENDOWMENT OF SOUTH CAROLINA INC 401 E KENNEDY ST STE B1 SPARTANBURG, SC 293</td>
<td>57-0657549</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ETZION FOUNDATION INC 111 GALWAY PL STE 203 TEANECK, NJ 7666</td>
<td>23-7228230</td>
<td>501 (C) 3</td>
<td>17,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EUDORA SCHOOLS FOUNDATION INC PO BOX 500 EUDORA, KS 66025</td>
<td>03-0557553</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>EUGENE BALLET 1590 WILLAMETTE ST # 100 EUGENE, OR 97401</td>
<td>93-0765746</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EUGENE MISSION PO BOX 1149 EUGENE, OR 97440</td>
<td>93-0563797</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>EUGENE ONEILL MEMORIAL THEATER CENTER INC 305 GREAT NECK RD WATERFORD, CT 6385</td>
<td>06-6070900</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>EUGENE PUBLIC LIBRARY FOUNDATION 100 W 10TH AVE STE 317 EUGENE, OR 97401</td>
<td>93-0873279</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EVANGELICAL ALLIANCE MISSION PO BOX 969 WHEATON, IL 60187</td>
<td>36-2169146</td>
<td>501 (C) 3</td>
<td>25,175.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>EVANGELICAL BAPTIST CHURCH OF FREEHOLD, INC 108 WATERWORKS ROAD FREEHOLD, NJ 7728</td>
<td>23-7221831</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - Yes ☑️  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) EVANGELICAL COVENANT CHURCH  
8303 W HIGGINS RD CHICAGO, IL 60631 | 36-2167730 | 501 (C) 3 | 21,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) EVANGELICAL COVENANT CHURCH KENT WA  
12010 SE 240TH ST KENT, WA 98031 | 91-0826279 | 501 (C) 3 | 36,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) EVANGELICAL ENVIRONMENTAL NETWORK  
24 E FRANKLIN ST NEW FREEDOM, PA 17349 | 23-2827214 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) EVANGELICAL FELLOWSHIP  
5000 SW 49TH AVE AMARILLO, TX 79109 | 75-1851101 | 501 (C) 3 | 14,580. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) EVANGELICAL FREE CHURCH  
3000 E MAIN ST CANON CITY, CO 81212 | 84-0936907 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) EVANGELICAL FREE CHURCH OF COLUMBIA  
600 SILVEY ST COLUMBIA, MO 65203 | 43-1071631 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) EVANGELICAL FREE CHURCH OF HERSHEY  
330 HILLTOP RD HUMMELSTOWN, PA 17036 | 23-1878116 | 501 (C) 3 | 52,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) EVANGELICAL LUTHERAN CHURCH IN AMERICA  
8765 W HIGGINS RD CHICAGO, IL 60631 | 41-1568278 | 501 (C) 3 | 255,450. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) EVANGELICAL LUTHERAN CHURCH IN AMERICA  
9041 166TH AVE NE REDMOND, WA 98052 | 91-0722061 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) EVANGELICAL LUTHERAN CHURCH OF OUR SAVIOR - 12 FRANKLIN AVENUE FORT WASHINGTON, NY 1105 | 11-2017006 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) EVANGELICAL LUTHERAN CHURCH OF THE GOOD SHE  
7701 KENWOOD RD CINCINNATI, OH 45236 | 31-0710372 | 501 (C) 3 | 54,350. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) EVANGELICAL LUTHERAN SYNOD  
6 BROWNS CT MANKATO, MN 56001 | 23-7181739 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
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**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**  
23-2888152

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>(1) EVANGELICAL MOUNT OLIVET LUTHERAN CHURCH</td>
<td>5025 KNOX AVE S MINNEAPOLIS, MN 55419</td>
<td>41-0773766</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
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<td>(2) EVANGELICAL PRESBYTERIAN CHURCH INC</td>
<td>5850 T G LEE BLVD STE 510 ORLANDO, FL 32822</td>
<td>38-2329622</td>
<td>501 (C) 3</td>
<td>16,200.</td>
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<td>(3) EVANGELICAL REFORMED UNITED CHURCH</td>
<td>15 W CHURCH ST FREDERICK, MD 21701</td>
<td>52-0607985</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>9849 N 40TH ST PHOENIX, AZ 85028</td>
<td>86-6057707</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>(5) EVANGELICAL TRINITY CHURCH IN METRO CHICAGO</td>
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<td>36-3257894</td>
<td>501 (C) 3</td>
<td>7,400.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) EVANGELISM EXPLOSION III INTERNATIONAL INC</td>
<td>10 MISTY VALLEY PKWY ARDEN, NC 28704</td>
<td>23-7068456</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) EVANGELICANS FOUNDATION</td>
<td>2501 PATRIOT BLVD GLENVIEW, IL 60026</td>
<td>36-2518129</td>
<td>501 (C) 3</td>
<td>1,028,000.</td>
<td>FMV</td>
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<td>(8) EVANSTON COMMUNITY FOUNDATION INC</td>
<td>1560 SHERMAN AVE EVANSTON, IL 60201</td>
<td>36-3466802</td>
<td>501 (C) 3</td>
<td>66,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) EVANSTON SCHOLARS</td>
<td>1234 SHERMAN AVE STE 214 EVANSTON, IL 60202</td>
<td>90-0685357</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) EVANSTON SYMPHONY ORCHESTRA ASSOCIATION</td>
<td>PO BOX 778 EVANSTON, IL 60204</td>
<td>36-6108588</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(11) EVANSTON CHRISTIAN SCHOOL INC</td>
<td>4400 LINCOLN AVE EVANSTON, IN 47714</td>
<td>31-0017078</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) EVAS VILLAGE INC</td>
<td>393 MAIN ST PATerson, NJ 7501</td>
<td>22-2424542</td>
<td>501 (C) 3</td>
<td>13,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>EVELYN ALEXANDER WILDLIFE RESCUE CENTER INC</td>
<td>228 W MONTAUK HWY HAMPTON BAYS, NY 11946</td>
<td>11-3409551</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>EVEREST ACADEMY INC</td>
<td>5935 CLARKSTON RD CLARKSTON, MI 48348</td>
<td>38-2616320</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>EVERETTI GOSPEL MISSION</td>
<td>PO BOX 423 EVERETTI, WA 98206</td>
<td>91-0780146</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>EVERGREEN CHRISTIAN CHURCH</td>
<td>PO BOX 427 EVERGREEN, CO 80437</td>
<td>84-1356033</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>EVERGREEN COMMONS INC</td>
<td>480 STATE ST HOLLAND, MI 49423</td>
<td>38-2526940</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>EVERGREEN COMMUNITY CHURCH OF BOTHELL</td>
<td>3429 240TH ST SE BOTHELL, WA 98021</td>
<td>91-1647497</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>EVERGREEN FREEDOM FOUNDATION</td>
<td>PO BOX 552 OLYMPIA, WA 98507</td>
<td>94-3136961</td>
<td>501 (C) 3</td>
<td>94,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>EVERGREEN GLOBAL MINISTRIES INC</td>
<td>268 ALFRED DR CLAREMONT, CA 91711</td>
<td>82-3945831</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>EVERGREEN PRESBYTERIAN CHURCH</td>
<td>7275 SW HALL BLVD REAVERTON, OR 97008</td>
<td>93-1094514</td>
<td>501 (C) 3</td>
<td>30,120.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>EVERGREEN SCHOOL</td>
<td>15201 MERIDIAN AVE N SHORELINE, WA 98133</td>
<td>91-0756462</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>EVERGREEN STATE COLLEGE FOUNDATION</td>
<td>2700 EVERGREEN PKWY NW OLYMPIA, WA 98505</td>
<td>91-0981488</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>EVERGREEN TREATMENT SERVICES</td>
<td>1700 AIRPORT WAY S SEATTLE, WA 98134</td>
<td>91-0903529</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.


#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>EVERGREEN YOUTH &amp; FAMILY SERVICES INC</td>
<td>41-1297737</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERGREEN HEALTH FOUNDATION</td>
<td>91-1519430</td>
<td>501 (c) 3</td>
<td>150,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERY CHILD CENTRAL OREGON</td>
<td>84-2889978</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EVERY MEAL</td>
<td>80-0919680</td>
<td>501 (c) 3</td>
<td>31,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERY MOTHER COUNTS</td>
<td>45-4102644</td>
<td>501 (c) 3</td>
<td>7,850</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERY NATION CHURCHES &amp; MINISTRIES</td>
<td>33-0749629</td>
<td>501 (c) 3</td>
<td>14,650</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>EVERY VILLAGE</td>
<td>26-0653562</td>
<td>501 (c) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>EVERY VOICE CENTER</td>
<td>52-2003442</td>
<td>501 (c) 3</td>
<td>85,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EVERY CHILD FOUNDATION</td>
<td>31-1693985</td>
<td>501 (c) 3</td>
<td>32,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERYONE COOPERATING TO HELP OTHERS INC</td>
<td>39-1222279</td>
<td>501 (c) 3</td>
<td>14,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERYTOWN FOR GUN SAFETY SUPPORT FUND INC</td>
<td>26-1598353</td>
<td>501 (c) 3</td>
<td>1,163,840</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EVERYTHING DEFENSE COLLABORATIVE INC</td>
<td>94-3342323</td>
<td>501 (c) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>EVIDENCE ACTION INC 1101 K ST NW STE 900 WASHINGTON, DC 20005</td>
<td>90-0874591</td>
<td>501 (C) 3</td>
<td>450,925.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXCELLENCE FOR PARAGUAY INC 597 WILLOWSIDE RD SANTA ROSA, CA 95401</td>
<td>81-3602992</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXCEPTIONAL CHILDREN'S FOUNDATION A CORP 5350 MACHADO LN CULVER CITY, CA 90230</td>
<td>95-1690988</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXCHANGE CLUB CENTER FOR THE PREV OF CHILD 141 FRANKLIN ST STAMFORD, CT 6901</td>
<td>06-1398440</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXODUS FINANCIAL SERVICES 2380 WYCLIFF ST SUITE B-100 SAINT PAUL, MN</td>
<td>47-1706853</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXODUS OUTREACH FOUNDATION INC PO BOX 3311 HICKORY, NC 28603</td>
<td>56-2109492</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXODUS SCHOOL 309 E 103RD ST NEW YORK, NY 10029</td>
<td>13-3738559</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EXOTIC FELINE RESCUE CENTER INC 2221 E ASHBORO RD CENTERPOINT, IN 47840</td>
<td>35-1952727</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>EXPERIENCE CAMPS PO BOX 5121 WESTPORT, CT 6881</td>
<td>26-2513136</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>EXPERIMENTAL AIRCRAFT ASSOCIATION INC 3000 POBERENY RD OSHKOSH, WI 54902</td>
<td>39-0917537</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>EXPERIMENTAL STATION 6100 S BLACKSTONE AVE CHICAGO, IL 60637</td>
<td>32-0017985</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>EXPLORE ECOLOGY 302 E COTA ST SANTA BARBARA, CA 93101</td>
<td>20-4941615</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020

JSA 9E1288 1.000

18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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</tr>
<tr>
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</tr>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) EXPLORERS BIBLE STUDY ASSOCIATION</td>
<td>87-0400516</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) EXPOSURE SKATE</td>
<td>46-4935624</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) EXTRAORDINARY VENTURES INC</td>
<td>11-3808390</td>
<td>501 (C) 3</td>
<td>31,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) EYE FOUNDATION OF AMERICA INC</td>
<td>55-0621735</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) EYE THRIVE</td>
<td>20-0265693</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) EYE TO EYE INC</td>
<td>51-0570498</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) EZER MIION INC</td>
<td>13-3660421</td>
<td>501 (C) 3</td>
<td>59,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) EZRAS CHOLIM YAD EPHRAIM INC</td>
<td>54-2196301</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) EZMAT ACHIM FOR SPECIAL CHILDREN INC</td>
<td>83-2304677</td>
<td>501 (C) 3</td>
<td>150,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) EZMAT ISRAEL INC</td>
<td>11-3637996</td>
<td>501 (C) 3</td>
<td>133,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) F O O D INC</td>
<td>77-0320851</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(12) FABER INSTITUTE</td>
<td>82-1826994</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
# Schedule I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tr>
<td>FABNEWPORT</td>
<td>46-3237048</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FABRETTI CHILDREN FOUNDATION INC</td>
<td>1563 SHERMAN AVE EVANSTON, IL 60201</td>
<td>501 (C) 3</td>
<td>7,810.</td>
<td>FMV</td>
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<td>FACE IT TOGETHER BEMIDJI</td>
<td>408 BELTRAMI AVE NW BEMIDJI, MN 56601</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<td>FACE TO FACE</td>
<td>109 E PRICE ST PHILADELPHIA, PA 19144</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
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<td>FACETS CARES INC</td>
<td>10700 PAGE AVE FAIRFAX, VA 22030</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FACING HISTORY AND OURSELVES INC</td>
<td>16 HURD RD BROOKLINE, MA 2445</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FACING HUNGER FOODBANK INC</td>
<td>1327 7TH AVE HUNTINGTON, WV 25701</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FAIR COUNT INC</td>
<td>PO BOX 170382 ATLANTA, GA 30317</td>
<td>501 (C) 3</td>
<td>111,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAIR ELECTIONS CENTER</td>
<td>1825 8 ST NW STE 450 WASHINGTON, DC 20006</td>
<td>501 (C) 3</td>
<td>15,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FAIR FOOD NETWORK</td>
<td>1250 N MAIN ST ANN ARBOR, MI 48104</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAIR HAVEN CONCERNED INC</td>
<td>49 MAIN ST STE 1 FAIR HAVEN, VT 5743</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FAIRBANKS COMMUNITY FOOD BANK SERVICE INC</td>
<td>725 26TH AVE FAIRBANKS, AK 99701</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 

3. Enter total number of other organizations listed in the line 1 table:

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1)</td>
<td>FAIRBANKS DRAMA ASSOCIATION AND FAIRBANKS C 1852 2ND AVE FAIRBANKS, AK 99701</td>
<td>23-7251136</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>FAIRBANKS RESCUE MISSION INC PO BOX 73250 FAIRBANKS, AK 99707</td>
<td>23-7326856</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>FAIRCHILD TROPICAL BOTANIC GARDEN 10901 OLD CUTLER RD MIAMI, FL 33156</td>
<td>59-0668480</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>FAIRFAX COMMUNITY CHURCH 11451 BRADDOCK RD FAIRFAX, VA 22030</td>
<td>54-0895396</td>
<td>501 (C) 3</td>
<td>80,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>FAIRFIELD BAPTIST CHURCH PO BOX 865 CYPRESS, TX 77410</td>
<td>76-0359402</td>
<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>FAIRFIELD COMMUNITY FOUNDATION 5350 PLEASANT AVE FAIRFIELD, OH 45014</td>
<td>31-1625750</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(7)</td>
<td>FAIRFIELD COUNTY CHILDRENS CHOIR INC PO BOX 1528 FAIRFIELD, CT 6825</td>
<td>06-1443060</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>FAIRFIELD COUNTY HOSPICE HOUSE INC 4322 DEN RD STAMFORD, CT 6902</td>
<td>45-4166197</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>FAIRFIELD COUNTYS COMMUNITY FOUNDATION INC 40 RICHARDS AVE NORWALK, CT 6854</td>
<td>06-1083893</td>
<td>501 (C) 3</td>
<td>3,050,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>FAIRFIELD HISTORICAL SOCIETY 370 BEACH RD FAIRFIELD, CT 6824</td>
<td>06-0646622</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>FAIRFIELD UNIVERSITY 1073 N BENSON RD FAIRFIELD CT 06824-5171</td>
<td>06-0646623</td>
<td>501 (C) 3</td>
<td>217,000</td>
<td>FMV</td>
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<td>(12)</td>
<td>FAIRLEIGH DICKINSON UNIVERSITY 1000 RIVER ROAD TEANECK, NJ 7666</td>
<td>22-1494434</td>
<td>501 (C) 3</td>
<td>71,118</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1 FAIRNESS CENTER INC PO BOX 54597 OKLAHOMA CITY, OK 73154 46-4482738 501 (C) 3 1,076,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2 FAIRVIEW BAPTIST TABERNACLE, INC 112 KEY KILE RD SWEETWATER, TN 37874 62-1183687 501 (C) 3 40,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>3 FAIRYOTE 6930 CARROLL AVE STE 240 TAKOMA PARK, MD 20 54-1635649 501 (C) 3 91,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4 FAITH AND LEARNING INTERNATIONAL NFF 209 E LIBERTY DR WHEATON, IL 60187 20-0743864 501 (C) 3 30,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>5 FAITH AND REASON INSTITUTE 1730 M ST NW WASHINGTON, DC 20036 52-2197517 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6 FAITH BAPTIST CHURCH - WINTER HAVEN, FL 2140 CRYSTAL BEACH ROAD WINTER HAVEN, FL 33 59-2169854 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>8 FAITH BAPTIST FELLOWSHIP 601 W 57TH ST SIOUX FALLS, SD 57108 46-0356749 501 (C) 3 164,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10 FAITH CHRISTIAN SCHOOL 3585 BUCK MOUNTAIN RD ROANOKE, VA 24018 54-1818074 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>11 FAITH CHRISTIAN SCHOOL INC 730 E WORTH ST GRAPEVINE, TX 76051 75-2784724 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>12 FAITH COMMUNITY CHRISTIAN REFORMED CHURCH 530 SICOMAC AVE WYCKOFF, NJ 7481 22-1810939 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>84-0857649</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>102,500. FMV</td>
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<td>17,500. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FAITH LUTHERAN CHURCH</td>
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<td>20,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FAITH LUTHERAN CHURCH 41 N PARK BLVD GLEN ELLYN, TX 78962</td>
<td>36-2428850</td>
<td>501 (C) 3</td>
<td>14,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FAITH LUTHERAN CHURCH 948 CENTRAL AVE HUMBOLDT, OH 44333</td>
<td>47-6049036</td>
<td>501 (C) 3</td>
<td>7,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>FAITH LUTHERAN CHURCH PO BOX 216 WEIMAR, IA 50325</td>
<td>80-0508425</td>
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<td>11,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FAITH LUTHERAN CHURCH PO BOX 1448 BUENA VISTA, NE 68376</td>
<td>84-0826943</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>FAITH LUTHERAN CHURCH PO BOX 3732 COTTONWOOD, FL 32953</td>
<td>86-0310920</td>
<td>501 (C) 3</td>
<td>25,815.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>FAITH LUTHERAN CHURCH 2810 W 10TH ST THE DALLES, CO 81211</td>
<td>93-0579263</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>FAITH MISSION INC 500 W WILSON BRIDGE RD STE 245 WORTHINGTON,</td>
<td>31-0809759</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>FAITH ON EARTH INC 998 JORGENSEN ST SE HUTCHINSON, MN 55350</td>
<td>65-1281146</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>9</td>
<td>FAITH PRESBYTERIAN CHURCH 53-71 72ND PLACE MASPESS, CA 30513</td>
<td>41-2226804</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>FAITH PRESBYTERIAN CHURCH 56 MOUNTAIN ST BLUE RIDGE, OH 45230</td>
<td>58-2623312</td>
<td>501 (C) 3</td>
<td>26,359.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>FAITH PRESBYTERIAN CHURCH 6434 CORBLY RD CINCINNATI, NY 11378</td>
<td>31-1010149</td>
<td>501 (C) 3</td>
<td>22,106.</td>
<td>FMV</td>
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<td>12</td>
<td>FAITH PRESBYTERIAN CHURCH OF MINNETONKA 12007 EXCELSIOR BLVD HOPKINS, MN 55343</td>
<td>41-0940651</td>
<td>501 (C) 3</td>
<td>11,420.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA

0E1288 1.000

18674H 1467 V 20-7.21
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

#### Part II

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. FAITH REFORMED CHURCH INC</td>
<td>100 E 81ST AVE DYER, IN 46311</td>
<td>36-2590789 501 (C) 3</td>
<td>10,000.</td>
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<td>2. FAITH REFORMED PRESBYTERIAN CHURCH</td>
<td>611 ROBERT FULTON HWY QUARRYVILLE, PA 17566</td>
<td>23-6277193 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. FAITH SCHOOL OF THEOLOGY</td>
<td>29 MAIN RD CHARLESTON, ME 4422</td>
<td>01-0377494 501 (C) 3</td>
<td>5,800.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4. FAITHBRIDGE UNITED METHODIST CHURCH</td>
<td>18000 STUEBNER AIRLINE RD SPRING, TX 77379</td>
<td>76-0597329 501 (C) 3</td>
<td>93,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FAITHS 100 INCORPORATED</td>
<td>2140 CRYSTAL BEACH RD WINTER HAVEN, FL 3388</td>
<td>26-4408664 501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. FAITHS LODGE</td>
<td>4080 W BROADWAY AVE STE 212 MINNEAPOLIS, MN</td>
<td>20-4967588 501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FALMOUTH ACADEMY INCORPORATED</td>
<td>7 HIGHFIELD DR FALMOUTH, MA 2540</td>
<td>04-2620156 501 (C) 3</td>
<td>6,000.</td>
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<td>N/A</td>
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<tr>
<td>8. FALMOUTH HISTORICAL SOCIETY</td>
<td>PO BOX 174 FALMOUTH, MA 2541</td>
<td>04-6066623 501 (C) 3</td>
<td>5,500.</td>
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<td>9. FALMOUTH HOUSING TRUST INC</td>
<td>200 MAIN ST STE 212 FALMOUTH, MA 2540</td>
<td>04-2936558 501 (C) 3</td>
<td>20,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. FALMOUTH SERVICE CENTER INC</td>
<td>611 GIFFORD ST FALMOUTH, MA 2540</td>
<td>22-2509781 501 (C) 3</td>
<td>45,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. FAMILIES ADVOCATING FOR CAMPUS EQUALITY</td>
<td>3722 ABINGDON RD CHARLOTTE, NC 28211</td>
<td>47-1696020 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. FAMILIES AGAINST MANDATORY MINIMUMS FOUNDATION</td>
<td>1100 H ST NW STE 1000 WASHINGTON, DC 20005</td>
<td>52-1750246 501 (C) 3</td>
<td>128,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>FAMILIES AND FRIENDS OF LOUISIANASINCARCERA</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAMILIES FIRST OF MONROE COUNTY INC</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAMILIES FORWARD</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FAMILIES MOVING FORWARD</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FAMILY ACCESS NETWORK FOUNDATION</td>
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<td>FMV</td>
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<td>FAMILIES AND FRIENDS OF LOUISIANASINCARCERA</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>FAMILY ASSISTANCE MINISTRIES</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>FAMILY EMPOWERMENT CENTERS</td>
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<td>FMV</td>
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<td>FAMILY FEST INC CHRISTIAN MINISTRY NON PROF</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>FAMILY FOUNDATION</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>FAMILY HEALTH PARTNERSHIP CLINIC</td>
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<td>7,000.</td>
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<td>12</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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### Part I
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<tr>
<td>FAMILY HOUSE INC</td>
<td>94-2722663</td>
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<td>FAMILY INSTITUTE</td>
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<td>FAMILY INSTITUTE OF CONNECTICUT INC</td>
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<td>FAMILY LEGACY MISSIONS INTERNATIONAL</td>
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<td>FAMILY LIFE BROADCASTING SYSTEM</td>
<td>38-1812892</td>
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<td>FMV</td>
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<td>FAMILY LIFE EDUCATION INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FAMILY NURTURING CENTER OF MASSACHUSETTS IN</td>
<td>31-1626186</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAMILY OF CHRIST LUTHERAN CHURCH</td>
<td>41-1385602</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FAMILY PANTRY OF CAPE COD CORP THE</td>
<td>22-3079904</td>
<td>501 (C) 3</td>
<td>78,500</td>
<td>FMV</td>
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<tr>
<td>FAMILY PLACE INC</td>
<td>03-0305264</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FAMILY PLACE INC</td>
<td>07-1590896</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**OMB No. 1545-0047**

**Open to Public Inspection**

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I: General Information on Grants and Assistance

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1</td>
<td>FAMILY POLICY FOUNDATION 8655 EXPLORER DR # 112 COLORADO SPRINGS, CO</td>
<td>46-4577178</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FAMILY PROGRAMS HAWAII 801 S KING ST HONOLULU, HI 96813</td>
<td>99-0280498</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>FAMILY PROMISE INC 71 SUMMIT AVE SUMMIT, NJ 7901</td>
<td>52-1591461</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>FAMILY PROMISE OF ESSEX COUNTY INC 46 PARK ST MONTCLAIR, NJ 7042</td>
<td>22-2841105</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<td>5</td>
<td>FAMILY PROMISE OF GREATER CLEVELAND 3470 E 152ND ST CLEVELAND, OH 44120</td>
<td>34-1598710</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>FAMILY PROMISE OF GREATER DENVER INC 419 LIPAN ST DENVER, CO 80204</td>
<td>84-1367869</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>FAMILY PROMISE OF HENDRICKS COUNTY INC 238 N VINE ST FLAINFIELD, IN 46168</td>
<td>46-1733831</td>
<td>501 (C) 3</td>
<td>71,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>8</td>
<td>FAMILY PROMISE OF MONMOUTH COUNTY INC 501 MALTERER AVE OCEANPORT, NJ 7757</td>
<td>22-3674477</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9</td>
<td>FAMILY PROMISE OF MORRIS COUNTY INC PO BOX 1494 MORRISTOWN, NJ 7962</td>
<td>52-1572014</td>
<td>501 (C) 3</td>
<td>57,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>FAMILY PROMISE-GREATER PHOENIX 7447 E EARLL DR SCOTTSDALE, AZ 85251</td>
<td>86-0914408</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>FAMILY REACH FOUNDATION 142 BERKELEY ST STE 4 BOSTON, MA 2116</td>
<td>91-2192211</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>FAMILY RESEARCH COUNCIL INC 801 G ST NW WASHINGTON, DC 20001</td>
<td>52-1792772</td>
<td>501 (C) 3</td>
<td>54,194.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>FAMILY RESOURCE NAVIGATORS</td>
<td>47-5477207</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>FAMILY SCHOLAR HOUSE INC</td>
<td>61-1285124</td>
<td>501 (c) 3</td>
<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>FAMILY SERVICE AGENCY OF SANTA BARBARA COUN</td>
<td>95-1644031</td>
<td>501 (c) 3</td>
<td>190,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>FAMILY SERVICE ASSOCIATION OF REDLANDS</td>
<td>95-1655614</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>FAMILY SERVICE OF CHESTER COUNTY</td>
<td>23-1726329</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>FAMILY SERVICE OF MONTGOMERY COUNTY PA</td>
<td>95-1352361</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>FAMILY SERVICE OF RHODE ISLAND INC</td>
<td>05-0258858</td>
<td>501 (c) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>FAMILY SHUL INC</td>
<td>20-3174947</td>
<td>501 (c) 3</td>
<td>19,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>FAMILY SUPPORTIVE HOUSING INC</td>
<td>77-0106237</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>FAMILY WORKS</td>
<td>91-1757277</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>FAMILY WORSHIP CENTER CHURCH INC</td>
<td>72-1222084</td>
<td>501 (c) 3</td>
<td>6,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>FAMILYAID BOSTON INC</td>
<td>04-2105756</td>
<td>501 (c) 3</td>
<td>20,240.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

EMPLOYER IDENTIFICATION NUMBER

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government

(b) EIN

(c) IRC section (if applicable)

(d) Amount of cash grant

(e) Amount of noncash assistance

(f) Method of valuation (book, FMV, appraisal, other)

(g) Description of noncash assistance

(h) Purpose of grant or assistance

(1) FAR AWAY PROJECTS

463 BROADWAY SAN FRANCISCO, CA 94133

82-1917723 501 (C) 3 28,000. FMV N/A FOR RECIPIENT'S EXEM

(2) FAR BROOK SCHOOL

52 GREAT HILLS RD SHORT HILLS, NJ 7078

22-1487185 501 (C) 3 34,500. FMV N/A FOR RECIPIENT'S EXEM

(3) FAR EAST BROADCASTING COMPANY INC

15700 IMPERIAL HWY LA MIRADA, CA 90638

95-1461574 501 (C) 3 141,500. FMV N/A FOR RECIPIENT'S EXEM

(4) FARAJA FUND FOUNDATION

8919 PARK RD APT 249 CHARLOTTE, NC 28210

20-5954310 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM

(5) FARGROUND COMMUNITY KITCHEN

PO BOX 615 BEACON, NY 12508

46-1049590 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM

(6) FARESTART

700 VIRGINIA ST SEATTLE, WA 98101

91-1546757 501 (C) 3 122,200. FMV N/A FOR RECIPIENT'S EXEM

(7) FARGO-MOORHEAD AREA FOUNDATION CORPORATION

409 7TH ST S FARGO, ND 58103

45-6010377 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM

(8) FARGO-MOORHEAD SCIENCE MUSEUM

1230 2ND ST N FARGO, ND 58102

83-1068911 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM

(9) FARIBAULT COUNTY HUMANE SOCIETY

PO BOX 231 BLUE EARTH, MN 56013

30-0514830 501 (C) 3 27,500. FMV N/A FOR RECIPIENT'S EXEM

(10) FARM FORWARD INC

5051 LA JOLLA BLVD UNIT 213 SAN DIEGO, CA 92103

26-1643614 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM

(11) FARM SANCTUARY INC

PO BOX 150 WATKINS GLEN, NY 14891

51-0292919 501 (C) 3 70,283. FMV N/A FOR RECIPIENT'S EXEM

(12) FARMERSVILLE HISTORICAL SOCIETY

PO BOX 94 FARMERSVILLE, TX 75442

75-2309329 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

JSA

18674H 1467 20-7.21
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.  
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Name of the organization: **VANGUARD CHARITABLE ENDOWMENT PROGRAM**  
Employer identification number: **23-2888152**

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Name and address of organization or government</th>
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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td><strong>(FARMS INTERNATIONAL INC)</strong></td>
<td>5371 GREENWOOD RD DULUTH, MN 55804</td>
<td>22-1776920</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td><strong>FARMWORKER JUSTICE FUND INC</strong></td>
<td>1126 16TH STREET NW NO LL-101 WASHINGTON, D C 20036</td>
<td>52-1196708</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td><strong>FASHION INSTITUTE OF TECHNOLOGY FOUNDATION</strong></td>
<td>227 W 27TH ST NEW YORK, NY 10001</td>
<td>13-5675757</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td><strong>FATHER BILLS &amp; MAINSPRING INC</strong></td>
<td>430 BELMONT ST BROCKTON, MA 2301</td>
<td>22-2538039</td>
<td>501 (C) 3</td>
<td>103,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td><strong>FATHER CHUCKS CHALLENGE</strong></td>
<td>1020 LAKE LN PENNSBURG, PA 18073</td>
<td>27-0165813</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td><strong>FATHER FLANAGANS BOYS HOME</strong></td>
<td>975 OKLAHOMA ST OVIEDO, FL 32765</td>
<td>20-0654235</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td><strong>FATHER FLANAGANS BOYS HOME</strong></td>
<td>14100 CRAWFORD ST BOYS TOWN, FL 32765</td>
<td>47-0376606</td>
<td>501 (C) 3</td>
<td>89,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td><strong>FATHER FRED FOUNDATION</strong></td>
<td>PO BOX 2260 TRAVERSE CITY, MI 49685</td>
<td>38-2908199</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td><strong>FATHER MCKENNA CENTER INC</strong></td>
<td>19 I ST NW WASHINGTON, DC 20001</td>
<td>46-1406974</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td><strong>FATHER PETER G YOUNG JR FOUNDATION INC</strong></td>
<td>428 DUANE AVE SCHENECTADY, NY 12304</td>
<td>22-3207792</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td><strong>FATHERS CARE INC</strong></td>
<td>PO BOX 52989 ATLANTA, GA 30355</td>
<td>20-0368362</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td><strong>FATHERS HOUSE CHRISTIAN CENTER INC</strong></td>
<td>2301 SOUTH ST LEESBURG, FL 34748</td>
<td>59-3386928</td>
<td>501 (C) 3</td>
<td>9,453.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Attach to Form 990.**

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## General Information on Grants and Assistance

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   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>FAULT LINE THEATRE INC</td>
<td>520 8TH AV MM 318 NEW YORK, NY 10018</td>
<td>47-2256638</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>2</td>
<td>FAULTLINE ROY CHURCH, UCC</td>
<td>9140 CALIFORNIA AV SW SEATTLE, WA 98136</td>
<td>01-6228843</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>FAYETTEYAVEN STREET SCHOOL INC</td>
<td>765 CONCORD AV CAMBRIDGE, MA 2138</td>
<td>04-2428713</td>
<td>501 (C) 3</td>
<td>256,334.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4</td>
<td>FAYETTEVILLE STATE UNIVERSITY FOUNDATION IN</td>
<td>1200 MURCHISON RD FAYETTEVILLE, NC 28301</td>
<td>501 (C) 3</td>
<td>31-7029901</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5</td>
<td>FCBHC</td>
<td>9950 W USTICK ROACK BOISE, ID 8704</td>
<td>16-1664374</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>FCNL EDUCATION FUND</td>
<td>245 2ND ST NE WASHINGTON, DC 20002</td>
<td>52-1254489</td>
<td>501 (C) 3</td>
<td>144,481.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7</td>
<td>FCOP INTERNATIONAL</td>
<td>PO BOX 1449 FORT MORGAN, ID 80701</td>
<td>46-3473045</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>8</td>
<td>FCS URBAN MINISTRIES INC</td>
<td>1297 JONESBORO RD SE ATLANTA, GA 30315</td>
<td>58-1330830</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>FEATHER RIVER LAND TRUST</td>
<td>75 COURT ST QUINCY, CA 95971</td>
<td>48-0449687</td>
<td>501 (C) 3</td>
<td>65,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10</td>
<td>FEDERALIST SOCIETY FOR LAW &amp; PUBLIC POLICY</td>
<td>1776 I ST NW STR 300 WASHINGTON, DC 20006</td>
<td>36-3235550</td>
<td>501 (C) 3</td>
<td>635,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>11</td>
<td>FEDERATION FOR JEWISH PHILANTHROPY OF UPPER</td>
<td>4200 PARK AV BRIDGEPORT CT 06604-1049 BRI</td>
<td>06-0994563</td>
<td>501 (C) 3</td>
<td>53,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12</td>
<td>FEDERATION OF JAIN ASSOCIATIONS IN NORTH AM</td>
<td>948 JOHN FRIEND DR NAPERVILLE, IL 60540</td>
<td>54-1280028</td>
<td>501 (C) 3</td>
<td>32,003.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

GENERAL INFORMATION ON GRANTS AND ASSISTANCE

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ....... X Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

PART II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) FEDERATION OF JEWISH COMMUNITIES OF THE C I 1546 EAST BROOKLYN, NY 11334 13-3970940 501 (C) 3 2,058,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>(2) FEDERATION OF SOUTHERN COOPERATIVES LAND AS 2769 CHURCH ST ATLANTA, GA 30344 58-1026695 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) FEDERATION OF VIRGINIA FOOD BANKS C/O FEEDMORE 1415 RHoadmiller St RICHMON 154-1398664 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td>(4) FEDERATION OF ZOROASTRIAN ASSOCIATION OF NO 8615 MEADOWBROOK DR BURR RIDGE, IL 60527 36-3521343 501 (C) 3 57,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(5) FEED A BILLION NFP CORPORATION 2965 PEACHTREE RD NE UNIT 1902 ATLANTA, GA 81-1678202 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>(6) FEED AMERICA FIRST OF TENNESSEE 319 MURFREESBORO ST MURFREESBORO, TN 37127 62-1821057 501 (C) 3 8,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) FEED MORE INC 1415 RHoadmiller St RICHMON, VA 23220 54-1150923 501 (C) 3 224,721. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) FEED MY PEOPLE INC 2610 ALPINE RD EAU CLAIRE, WI 54703 36-1488941 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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<tr>
<td>(9) FEED MY STARVING CHILDREN 401 93RD AVE NW MINNEAPOLIS, MN 55433 41-1601449 501 (C) 3 287,676. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) FEED THE CHILDREN INC 333 N MERIDIAN AVE OKLAHOMA CITY, OK 73107 73-6108657 501 (C) 3 79,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) FEED THE HUNGRY PANTRY OF PALM BEACH COUNTY 8306 155TH PL N WEST PALM BEACH, FL 33418 82-3760456 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) FEED THE TRUTH INC 1800 M ST NW UNIT 33347 WASHINGTON, DC 20003 81-4944037 501 (C) 3 1,500,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1. FEEDING AMERICA</td>
<td>36-3673599</td>
<td>501 (C) 3</td>
<td>6,522,926.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. FEEDING AMERICA EASTERN WISCONSIN INC</td>
<td>39-1384593</td>
<td>501 (C) 3</td>
<td>65,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. FEEDING AMERICA RIVERSIDE AND SAN BERNARDIN</td>
<td>33-0072922</td>
<td>501 (C) 3</td>
<td>5,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. FEEDING AMERICA SOUTHWEST VIRGINIA</td>
<td>54-1939556</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FEEDING AMERICA TAMPA BAY INC</td>
<td>59-2116576</td>
<td>501 (C) 3</td>
<td>69,547.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. FEEDING AMERICA WEST MICHIGAN</td>
<td>38-2439659</td>
<td>501 (C) 3</td>
<td>55,561.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FEEDING SAN DIEGO</td>
<td>26-0457477</td>
<td>501 (C) 3</td>
<td>346,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. FEEDING SANTA FE INC</td>
<td>85-0416027</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. FEEDING SOUTH DAKOTA</td>
<td>36-3293534</td>
<td>501 (C) 3</td>
<td>14,660.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. FEEDING SOUTH FLORIDA</td>
<td>59-2097520</td>
<td>501 (C) 3</td>
<td>244,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11. FEEDING TEXAS</td>
<td>74-2762542</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. FEEDING THE GULF COAST</td>
<td>63-0821997</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<th>General Information on Grants and Assistance</th>
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<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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<table>
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<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
</tr>
<tr>
<td>(1) FEEDING WESTCHESTER INC</td>
<td>200 CLEARBROOK RD ELMSFORD, NY 10523</td>
</tr>
<tr>
<td>(2) FEEDMORE WESTERN NEW YORK INC</td>
<td>100 JAMES E CASEY DR BUFFALO, NY 14206</td>
</tr>
<tr>
<td>(3) FELIDAE CONSERVATION FUND</td>
<td>100 SHORELINE HWY STE 100B MILL VALLEY, CA</td>
</tr>
<tr>
<td>(4) FELINES INC</td>
<td>6379 N PAULINA ST CHICAGO, IL 60660</td>
</tr>
<tr>
<td>(5) FELLOWSHIP ALLIANCE CHAPEL</td>
<td>199 CHURCH RD MEDFORD, NJ 08055</td>
</tr>
<tr>
<td>(6) FELLOWSHIP BAPTIST CHURCH OF MT. LAUREL INC</td>
<td>1520 HAINESPORT RD. MOUNT LAUREL, NJ 08054</td>
</tr>
<tr>
<td>(7) FELLOWSHIP BIBLE CHURCH</td>
<td>3217 MIDDLE ROAD WINCHESTER, VA 22602</td>
</tr>
<tr>
<td>(8) FELLOWSHIP BIBLE CHURCH OF MEMPHIS</td>
<td>PO BOX 11465 MEMPHIS, TN 38111</td>
</tr>
<tr>
<td>(9) FELLOWSHIP BIBLE CHURCH OF NORTHWEST ARKANS</td>
<td>1051 W PLEASANT GROVE RD ROGERS, AR 72758</td>
</tr>
<tr>
<td>(10) FELLOWSHIP BIBLE CHURCH OF SPRINGDALE INC.</td>
<td>PO BOX 92 SPRINGDALE, AR 72765</td>
</tr>
<tr>
<td>(11) FELLOWSHIP BIBLE CHURCH OF WILLIAMSON COUNTY</td>
<td>1210 FRANKLIN RD BRENTWOOD, TN 37027</td>
</tr>
<tr>
<td>(12) FELLOWSHIP CHURCH INC</td>
<td>401 E HUNTINGTON DR MONROVIA, CA 91016</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
**SCHEDULE I (Form 990)**

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>EIN</th>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (1)</td>
<td>FELLOWSHIP FOR THE PERFORMING ARTS INC</td>
<td>630 9TH AVE STE 1409 NEW YORK, NY 10036</td>
<td>52-1739276</td>
<td>501 (C) 3</td>
<td>64,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2 (2)</td>
<td>FELLOWSHIP FOUNDATION INC</td>
<td>7501 WISCONSIN AVE STE 400E BETHESDA, MD 20</td>
<td>53-0204604</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3 (3)</td>
<td>FELLOWSHIP INTERNATIONAL MISSION</td>
<td>555 S 24TH ST ALLENTOWN, PA 18104</td>
<td>23-6405291</td>
<td>501 (C) 3</td>
<td>35,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4 (4)</td>
<td>FELLOWSHIP OF CATHOLIC UNIVERSITY STUDENTS</td>
<td>603 PARK POINT DR GOLDEN, CO 80401</td>
<td>84-1522811</td>
<td>501 (C) 3</td>
<td>265,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5 (5)</td>
<td>FELLOWSHIP OF CHRISTIAN ATHLETES</td>
<td>8701 LEEDS RD KANSAS CITY, MO 64129</td>
<td>44-0610626</td>
<td>501 (C) 3</td>
<td>304,167.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>6 (6)</td>
<td>FELLOWSHIP OF CHRISTIANS IN UNIVERSITIES AN</td>
<td>140 ELM ST FL 2 NEW CANAAN, CT 6840</td>
<td>06-0870830</td>
<td>501 (C) 3</td>
<td>153,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>7 (7)</td>
<td>FELLOWSHIP OF CHRISTIANS UNITED FOR SERVICE</td>
<td>232 HAMILTON SQ HAMILTON, GA 31811</td>
<td>58-1747756</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>8 (8)</td>
<td>FELLOWSHIP OF MONTGOMERY</td>
<td>12681 FM 149 MONTGOMERY, TX 77316</td>
<td>75-3178672</td>
<td>501 (C) 3</td>
<td>8,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>9 (9)</td>
<td>FELLOWSHIP OF RECONCILIATION INC</td>
<td>180 W MAIN ST STONY POINT, NY 10980</td>
<td>13-3392144</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10 (10)</td>
<td>FELLOWSHIP OF ST JAMES</td>
<td>4125 W NEWPORT AVE CHICAGO, IL 60641</td>
<td>23-7272284</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>11 (11)</td>
<td>FELLOWSHIP OF THE ROCKIES-COLORADO SPRINGS</td>
<td>1625 S 8TH ST COLORADO SPRINGS, CO 80905</td>
<td>84-1470419</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12 (12)</td>
<td>FELLOWSHIP OF THE WOODLANDS</td>
<td>25231 GROGANS MILL RD STE 297 SPRING, TX 77</td>
<td>76-0408276</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<td>Fellowship West Church Inc.</td>
<td>82-1622101</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Feminist Majority Foundation</td>
<td>54-126440</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Feminist Women's Health Center</td>
<td>91-1083929</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Fenwick School Inc.</td>
<td>04-2104064</td>
<td>501 (C) 3</td>
<td>49,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Fenway Community Health Center, Inc.</td>
<td>04-2510564</td>
<td>501 (C) 3</td>
<td>11,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Fenwick High School</td>
<td>36-1066828</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Femanduro Pullum Community Arts Center</td>
<td>45-2800295</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>Ferrari Owners Charitable Foundation</td>
<td>27-4500443</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>Ferrum College</td>
<td>54-0506457</td>
<td>501 (C) 3</td>
<td>262,500.</td>
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<td>First Readers Inc.</td>
<td>58-2489181</td>
<td>501 (C) 3</td>
<td>9,500.</td>
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<td>Fessenden School</td>
<td>04-2103574</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Festival Center Inc.</td>
<td>1640 COLUMBIA RD NW WASHINGTON, DC 20009</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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| For Paperwork Reduction Act Notice, see the Instructions for Form 990. |

<table>
<thead>
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<th>(1)</th>
<th>(2)</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FETAL MEDICINE FOUNDATION INC</td>
<td>27-4371524</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>2</td>
<td>FFND</td>
<td>46-4626500</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>FIBERSHED</td>
<td>45-305196</td>
<td>501 (C) 3</td>
<td>160,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FIBROMALLICAN CANCER FOUNDATION</td>
<td>27-0341021</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>FIDALGO DANCEWORKS</td>
<td>26-2944995</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>FIDELIS CENTER FOR LAW AND JUSTICE</td>
<td>20-2787890</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>FIDELITY INVESTMENTS CHARITABLE GIFT FUND</td>
<td>11-0303001</td>
<td>501 (C) 3</td>
<td>66,097,182.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>FIELD MUSEUM OF NATURAL HISTORY</td>
<td>1400 S LAKE SHORE DR CHICAGO, IL 60605</td>
<td>501 (C) 3</td>
<td>133,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>FIELDER ROAD BAPTIST CHURCH</td>
<td>1323 W PIONEER PKWY ARLINGTON, TX 76013</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>FIFTH AVENUE PRESBYTERIAN CHURCH</td>
<td>7 W 55TH ST NEW YORK, NY 10019</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>FIFTY OVER FIFTY INC</td>
<td>65-0630460</td>
<td>501 (C) 3</td>
<td>10,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>FIFTY VANDERBILT FOUNDATION INC</td>
<td>47-3973048</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

JSA 5E288 1.000 18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [x]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FIGHT COLORECTAL CANCER INC</td>
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<td>501 (C) 3</td>
<td>6,634.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. FIJI THEATER COMPANY INC</td>
<td>13-2874863</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3. FILM FORUM, INC</td>
<td>51-0175953</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. FILM INDEPENDENT INC</td>
<td>5670 WILSHIRE BLVD FL 9 LOS ANGELES, CA 900</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FILMAID INTERNATIONAL INC</td>
<td>16221 POWELLS COVE BLVD APT 3P WHITESTONE,</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>6. FINAL EXIT NETWORK INC</td>
<td>80-0119137</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FINCA INTERNATIONAL INC</td>
<td>1201 15TH ST NW WASHINGTON, DC 20005</td>
<td>501 (C) 3</td>
<td>168,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. FIND INC</td>
<td>13914 QUEENS BURY LK HOUSTON, TX 77079</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. FINE ARTS ASSOCIATION WILLOUGHBY</td>
<td>38660 MENTOR AVE WILLOUGHBY, OH 44094</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10. FINE ARTS WORK CENTER IN PROVINCETOWN INC</td>
<td>24 PEARL ST PROVINCETOWN, MA 2657</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11. FINGER LAKES OPERA INC</td>
<td>81-4716749</td>
<td>501 (C) 3</td>
<td>18,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. FINISHING WELL MINISTRIES</td>
<td>2001 W FLANO FPKY STE 3439 FLANO, TX 75075</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
complete if the organization answered "yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

Yes [X]  

No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.  Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO BOX 665 SOLVANG, CA 93464</td>
<td>95-6098250</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3110 THOMSON AVE # E-413 LONG ISLAND CITY,</td>
<td>11-3623769</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>511 SAINT CHARLES RD MAYWOOD, IL 60153</td>
<td>82-1605150</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1522 14TH AVE SEATTLE, WA 98122</td>
<td>91-0773120</td>
<td>501 (C) 3</td>
<td>11,456.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1222 PRESERVATION PARK WAY OAKLAND, CA 9461</td>
<td>94-3161968</td>
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<td>55,000.</td>
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<tr>
<td>3233 BLAIRS FERRY RD NE CEDAR RAPIDS, MO 64</td>
<td>23-7253403</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1414 E 103RD ST KANSAS CITY, IA 52402</td>
<td>44-0605610</td>
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<td>FMV</td>
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<td>3884 NILES RD SAINT JOSEPH, MI 49085</td>
<td>38-2019440</td>
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<td>2300 BARTRAM RD JACKSONVILLE, FL 32207</td>
<td>26-2880594</td>
<td>501 (C) 3</td>
<td>1,000,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>808 HIGH ST WESTWOOD, NJ 8865</td>
<td>04-6067391</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 336 NEW LONDON, OK 78420</td>
<td>02-0312591</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 108 LYME CENTER, KS 67554</td>
<td>02-0337084</td>
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<td>FMV</td>
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<td>16674H 1467  V 20-7.21</td>
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## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? √ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

### Part II

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>FIRST BAPTIST CHURCH 90 MAIN ST NEW BRITAIN, TX 76044</td>
<td>06-0660018</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FIRST BAPTIST CHURCH 810 RED SCHOOL LN PHILLIPSBURG, MA 2090</td>
<td>22-1850333</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>FIRST BAPTIST CHURCH PO BOX 643 CONCORD, AL 35011</td>
<td>56-0562303</td>
<td>501 (C) 3</td>
<td>6,400.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>FIRST BAPTIST CHURCH 4400 N PEACHTREE RD ATLANTA, NH 3769</td>
<td>58-0572416</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>FIRST BAPTIST CHURCH PO BOX 400 ALEXANDER CITY, WI 53186</td>
<td>63-0340859</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>FIRST BAPTIST CHURCH 133 S WALNUT ST FREMONT, IA 52561</td>
<td>42-1047805</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>FIRST BAPTIST CHURCH 247 WISCONSIN AVE WAUKESHA, TX 75069</td>
<td>39-6000518</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>FIRST BAPTIST CHURCH 803 S DINSMORE AVE LYONS, TX 78801</td>
<td>48-0594105</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>FIRST BAPTIST CHURCH 16333 HIGHWAY 1085 COVINGTON, LA 70433</td>
<td>72-0636568</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>FIRST BAPTIST CHURCH 329 S. HARRISON PO BOX 295 STONEDAL, OR 97</td>
<td>73-1171919</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>FIRST BAPTIST CHURCH 1615 W LOUISIANA ST MCKINNEY, NH 3257</td>
<td>75-0800643</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>FIRST BAPTIST CHURCH 701 E, ALLEN PO BOX 158 GODLEY, GA 30338</td>
<td>75-1896245</td>
<td>501 (C) 3</td>
<td>11,515.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ____________________________

3. Enter total number of other organizations listed in the line 1 table: ____________________________

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments.
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</tr>
</thead>
<tbody>
<tr>
<td>FIRST BAPTIST CHURCH 220 N HIGH ST UVALDE, CT 78801</td>
<td>74-1193450</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH 125 SE COWLS ST MCMINNVILLE, NC 28025</td>
<td>93-0390923</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH - BATESVILLE, AR 601 EAST MAIN STREET BATESVILLE, AR 72503</td>
<td>71-0289861</td>
<td>501 (C) 3</td>
<td>26,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH - BLOOMING ROCK, NC PO BOX 3 BLOOMING ROCK, NC 28605</td>
<td>56-1035509</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FIRST BAPTIST CHURCH - EL PASO, TX ATTENTION: CHURCH ADMINISTRATOR 805 MONTANA</td>
<td>74-1277653</td>
<td>501 (C) 3</td>
<td>43,764.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH - JACKSON, MS PO BOX 250 JACKSON, MS 39205-0250</td>
<td>64-0308401</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH CHANDLER 3405 S ARIZONA AVE CHANDLER, AZ 85248</td>
<td>86-0129973</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH DURANT 124 W. EVERGREEN DURANT, OK 74701</td>
<td>73-6004257</td>
<td>501 (C) 3</td>
<td>8,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH HAUGHTON INC 105 EAST WASHINGTON AVENUE HAUGHTON, LA 710</td>
<td>72-0906712</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH INC 14813 N OLD STATESVILLE RD HUNTERSVILLE, NC</td>
<td>56-0928542</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH OF CAMBRIA CALIFORNIA 2120 GREEN ST CAMBRIA, CA 93428</td>
<td>95-2946275</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST BAPTIST CHURCH OF CARMEL INC 1001 S 126TH ST CARMEL, IN 46033</td>
<td>35-1076859</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes [X]  No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1. FIRST BAPTIST CHURCH OF CASTRO VALLEY</td>
<td>18550 REDWOOD RD CASTRO VALLEY, CA 94546</td>
<td>94-1347074 501 (C) 3</td>
<td>118,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. FIRST BAPTIST CHURCH OF COLLEYVILLE</td>
<td>5405 PLEASANT RUN RD COLLEYVILLE, TX 76034</td>
<td>75-1369356 501 (C) 3</td>
<td>18,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. FIRST BAPTIST CHURCH OF EULESS</td>
<td>1000 AIRPORT Fwy EULESS, TX 76039</td>
<td>75-6005353 501 (C) 3</td>
<td>292,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. FIRST BAPTIST CHURCH OF FORT WORTH</td>
<td>5001 NORTHEAST PKWY FORT WORTH, TX 76106</td>
<td>75-0908996 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5. FIRST BAPTIST CHURCH OF FT LAUDERDALE INC</td>
<td>301 N BROWARD BLVD FORT LAUDERDALE, FL 3330</td>
<td>59-0751914 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. FIRST BAPTIST CHURCH OF GREENVILLE S CAROLI</td>
<td>847 CLEVELAND ST GREENVILLE, SC 29601</td>
<td>57-0324922 501 (C) 3</td>
<td>19,980.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FIRST BAPTIST CHURCH OF HOUSTON</td>
<td>7401 KATY Fwy HOUSTON, TX 77024</td>
<td>74-1143083 501 (C) 3</td>
<td>191,840.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. FIRST BAPTIST CHURCH OF JACKSONVILLE FLORID</td>
<td>124 W ASHLEY ST JACKSONVILLE, FL 32202</td>
<td>59-0823939 501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. FIRST BAPTIST CHURCH OF LEWISVILLE TEXAS</td>
<td>1251 VALLEY RIDGE BLVD LEWISVILLE, TX 75077</td>
<td>75-1280313 501 (C) 3</td>
<td>77,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. FIRST BAPTIST CHURCH OF LOS ALTOS INC</td>
<td>625 MAGDALENA AVE LOS ALTOS HILLS, CA 94024</td>
<td>94-1379500 501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. FIRST BAPTIST CHURCH OF MATTHEWS</td>
<td>185 S TRADE ST MATTHEWS, NC 28105</td>
<td>56-0705907 501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. FIRST BAPTIST CHURCH OF MAYVILLE</td>
<td>59 SOUTH ERIE ST MAYVILLE, NY 14757</td>
<td>23-7349967 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>(1) FIRST BAPTIST CHURCH OF METUCHEN</td>
<td>23-7292290</td>
<td>501 (C) 3</td>
<td>8,985.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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| (2) FIRST BAPTIST CHURCH OF MONTEREY             | 94-6001641 | 501 (C) 3                   | 50,000.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (3) FIRST BAPTIST CHURCH OF PEKIN                | 37-6000083 | 501 (C) 3                   | 33,000.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (4) FIRST BAPTIST CHURCH OF PLANT CITY           | 59-0895024 | 501 (C) 3                   | 47,875.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (5) FIRST BAPTIST CHURCH OF PROSPER              | 75-1523327 | 501 (C) 3                   | 27,500.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (6) FIRST BAPTIST CHURCH OF SEBRING              | 59-1286356 | 501 (C) 3                   | 33,000.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (7) FIRST BAPTIST CHURCH OF SOUTH HILL           | 54-1252831 | 501 (C) 3                   | 5,500.                    | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (8) FIRST BAPTIST CHURCH OF THE LAKES            | 86-0884696 | 501 (C) 3                   | 93,700.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (9) FIRST BAPTIST CHURCH OF THE WOODLANDS        | 74-1989612 | 501 (C) 3                   | 18,000.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (10) FIRST BAPTIST CHURCH OF TRUSSVILLE INC.     | 63-6005351 | 501 (C) 3                   | 8,253.                    | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (11) FIRST BAPTIST CHURCH OF WESTON              | 65-0321898 | 501 (C) 3                   | 23,000.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

| (12) FIRST BAPTIST CHURCH OF POMPANO BEACH       | 59-0865948 | 501 (C) 3                   | 41,500.                   | FMV                              | N/A                                           | FOR RECIPIENT'S EXEM |

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   - No

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<tr>
<td>(1) FIRST BAPTIST CHURCH, INC.</td>
<td>56-0554211</td>
<td>501 (c) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) FIRST BAPTIST NEW ORLEANS</td>
<td>72-0471375</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) FIRST BAPTIST OF GREENSBORO</td>
<td>58-1117473</td>
<td>501 (c) 3</td>
<td>47,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) FIRST BAPTIST OF TRENTON</td>
<td>58-1538871</td>
<td>501 (c) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) FIRST BOOK</td>
<td>52-1779606</td>
<td>501 (c) 3</td>
<td>43,068.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) FIRST CHINESE BAPTIST CHURCH WALNUT</td>
<td>95-4666863</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) FIRST CHRISTIAN CHURCH</td>
<td>56-0709137</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) FIRST CHRISTIAN CHURCH</td>
<td>58-0951089</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) FIRST CHRISTIAN CHURCH</td>
<td>37-0734369</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) FIRST CHRISTIAN CHURCH</td>
<td>43-6012482</td>
<td>501 (c) 3</td>
<td>12,480.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) FIRST CHRISTIAN CHURCH</td>
<td>74-1531703</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**  
(Form 990)  

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Attach to Form 990.  

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<tr>
<td>1. FIRST CHRISTIAN CHURCH</td>
<td>83-0236626</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. FIRST CHRISTIAN CHURCH &amp; WATERWAY</td>
<td>71-6082811</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. FIRST CHRISTIAN CHURCH OF NEWBURGH INC</td>
<td>35-1463144</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>04-2175922</td>
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<td>FMV</td>
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<td>5. FIRST CHURCH IN WENHAM, CONGREGATIONAL INC.</td>
<td>04-2217263</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>6. FIRST CHURCH OF CHRIST CONGREGATION</td>
<td>06-6001060</td>
<td>501 (C) 3</td>
<td>17,400.</td>
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<td>04-2254742</td>
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<td>55-6021701</td>
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<td>8,900.</td>
<td>FMV</td>
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<td>9. FIRST CHURCH OF THE NAZARENE LAMESA</td>
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<tr>
<td>10. FIRST COAST NO MORE HOMELESS PETS INC</td>
<td>01-0709158</td>
<td>501 (C) 3</td>
<td>8,000.</td>
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<td>11. FIRST CONGREGATIONAL CHURCH</td>
<td>04-6149506</td>
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<td>12. FIRST CONGREGATIONAL CHURCH</td>
<td>06-6048390</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1.</td>
<td>FIRST CONGREGATIONAL CHURCH</td>
<td>06-0709290</td>
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<td>18,200</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2.</td>
<td>FIRST CONGREGATIONAL CHURCH</td>
<td>06-0713121</td>
<td>501 (C) 3</td>
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<td>3.</td>
<td>FIRST CONGREGATIONAL CHURCH</td>
<td>36-2327265</td>
<td>501 (C) 3</td>
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<td>4.</td>
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<td>5.</td>
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<td>6.</td>
<td>FIRST CONGREGATIONAL CHURCH - TRAVERSE CITY</td>
<td>38-1368750</td>
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<td>10,000</td>
<td>FMV</td>
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<td>7.</td>
<td>FIRST CONGREGATIONAL CHURCH IN WINCHESTER,</td>
<td>04-2104066</td>
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<td>8.</td>
<td>FIRST CONGREGATIONAL CHURCH INC</td>
<td>04-2242430</td>
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<td>7,500</td>
<td>FMV</td>
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<td>9.</td>
<td>FIRST CONGREGATIONAL CHURCH NURSERY SCHOOL</td>
<td>77-0381077</td>
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<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>FIRST CONGREGATIONAL CHURCH OF ANN ARBOR</td>
<td>38-1490185</td>
<td>501 (C) 3</td>
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<td>11.</td>
<td>FIRST CONGREGATIONAL CHURCH OF COLUMBUS OHI</td>
<td>31-4394163</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<td>12.</td>
<td>FIRST CONGREGATIONAL CHURCH OF GREENWICH</td>
<td>06-0653115</td>
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<td>24,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>FIRST CONGREGATIONAL CHURCH OF HOPKINTON, U</td>
<td>02-6006447</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FIRST CONGREGATIONAL CHURCH OF HUDSON</td>
<td>36-0762813</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>FIRST CONGREGATIONAL CHURCH OF PALO ALTO</td>
<td>94-1243683</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FIRST CONGREGATIONAL CHURCH OF WEST SPRINGF</td>
<td>04-2104186</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
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<td>36-2196425</td>
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<td>6</td>
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<td>01-6011227</td>
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<td>7</td>
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<td>8</td>
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<td>93-0520107</td>
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<td>FMV</td>
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<td>FIRST DESCENTS</td>
<td>81-0539964</td>
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<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<td>(1) FIRST ENGLISH EVANGELICAL LUTHERAN CHURCH</td>
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<td>(2) FIRST ENGLISH EVANGELICAL LUTHERAN CHURCH</td>
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<td>(3) FIRST EVANGELICAL FREE CHURCH</td>
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<td>FMV</td>
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<tr>
<td>(4) FIRST EVANGELICAL FREE CHURCH OF PRESCOTT I</td>
<td>86-0793216</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>700 N ROSSER ST PRESCOTT, AZ 86301</td>
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<td>(5) FIRST EVANGELICAL FREE CHURCH OF ST LOUIS C</td>
<td>41-0718363</td>
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<td>(6) FIRST EVANGELICAL FREE CHURCH OF WICHITA KS</td>
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<td>FMV</td>
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<td>(7) FIRST EVANGELICAL LUTHERAN CHURCH</td>
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<td>FMV</td>
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<tr>
<td>(8) FIRST FREE METHODIST CHURCH OF SANTA BARBARA</td>
<td>38-3808639</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1435 CLIFF DR SANTA BARBARA, CA 93109</td>
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<tr>
<td>(9) FIRST FREE WILL BAPTIST CHURCH OF CHEROTAH</td>
<td>73-1207802</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>713 NORTH BROADWAY STREET CHEROTAH, OK 7442</td>
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<td>(10) FIRST HEBREW CONGREGATION OF OAKLAND CALIF</td>
<td>94-1156845</td>
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<td>9,000</td>
<td>FMV</td>
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<td>(11) FIRST HUNGARIAN CONGREGATION DHAB ZEDEK</td>
<td>13-1790762</td>
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<tr>
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<td>(12) FIRST IMAGE</td>
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<td>501 (C) 3</td>
<td>13,750</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1315 SE 20TH AVE STE 2 PORTLAND, OR 97214</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

OMB No. 1545-0047

VANGUARD CHARITABLE ENDOWMENT PROGRAM 23-2888152

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

Open to Public Inspection

Name of the organization

Employer identification number

General Information on Grants and Assistance

Grants and Other Assistance to Domestic Organizations and Domestic Governments

Attach to Form 990.
**Part I**

**General Information on Grants and Assistance**

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1)</strong> FIRST JUDICIAL DISTRICT CASA PROGRAM INC</td>
<td>82-0458229</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(2)</strong> FIRST LIBERTY INSTITUTE</td>
<td>75-1403169</td>
<td>501 (C) 3</td>
<td>26,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(9)</strong> FIRST MENNONITE CHURCH OF CHAMPAIGN-URBANA</td>
<td>37-1037375</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td><strong>(11)</strong> FIRST METHODIST CHURCH OF DOUGLASVILLE INC</td>
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<td><strong>(12)</strong> FIRST NATIONS DEVELOPMENT INSTITUTE</td>
<td>56-1256491</td>
<td>501 (C) 3</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) FIRST NEW JERUSALEM SOCIETY OF PHILADELPHIA</td>
<td>23-1370481</td>
<td>501 (C) 3</td>
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<td>(4) FIRST PARISH IN CAMBRIDGE</td>
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<td>(5) FIRST PLACE FOR YOUTH</td>
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<td>(7) FIRST PRESBYTERIAN CHURCH</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>(11) FIRST PRESBYTERIAN CHURCH</td>
<td>16-0762618</td>
<td>501 (C) 3</td>
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<td>(12) FIRST PRESBYTERIAN CHURCH</td>
<td>23-1355118</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................................................... Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) FIRST PRESBYTERIAN CHURCH 345 MARKET STREET BLOOMSBURG, MS 39202 24-0796422 501 (C) 3 25,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(2) FIRST PRESBYTERIAN CHURCH 500 PARK STREET CHARLOTTESVILLE, NC 28012 54-0631288 501 (C) 3 101,950. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(3) FIRST PRESBYTERIAN CHURCH 4602 CARY STREET RD RICHMOND, LA 71101 54-0565002 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(4) FIRST PRESBYTERIAN CHURCH PO BOX 884 VIRGINIA BEACH, CO 81506 54-0603000 501 (C) 3 6,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(6) FIRST PRESBYTERIAN CHURCH PO BOX 1 BELMONT, TN 37220 56-0597087 501 (C) 3 32,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(8) FIRST PRESBYTERIAN CHURCH PO BOX 416 GREENWOOD, GA 30014 57-0352251 501 (C) 3 16,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(9) FIRST PRESBYTERIAN CHURCH 1169 CLARK STREET SW COVINGTON, SC 29648 58-1485138 501 (C) 3 17,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) FIRST PRESBYTERIAN CHURCH 16 N 3RD ST LAKE WALES, VA 23226 59-0855389 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(12) FIRST PRESBYTERIAN CHURCH 4815 FRANKLIN PIKE NASHVILLE, WA 99201 62-0475835 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table ..............................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<td>FIRST PRESBYTERIAN CHURCH P.O. BOX 6106 OAK RIDGE, IN 47201</td>
<td>62-0544278</td>
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<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FIRST PRESBYTERIAN CHURCH 620 STATE ST KNOXVILLE, MO 65201</td>
<td>62-0502577</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FIRST PRESBYTERIAN CHURCH 13910 NORTH STATE ST JACKSON, TN 37902</td>
<td>64-0334266</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FIRST PRESBYTERIAN CHURCH 512 7TH ST COLUMBUS, LA 70821</td>
<td>35-0867998</td>
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<td>13,000.</td>
<td>FMV</td>
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<tr>
<td>FIRST PRESBYTERIAN CHURCH 221 E 6TH ST BLOOMINGTON, TN 38331</td>
<td>35-0957087</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>42-0681418</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FIRST PRESBYTERIAN CHURCH 902 S WALNUT ST MT PLEASANT, NJ 7070</td>
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<td>FIRST PRESBYTERIAN CHURCH 509 S PEARL AVE JOPLIN, NY 14094</td>
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<td>FIRST PRESBYTERIAN CHURCH PO BOX 2006 BATON ROUGE, MO 64801</td>
<td>72-0417279</td>
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<td>FIRST PRESBYTERIAN CHURCH 900 JORDAN STREET SHREVEPORT, CA 95409</td>
<td>72-0423644</td>
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<td>30,100.</td>
<td>FMV</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>5</td>
<td>FIRST PRESBYTERIAN CHURCH - CODY, WY</td>
<td>83-0202555</td>
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<td>6</td>
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<td>59-1502178</td>
<td>501 (C) 3</td>
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<td>FIRST PRESBYTERIAN CHURCH - CHOWLEY MEADOW</td>
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<td>8</td>
<td>FIRST PRESBYTERIAN CHURCH - GREENVILLE, KY</td>
<td>61-0596700</td>
<td>501 (C) 3</td>
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<td>9</td>
<td>FIRST PRESBYTERIAN CHURCH - HICKORY, NC</td>
<td>56-0597093</td>
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<td>FMV</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to www.irs.gov/Form990 for the latest information.

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>P.O. BOX 866 HARBOR SPRINGS, MI 49740</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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*Continue the table with additional entries...*
**SCHEDULE I**  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**  

**Attach to Form 990.**  

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

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   ![Yes][No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>05-0536854</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>57-0368000</td>
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<td>FIRST SERVE LANCASTER</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>147 DEERFORD DRIVE LANCASTER, PA 17601</td>
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<tr>
<td>7301 BROADWAY EXT STE 225 OKLAHOMA CITY, OK</td>
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<td>FIRST SERVE USA</td>
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<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>2247 PALM BEACH LAKES BLVD. SUITE 203 WEST</td>
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<td>FIRST STAGE INC</td>
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<td>55,500</td>
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<tr>
<td>PO BOX 9384 MC LEAN, VA 22102</td>
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<td>FIRST STATE SQUASH INC</td>
<td>81-1843120</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>501 W 11TH ST WILMINGTON, DE 19801</td>
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<td>FIRST STEP HOUSE</td>
<td>46-5373396</td>
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<td>5,500</td>
<td>FMV</td>
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<tr>
<td>3808 ADAMS ST CARLSBAD, CA 92008</td>
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<td>FIRST STEP WOMENS CENTER</td>
<td>56-2669746</td>
<td>501 (C) 3</td>
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<tr>
<td>215 SOUTH GRAND AVE W STE A SPRINGFIELD, IL</td>
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<tr>
<td>FIRST STOP INC</td>
<td>26-1841014</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>206 STORES ST NW HUNTSVILLE, AL 35805</td>
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<tr>
<td>FIRST THE CHAPTER OF THE SANDHILLS</td>
<td>56-2248641</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
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<tr>
<td>15 DAWN RD STE 1 PINEHURST, NC 28374</td>
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<tr>
<td>FIRST THE NEW YORK INC</td>
<td>31-1724122</td>
<td>501 (C) 3</td>
<td>103,500</td>
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<td>N/A</td>
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<td>3545 JEROME AVE BRONX, NY 10467</td>
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<td>FIRST UNITARIAN CHURCH</td>
<td>25-0979357</td>
<td>501 (C) 3</td>
<td>7,200</td>
<td>FMV</td>
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<tr>
<td>605 MOREWOOD AVENUE PITTSBURGH, PA 15213</td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

*Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.*

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>730 HALSTEAD RD WILMINGTON, DE 19803</td>
<td>51-6000113</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN CHURCH OF OAKLAND</td>
<td>23-7015828</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN CHURCH OF ORLANDO ENDOWMENT</td>
<td>59-6205653</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN CHURCH OF ORLANDO, INC</td>
<td>59-0823945</td>
<td>501 (C) 3</td>
<td>7,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN CHURCH OF ST. LOUIS</td>
<td>43-0653314</td>
<td>501 (C) 3</td>
<td>15,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN SOCIETY OF MILWAUKEE</td>
<td>39-0871012</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITARIAN UNIVERSALIST CHURCH</td>
<td>31-6402537</td>
<td>501 (C) 3</td>
<td>9,029.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FIRST UNITARIAN UNIVERSALIST CHURCH OF HOUS</td>
<td>5200 FANNIN ST HOUSTON, TX 77004</td>
<td>74-1233797</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FIRST UNITED CHURCH OF CHRIST</td>
<td>300 UNION STREET NORTHFIELD, MN 55057</td>
<td>41-0757856</td>
<td>5,300.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITED CHURCH OF CHRIST - WINSTON-SAL</td>
<td>1912 WAUGHTOWN STREET WINSTON-SALEM, NC 271</td>
<td>56-1027522</td>
<td>25,000.</td>
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<tr>
<td>FIRST UNITED CHURCH OF CHRIST MILFORD</td>
<td>34 W MAIN ST MILFORD, CT 6460</td>
<td>06-0662116</td>
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<tr>
<td>FIRST UNITED METHODIST CHURCH</td>
<td>PO BOX 923 ELON, TX 78006</td>
<td>56-1051999</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes  No  [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| FIRST UNITED METHODIST CHURCH                      | 56-0649256 | 501 (C) 3                     | 15,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 120 GREENE ST SE HUNTSVILLE, WI 53190              | 63-0348132 | 501 (C) 3                     | 22,550.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| FIRST UNITED METHODIST CHURCH                      | 62-0720792 | 501 (C) 3                     | 10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| FIRST UNITED METHODIST CHURCH                      | 64-0405739 | 501 (C) 3                     | 11,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| FIRST UNITED METHODIST CHURCH                      | 35-1058569 | 501 (C) 3                     | 10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 145 S PRAIRIE ST WHITESTER, TX 34995                | 39-0150570 | 501 (C) 3                     | 20,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 203 WISCONSIN AVE MADISON, WI 65101                | 39-0816823 | 501 (C) 3                     | 13,842.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 325 E FRANKLIN ST APPLETON, WI 35186               | 39-0943395 | 501 (C) 3                     | 15,200.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ![Yes]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
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<td>501 (C) 3</td>
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<td>3. FIRST UNITED METHODIST CHURCH</td>
<td>44-0577780</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4. FIRST UNITED METHODIST CHURCH</td>
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<td>74-2213681</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>74-1222246</td>
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<td>FMV</td>
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<td>12. FIRST UNITED METHODIST CHURCH</td>
<td>74-1806148</td>
<td>501 (C) 3</td>
<td>105,000</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [ ]  No [x]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
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<td>1</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FIRST UNITED METHODIST CHURCH</td>
<td>91-0593487</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>3</td>
<td>FIRST UNITED METHODIST CHURCH - CULLMAN, AL</td>
<td>63-0302134</td>
<td>501 (C) 3</td>
<td>74,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
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<td>56-1271701</td>
<td>501 (C) 3</td>
<td>24,000.</td>
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<td>5</td>
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<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6</td>
<td>FIRST UNITED METHODIST CHURCH CARY</td>
<td>20-0142293</td>
<td>501 (C) 3</td>
<td>33,740.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7</td>
<td>FIRST UNITED METHODIST CHURCH- GOSHEN IN</td>
<td>35-6005629</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>FIRST UNITED METHODIST CHURCH MOORESTOWN</td>
<td>21-0738072</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>FIRST UNITED METHODIST CHURCH- NEW BRAUNFEL</td>
<td>74-1330201</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>FIRST UNITED METHODIST CHURCH OF ALTUS</td>
<td>74-0579259</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>FIRST UNITED METHODIST CHURCH OF DADE CITY</td>
<td>59-0866139</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>12</td>
<td>FIRST UNITED METHODIST CHURCH OF DALLAS</td>
<td>75-0886445</td>
<td>501 (C) 3</td>
<td>14,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** □ **No** □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) FIRST UNITED METHODIST CHURCH OF DULUTH FOU</td>
<td>36-3296826</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>230 E SKYLINE PKWY DULUTH, MN 55811</td>
<td>36-3296826</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) FIRST UNITED METHODIST CHURCH OF EVANSTON</td>
<td>36-2167071</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1630 HINMAN EVANSTON, IL 60201</td>
<td>36-2167071</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) FIRST UNITED METHODIST CHURCH OF GILBERT</td>
<td>86-0313415</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>331 S COOPER RD GILBERT, AZ 85233</td>
<td>86-0313415</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) FIRST UNITED METHODIST CHURCH OF HOLLIS</td>
<td>14-1422524</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>91-31 131ST STREET HOLLIS, NY 11423</td>
<td>14-1422524</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) FIRST UNITED METHODIST CHURCH OF ISLE OF PA</td>
<td>57-0425206</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 807 ISLE OF PALMS, SC 29451</td>
<td>57-0425206</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(6) FIRST UNITED METHODIST CHURCH OF KERRVILLE</td>
<td>74-1233799</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>321 THOMPSON DR KERRVILLE, TX 78028</td>
<td>74-1233799</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) FIRST UNITED METHODIST CHURCH OF LAKELAND I</td>
<td>59-0657325</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>72 LAKE MORTON DRIVE LAKELAND, FL 33801</td>
<td>59-0657325</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) FIRST UNITED METHODIST CHURCH OF RICHARDSON</td>
<td>75-0891454</td>
<td>501 (C) 3</td>
<td>37,010.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 830877 534 BELT LINE RICHARDSON, TX</td>
<td>75-0891454</td>
<td>501 (C) 3</td>
<td>37,010.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) FIRST UNITED METHODIST CHURCH OF SALINE</td>
<td>38-2566733</td>
<td>501 (C) 3</td>
<td>5,213.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1200 N ANN ARBOR ST SALINE, MI 48176</td>
<td>38-2566733</td>
<td>501 (C) 3</td>
<td>5,213.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) FIRST UNITED METHODIST CHURCH OF SANTA MONICA</td>
<td>95-1683888</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1008 11TH STREET SANTA MONICA, CA 90403</td>
<td>95-1683888</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) FIRST UNITED METHODIST CHURCH OF SHEFFIELD</td>
<td>63-0463740</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>701 NORTH MONTGOMERY AVE SHEFFIELD, AL 3566</td>
<td>63-0463740</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) FIRST UNITED METHODIST CHURCH SHERMAN, TX</td>
<td>75-0939928</td>
<td>501 (C) 3</td>
<td>20,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>401 N ELM STREET SHERMAN, TX 75090</td>
<td>75-0939928</td>
<td>501 (C) 3</td>
<td>20,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table. ........................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   ![X] Yes  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIRST UNITED PRESBYTERIAN CHURCH 390 NE 2ND ST McMINTNIVILLE, OR 97333</td>
<td>93-0391571</td>
<td>501 (c) 3</td>
<td>52,175.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UNITED PRESBYTERIAN CHURCH 114 SW 8TH ST CORVALLIS, OR 97128</td>
<td>93-0520151</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIRST UP 1608 WALNUT ST SUITE 300 PHILADELPHIA, PA 1</td>
<td>23-6498144</td>
<td>501 (c) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FISH 312 WALLER MILL RD STE 800 WILLIAMSBURG, VA</td>
<td>54-1523058</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FISHERS OF MCHENRY PO BOX 282 MCHENRY, IL 60051</td>
<td>36-3313155</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FISHERS OF SANIBEL–CAPTIVA INC 2430 PERIWINKLE WAY STE B SANIBEL, FL 33957</td>
<td>20-8892375</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FISHER HOUSE FOUNDATION INC 12300 TWINBROOK PWY ROCKVILLE, MD 20852</td>
<td>11-3158401</td>
<td>501 (c) 3</td>
<td>272,778.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FISHERMANS MARK 37 S MAIN ST LAMBERTVILLE, NJ 8530</td>
<td>22-2302255</td>
<td>501 (c) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FISHERS ISLAND RECREATIONAL PATH FOUNDATION PO BOX 616 FISHERS ISLAND, NY 6390</td>
<td>11-3588899</td>
<td>501 (c) 3</td>
<td>120,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FISHKILL UNITED METHODIST CHURCH 38 BROAD ST FISHKILL, NY 12524</td>
<td>22-2523881</td>
<td>501 (c) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FISTOWN PRESERVATION SOCIETY INC PO BOX 721 LELAND, MI 49654</td>
<td>38-3621736</td>
<td>501 (c) 3</td>
<td>9,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FIST OF GOLD YOUTH CENTER INC 101 W MISSION BLVD STE 110 # 121 POMONA, CA</td>
<td>95-4724480</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIVE FORKS BRETHREN IN CHRIST CHURCH</td>
<td>9244 FIVE FORKS RD WAYNESBORO, PA 17268</td>
<td>25-1608104</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIVE TALENTS U S A</td>
<td>2789 HARTLAND RD FALLS CHURCH, VA 22043</td>
<td>54-1940918</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FIVER CHILDREN’S FOUNDATION INC</td>
<td>519 8TH AVE FL 24 NEW YORK, NY 10018</td>
<td>13-3993633</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FIX THE SYSTEM – WISCONSIN INC</td>
<td>8850 BLACKHAWK RD APT 403 MIDDLETON, WI 535</td>
<td>83-2323474</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FLATIRON COMMUNITY CHURCH</td>
<td>520 8TH AVE FL 20 NEW YORK, NY 10018</td>
<td>13-3848582</td>
<td>501 (C) 3</td>
<td>74,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FLAT RIVER OUTREACH MINISTRIES INC</td>
<td>11535 FULTON ST E LOWELL, MI 49331</td>
<td>38-3402457</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FLINT BAPTIST CHURCH</td>
<td>400 W SOUTH BOULDER RD STE 1700 LAFAYETTE,</td>
<td>47-0857845</td>
<td>501 (C) 3</td>
<td>41,675.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FLINT JEWISH FEDERATION</td>
<td>PO BOX 182 FLINT, TX 75762</td>
<td>75-1435567</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FLINT HILL SCHOOL</td>
<td>3320 JERMANTOWN RD OAKTON, VA 22124</td>
<td>54-1538212</td>
<td>501 (C) 3</td>
<td>251,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FLINT JEWISH FEDERATION</td>
<td>5080 W BRISTOL RD STE 3 FLINT, MI 48507</td>
<td>38-1359257</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FLOOD CHURCH ASSOCIATION</td>
<td>3878 RUFFIN RD SAN DIEGO, CA 92123</td>
<td>47-2110206</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
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<td>1</td>
<td>FLORENCE CRITTENTON SERVICES INC</td>
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<td>FMV</td>
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<td>06-6062157</td>
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<td>10,500.</td>
<td>FMV</td>
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<td>3</td>
<td>FLORENCE IMMIGRANT AND REFUGEE RIGHTS PROJE</td>
<td>86-0658103</td>
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<td>149,500.</td>
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<td>4</td>
<td>FLORENCE MELTON ADULT MINI-SCHOOL CORPORATI</td>
<td>01-0725179</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>5</td>
<td>FLORENTINE OPERA CO INC</td>
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<td>6</td>
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<td>33-0052976</td>
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<td>7</td>
<td>FLORIDA AGRICULTURAL &amp; MECHANICAL UNIV FOUN</td>
<td>59-6175096</td>
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<td>11</td>
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<td>12</td>
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<td>FMV</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ..............................................................  X Yes  No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2486 CECIL WEBB PL LIVE OAK, FL 32060</td>
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<td>FLORIDA STATE UNIVERSITY FOUNDATION INC</td>
<td>59-6152180</td>
<td>501 (C) 3</td>
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<td>FLORIDA TRUST FOR HISTORIC PRESERVATION INC</td>
<td>59-1834416</td>
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<td>FLORIDA WEST COAST PUBLIC BROADCASTING INC</td>
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<td>FLORIDA WILDLIFE CORRIDOR INC</td>
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<td>PO BOX 1802 TAMPA, FL 33601</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

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   Yes  No

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Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>FOCUS ON THE FAMILY</td>
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<td>501 (c) 3</td>
<td>538,954.</td>
<td>FMV</td>
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<td>12</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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(Form 990)

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   - Yes [x]  
   - No [ ]

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>5,500.</td>
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<td>2</td>
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<td>75-1240653</td>
<td>501 (C) 3</td>
<td>46,750.</td>
<td>FMV</td>
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<td>3</td>
<td>FOLDS OF HONOR FOUNDATION 5944 MCFARLAND DR PLANO, TX 75093</td>
<td>45-2524343</td>
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<td>22,000.</td>
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<td>13-3998872</td>
<td>501 (C) 3</td>
<td>202,000.</td>
<td>FMV</td>
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<td>FOLSOM CORDOVA JOINT UNIFIED SCHOOL DISTRICT PO BOX 26903 SACRAMENTO, CA 95826</td>
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<td>FOOD &amp; FRIENDS INC 219 RIGGS RD NE WASHINGTON, DC 20011</td>
<td>52-1648941</td>
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<td>FOOD 4 SOULS 10807 ALLISONVILLE RD FISHERS, IN 46038</td>
<td>46-2365561</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>11</td>
<td>FOOD ALLERGY RESEARCH &amp; EDUCATION INC 7901 JONES BRANCH DR STE 240 MCLEAN, VA 22101</td>
<td>13-3905508</td>
<td>501 (C) 3</td>
<td>20,500.</td>
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<td>FOOD AND ENVIRONMENT REPORTING NETWORK 575 5TH AVE RM 903 NEW YORK, NY 10036</td>
<td>27-4108978</td>
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<td>24,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1)</td>
<td>FOOD AND SHELTER INC</td>
<td>73-1222111</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>FOOD BANK COALITION OF SAN LUIS OBISPO COUNTY</td>
<td>77-0210727</td>
<td>501 (C) 3</td>
<td>17,300.</td>
<td>FMV</td>
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<tr>
<td>(3)</td>
<td>FOOD BANK CONTRA COSTA AND SOLANO</td>
<td>94-2418054</td>
<td>501 (C) 3</td>
<td>247,605.</td>
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<td>(4)</td>
<td>FOOD BANK FOR LARIMER COUNTY</td>
<td>74-2336171</td>
<td>501 (C) 3</td>
<td>36,050.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>FOOD BANK FOR MONTEREY COUNTY</td>
<td>77-0270228</td>
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<td>(6)</td>
<td>FOOD BANK FOR NEW YORK CITY</td>
<td>13-3179546</td>
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<td>(7)</td>
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<td>75-1888192</td>
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<td>(8)</td>
<td>FOOD BANK OF ALASKA INC</td>
<td>92-0073175</td>
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<td>FOOD BANK OF CENTRAL &amp; EASTERN NORTH CAROLINA</td>
<td>56-1283426</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>FOOD BANK OF CENTRAL NEW YORK</td>
<td>22-2816988</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>FOOD BANK OF DELAWARE INC</td>
<td>51-0258994</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>FOOD BANK OF EASTERN MICHIGAN INC</td>
<td>38-2376798</td>
<td>501 (C) 3</td>
<td>24,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

<table>
<thead>
<tr>
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<th>General Information on Grants and Assistance</th>
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<tbody>
<tr>
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</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
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<tbody>
<tr>
<td>FOOD BANK OF EASTERN NEW MEXICO INC</td>
<td>85-0320784</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>FOOD BANK OF IOWA</td>
<td>42-1177880</td>
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<tr>
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<td>N/A</td>
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<td>FOOD BANK OF LOWER FAIRFIELD COUNTY INC</td>
<td>02-0684220</td>
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<td>FMV</td>
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<td>FOOD BANK OF NEVADA COUNTY INC</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>FOOD BANK OF NORTHEAST GEORGIA</td>
<td>58-1938066</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>FOOD BANK OF NORTHEAST LOUISIANA INC</td>
<td>72-1333809</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>FOOD BANK OF SIOUXLAND INC</td>
<td>42-1381516</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>FOOD BANK OF SOMERSET COUNTY INC</td>
<td>22-2405550</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>FOOD BANK OF SOUTH JERSEY INC</td>
<td>22-2623089</td>
<td>501 (C) 3</td>
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<td>FOOD BANK OF THE RIO GRANDE VALLEY INC</td>
<td>74-2421560</td>
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<tr>
<td>FOOD BANK OF THE ROCKIES</td>
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<td>119,412.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table. .................................................................

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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?   Yes   No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1. Name and address of organization or government
2. EIN
3. IRC section (if applicable)
4. Amount of cash grant
5. Amount of non-cash assistance
7. Description of noncash assistance
8. Purpose of grant or assistance

<table>
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<tr>
<th></th>
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<th>Description of noncash assistance</th>
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<td>1</td>
<td>FOOD CONNECT CO</td>
<td>81-3230981</td>
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<tr>
<td>2</td>
<td>FOOD DEPOT</td>
<td>85-0416803</td>
<td>501 (C) 3</td>
<td>101,001.</td>
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<td>3</td>
<td>FOOD EMPOWERMENT PROJECT</td>
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<td>N/A</td>
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<tr>
<td>4</td>
<td>FOOD FINDERS FOOD BANK INC</td>
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<tr>
<td>5</td>
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<td>6</td>
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<td>FOOD FOR THE HUNGRY INC</td>
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<td>11</td>
<td>FOOD FOR THE POOR INC</td>
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<td>12</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>
**Schedule I**
(Form 990) 2020

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<td>(1)</td>
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<td>(2)</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>FOOD IN NEED OF DISTRIBUTION INC</td>
<td>33-0006007</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(4)</td>
<td>FOOD LIFELINE</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(5)</td>
<td>FOOD LINK INC</td>
<td>47-1840355</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>(6)</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>FOOD PANTRY OF ALPINE</td>
<td>27-0571881</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>(8)</td>
<td>FOOD PANTRY OF WAUKESHA COUNTY INC</td>
<td>39-1502732</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>(11)</td>
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<td>FOOD RUNNERS</td>
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<td>501 (c) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - No ❌

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</thead>
<tbody>
<tr>
<td>FOOD SHARE OF LINCOLN COUNTY</td>
<td>535 NE 1ST ST NEWPORT, OR 97365</td>
<td>93-0793059</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODBANK FOR THE HEARTLAND</td>
<td>10525 J ST OMAHA, NE 68127</td>
<td>47-0637701</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FOODBANK INC</td>
<td>56 ARMOR PL DAYTON, OH 45417</td>
<td>86-1082880</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODBANK OF MONMOUTH AND OCEAN COUNTIES INC</td>
<td>3300 ROUTE 66 NEPTUNE, NJ 7753</td>
<td>22-2622522</td>
<td>501 (C) 3</td>
<td>67,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODBANK OF SANTA BARBARA COUNTY</td>
<td>4554 HOLLISTER AVE SANTA BARBARA, CA 93110</td>
<td>77-0169214</td>
<td>501 (C) 3</td>
<td>47,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODBANK OF SOUTHEASTERN VIRGINIA</td>
<td>800 TIDEWATER DR NORFOLK, VA 23504</td>
<td>52-1219783</td>
<td>501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODCORPS INC</td>
<td>1140 SE 7TH AVE PORTLAND, OR 97214</td>
<td>27-3990987</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODLINK INC</td>
<td>1999 MOUNT READ BLVD ROCHESTER, NY 14615</td>
<td>22-2428304</td>
<td>501 (C) 3</td>
<td>24,442.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODSHARE INC</td>
<td>450 WOODLAND AVE BLOOMFIELD, CT 06032</td>
<td>22-2474771</td>
<td>501 (C) 3</td>
<td>32,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOODSHARE INC</td>
<td>4156 SOUTHBANK RD OXNARD, CA 93036</td>
<td>77-0018162</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOOTIE SCHOOL ASSOCIATION INC</td>
<td>50 LOOMIS PL NEW HAVEN, CT 6511</td>
<td>06-0646647</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FOOTHILL COMMUNITY FREE METHODIST CHURCH</td>
<td>2475 FOOTHILL BLVD OROVILLE, CA 95966</td>
<td>94-2553549</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes ☑

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Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foothill-De Anza Community Colleges Foundation</td>
<td>12345 S EL MONTE RD LOS ALTOS HILLS, CA 940 94-3258220</td>
<td>501 (C) 3</td>
<td>89,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>Foothills Baptist Church</td>
<td>15450 S 21ST ST PHOENIX, AZ 85048 86-0573215</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Foothills Bible Church</td>
<td>6100 S DEVINNEY WAY LITTLETON, CO 80127 84-0676713</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>Foothills Caring Corps Inc</td>
<td>PO BOX 831 CAREFREE, AZ 85377 26-4341807</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>Foothills Congregational UCC</td>
<td>461 ORANGE AVENUE LOS ALTOS, CA 94022 94-6050423</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Foothills Conservancy of North Carolina Inc</td>
<td>PO BOX 3023 MORGANTON, NC 28680 56-1947390</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Foothills Food Bank</td>
<td>6038 E HIDDEN VALLEY DR CAVE CREEK, AZ 8533 86-0619725</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Foothills Forum</td>
<td>311 GAY STREET WASHINGTON, VA 22747 52-1071448</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Footsteps Inc</td>
<td>114 JOHN ST UNIT 930 NEW YORK, NY 10272 20-0666923</td>
<td>501 (C) 3</td>
<td>13,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>For His Glory Inc</td>
<td>6673 ANNESBROOK PL SW OCEAN ISLE BEACH, NC 39-1941630</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>For Inspiration and Recognition of Science</td>
<td>200 BEDFORD ST MANCHESTER, NH 3101 22-2990908</td>
<td>501 (C) 3</td>
<td>17,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>For Kids Foundation</td>
<td>PO BOX 5153 REMO, NV 89513 75-3093964</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>1. FOR PETS SAKE CANCER RESPITE FOUNDATION</td>
<td>23-3013896</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. FOR PETS SAKE</td>
<td>81-0653162</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. FORBUSH CORNER NORDIC</td>
<td>83-4617329</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. FORD &amp; THEATRE SOCIETY</td>
<td>52-6073157</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FORDHAM PREPARATORY SCHOOL</td>
<td>13-2660346</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. FORDHAM UNIVERSITY</td>
<td>13-1740451</td>
<td>501 (C) 3</td>
<td>815,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FOREIGN HELP FUND</td>
<td>20-5923114</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. FOREIGN POLICY RESEARCH INSTITUTE</td>
<td>23-1731998</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. FORESIGHT DEVELOPMENT INTERNATIONAL INCORPOR</td>
<td>04-3565713</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. FOREST CITY AREA HISTORICAL SOCIETY</td>
<td>27-2084633</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<tr>
<td>11. FOREST HILL CHURCH</td>
<td>56-0754698</td>
<td>501 (C) 3</td>
<td>76,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. FOREST HILLS PRESBYTERIAN CHURCH</td>
<td>38-2268581</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**SCHEDULE I**  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  
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Name of the organization  
VANGUARD CHARITABLE ENDOWMENT PROGRAM  
Employer identification number  
23-2888152

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   - No

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) FOREST LAKE PRESBYTERIAN CHURCH</td>
<td>57-6005997</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6500 N TRENHOLM RD COLUMBIA, SC 29206</td>
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<td>(2) FOREST LAKE UNITED METHODIST CHURCH</td>
<td>63-0383113</td>
<td>501 (c) 3</td>
<td>73,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1711 4TH AVENUE TUSCALOOSA, AL 35401</td>
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<td>(3) FOREST PARK FOREVER INC</td>
<td>43-1427062</td>
<td>501 (c) 3</td>
<td>27,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5595 GRAND DRIVE IN FOREST PARK SAINT LOUIS</td>
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<tr>
<td>(4) FORGE INC</td>
<td>20-1795062</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1272 MILWAUKEE, WI 53201</td>
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<tr>
<td>(5) FORGOTTEN CHILDREN MINISTRIES</td>
<td>41-2096734</td>
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<td>N/A</td>
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<tr>
<td>PO BOX 36399 BIRMINGHAM, AL 35236</td>
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<tr>
<td>(6) FORGOTTEN HARVEST INC</td>
<td>38-2926476</td>
<td>501 (c) 3</td>
<td>48,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>21800 GREENFIELD RD OAK PARK, MI 48237</td>
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<tr>
<td>(7) FORGOTTEN SOLDIER PROGRAM</td>
<td>27-2305344</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>991 LINCOLN WAY AUBURN, CA 95603</td>
<td></td>
<td></td>
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<tr>
<td>(8) FOR-MAN VALLEY PUBLIC LIBRARY</td>
<td>37-1372277</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 710 MANITO, IL 61546</td>
<td></td>
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<tr>
<td>(9) FOR-SITE FOUNDATION</td>
<td>84-1617222</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 MARINA BLVD STE 255 SAN FRANCISCO, CA 941</td>
<td></td>
<td></td>
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<tr>
<td>(10) FORSYTH HUMANE SOCIETY</td>
<td>23-7055886</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4881 COUNTRY CLUB RD WINSTON SALEM, NC 2710</td>
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</tr>
<tr>
<td>(11) FORSYTH MEDICAL CENTER FOUNDATION</td>
<td>56-2120959</td>
<td>501 (c) 3</td>
<td>5,015.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2085 FRONTIS PLAZA BLVD WINSTON SALEM, NC 2</td>
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<tr>
<td>(12) FOR-T BELKNAP COMMUNITY ECONOMIC DEVELOPMENT</td>
<td>47-1275202</td>
<td>501 (c) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>189 CHIPPEWA AVE HARLEM, MT 59526</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FORT BEND SENIOR CITIZENS MEALS ON WHEELS &amp;</td>
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<td>FORT CALHOUN BAPTIST CHURCH</td>
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<td>FORUM FOR SCRIPTURAL CHRISTIANITY</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 2 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
➡️ Attach to Form 990.  
➡️ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(4) FOSS WATERWAY SEAPORT</td>
<td>91-1741794</td>
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<td>(5) FOSTER PARROTS LTD</td>
<td>04-3458267</td>
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<td>12,000.</td>
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<td>(7) FOTC - SF BAY AREA</td>
<td>81-3921100</td>
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<td>(8) FOUNDATION AT MONROE COUNTY COMMUNITY COLLE</td>
<td>38-3442216</td>
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<td>FMV</td>
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<td>(9) FOUNDATION CARING FOR COLOMBIA LTD</td>
<td>20-0484859</td>
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<td>36,900.</td>
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<td>(12) FOUNDATION FOR AFRICAN MEDICINE AND EDUCATI</td>
<td>22-3883033</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☒ No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) FOUNDATION FOR ANGELMAN SYNDROME THERAPEUTI</td>
<td>26-3160079</td>
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<td>(2) FOUNDATION FOR APPLIED CONSERVATIVE LEADERS</td>
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<td>(6) FOUNDATION FOR CLOVIS SCHOOLS</td>
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<td>(8) FOUNDATION FOR CULTURAL REVIEW INC</td>
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<td>(9) FOUNDATION FOR ECONOMIC EDUCATION INC</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number** 23-2888152

---

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Answer:** Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
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<td>(1) FOUNDATION FOR EXCELLENCE INC</td>
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<td>(2) FOUNDATION FOR EXCELLENCE IN EDUCATION INC</td>
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<td>(3) FOUNDATION FOR FAMILY AND COMMUNITY HEALING</td>
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<td>(5) FOUNDATION FOR GOVERNMENT ACCOUNTABILITY INC</td>
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<td>(6) FOUNDATION FOR GROSSMONT AND CUYAMACA COLLE</td>
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<td>(9) FOUNDATION FOR INDIANA UNIVERSITY OF PENNSY</td>
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<td>(11) FOUNDATION FOR JEWISH CAMP INC</td>
<td>22-3551013</td>
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<td>12,400.</td>
<td>FMV</td>
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<td>253 W 35TH ST FL 4 NEW YORK, NY 10001</td>
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<td>16-6023261</td>
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<td>2640 N FOREST RD STE 200 GETZVILLE, NY 1406</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Foundation</th>
<th>(b) EIN</th>
<th>(c) IRC section</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>Foundation for Justice &amp; Peace</td>
<td>81-0935006</td>
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<td>20-3974816</td>
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<td>Foundation for Madison's Public Schools Inc</td>
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<td>Foundation for Metrowest Inc</td>
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<td>Foundation for Missouri History</td>
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<td>Foundation for Morrilton Medical Center In</td>
<td>475 South St Morrilton, Ar 72116</td>
<td>22-3392808</td>
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<td>FMV</td>
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<td>Foundation for National Progress</td>
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<td>Foundation for Promotion of Sports and Game</td>
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<td>Foundation for Public Broadcasting in Georg</td>
<td>58-1510475</td>
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<td>Foundation for Resilient Societies</td>
<td>46-2404814</td>
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<td>Foundation for South Orange Public Library</td>
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<td>Foundation for Students Rising Above</td>
<td>81-0615987</td>
<td>501 (c) 3</td>
<td>13,500</td>
<td>FMV</td>
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</tbody>
</table>
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   □ Yes  □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) FOUNDATION FOR TACOMA STUDENTS</td>
<td>27-3029219</td>
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<td>30,500.</td>
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<tr>
<td>(2) FOUNDATION FOR TEACHING ECONOMICS</td>
<td>51-0183347</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) FOUNDATION FOR THE ADVANCEMENT AND REHABILIT</td>
<td>46-5128655</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) FOUNDATION FOR THE CAROLINAS</td>
<td>56-6047886</td>
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<td>157,063.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) FOUNDATION FOR THE DEFENSE OF DEMOCRACIES I</td>
<td>13-4174402</td>
<td>501 (C) 3</td>
<td>167,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) FOUNDATION OF COMPASSIONATE AMERICAN SAMARI</td>
<td>31-1237943</td>
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<td>100,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) FOUNDATION OF FIRSTHEALTH INC</td>
<td>51-0191937</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(8) FOUNDATION OF MONTANA STATE UNIVERSITY-BILL</td>
<td>81-0301477</td>
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<td>35,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) FOUNDATION OF NEW YORK-PRESBYTERIAN HUDSON</td>
<td>13-3307781</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(10) FOUNDATION OF THE AMERICAN ACADEMY OF OPHTH</td>
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<td>21,000.</td>
<td>FMV</td>
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<tr>
<td>(11) FOUNDATION OF THE CATHOLIC DIOCESE OF COLUMBUS</td>
<td>31-1116640</td>
<td>501 (C) 3</td>
<td>225,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) FOUNDATION OF THE ROMAN CATHOLIC DIOCESE OF</td>
<td>16-1517131</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) FOUNDATION OF THE STATE UNIVERSITY OF NEW Y</td>
<td>16-6053710</td>
<td>501 (c) 3</td>
<td>70,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 6055 BINGHAMTON, NY 13902</td>
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<tr>
<td>(2) FOUNDATION OF THE UNIVERSITY OF THE VALLEY</td>
<td>22-2171258</td>
<td>501 (c) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15 ROSEL RD STE 10 PRINCETON, NJ 8540</td>
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<td>(3) FOUNDATION TO ADVANCE CATHOLIC EDUCATION IN</td>
<td>04-2104895</td>
<td>501 (c) 3</td>
<td>12,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) FOUNDATIONS AND DONORS INTEREST IN CATHOLIC</td>
<td>52-1062824</td>
<td>501 (c) 3</td>
<td>7,900</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(5) FOUNDATIONS IN EDUCATION INC</td>
<td>47-5130557</td>
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<td>12,000</td>
<td>FMV</td>
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<td>238 JEWETT AVE BRIDGEPORT, CT 6606</td>
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<td>(6) FOUNDATIONS INC</td>
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<td>425,000</td>
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<td>701 E GATE DR STE 300 MOUNT LAUREL, NJ 8054</td>
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<td>(7) FOUNDERS BAPTIST CHURCH INC</td>
<td>74-2130236</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>(8) FOUNDERS FIRST COMMUNITY DEVELOPMENT CORP</td>
<td>74-3166719</td>
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<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10755 SCPS POWAY FWY SUITE 412 SAN DIEGO,</td>
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<td>(9) FOUNDERS FUND INC</td>
<td>65-0327093</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>(10) FOUNDERS PLEDGE INC</td>
<td>37-1795297</td>
<td>501 (c) 3</td>
<td>120,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
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</tr>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>FOUR PAWS RESCUE 105 W 100 N MILLVILLE, UT 84326</td>
<td>31-1724412</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>FOUR PEAKS FOUNDATION 26817 N 152ND ST SCOTTSDALE, AZ 85262</td>
<td>27-0335332</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>FOUR WINDS ECCLESIA INCORPORATED 15411 COUNTY ROAD 455 MONTVERDE, FL 34756</td>
<td>59-3326735</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4)</td>
<td>FOUR10 MINISTRIES 4091 BARBERS PT NEW HAVEN, IN 46774</td>
<td>83-3017120</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>FOURTH PRESBYTERIAN CHURCH 5500 RIVER RD BETHESDA, MD 20816</td>
<td>53-0196534</td>
<td>501 (C) 3</td>
<td>85,700.</td>
<td>FMV</td>
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<tr>
<td>(6)</td>
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<td>36-2167080</td>
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<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>FOX CHAPEL PRESBYTERIAN CHURCH 384 FOX CHAPEL ROAD PITTSBURGH, PA 15238</td>
<td>25-1028115</td>
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<td>17,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>FOX CITIES PERFORMING ARTS CENTER INC 400 W COLLEGE AVE APPLETON, WI 54911</td>
<td>39-1977839</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>FOX TUCSON THEATRE FOUNDATION 17 W CONGRESS ST TUCSON, AZ 85701</td>
<td>86-0965120</td>
<td>501 (C) 3</td>
<td>8,000.</td>
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<td>(10)</td>
<td>FOX VALLEY UNITARIAN UNIVERSALIST FELLOWSHI 2600 E. PHILLIP LANE APPLETON, WI 54913</td>
<td>39-1378457</td>
<td>501 (C) 3</td>
<td>27,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>FOXCROFT SCHOOL 22407 FOXHOUND LN MIDDLEBURG, VA 20117</td>
<td>54-0505898</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>(12)</td>
<td>FOXG1 RESEARCH INC 1 LUCKENBACH LN PORT WASHINGTON, NY 11050</td>
<td>82-5300929</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

## Part I

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>FOXHOWE ASSOCIATION</td>
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<td>26-4348429</td>
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<td>04-3236535</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FRANCISCAN FOUNDATION FOR THE HOLY LAND</td>
<td>33-0628775</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Name of the organization

<table>
<thead>
<tr>
<th>VANGUARD CHARITABLE ENDOWMENT PROGRAM</th>
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</thead>
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Employer identification number

| 23-2888152 |

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) FRANCISCAN LIFE CENTER NETWORK INCORPORATED</td>
<td>22-3164899</td>
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<td>9,000.</td>
<td>FMV</td>
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<tr>
<td>271 FINCH AVE MERIDEN, CT 6451</td>
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<td>(2) FRANCISCAN MISSIONARY UNION</td>
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<td>FMV</td>
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<td>(3) FRANCISCAN RENEWAL CENTER INC</td>
<td>86-0720036</td>
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<td>12,100.</td>
<td>FMV</td>
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<td>(4) FRANCISCAN SISTERS OF PERFETUAL</td>
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<td>FMV</td>
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<td>(5) FRANCISCAN UNIVERSITY OF STEUBENVILLE</td>
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<td>1235 UNIVERSITY BLVD STEUBENVILLE, OH 43952</td>
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<td>(6) FRANCISCAN WORKS</td>
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<td>(7) FRANCISCO PARK CONSERVANCY</td>
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<tr>
<td>PO BOX 475035 SAN FRANCISCO, CA 94147</td>
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<td>(8) FRANCONIA MENNONITE CHURCH</td>
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<td>613 HARLEYSVILLE PIKE TELFORD, PA 18969</td>
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<td>(9) FRANK BETTE CENTER FOR THE ARTS INC</td>
<td>94-3366957</td>
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<td>FMV</td>
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<td>(10) FRANK LENTZ FOUNDATION LTD</td>
<td>26-1932686</td>
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<td>(11) FRANKIE LEMMON SCHOOL AND DEVELOPMENTAL CEN</td>
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<td>(12) FRANKLIN &amp; MARSHALL COLLEGE</td>
<td>23-1352635</td>
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<td>34,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 3003 LANCASTER, PA 17604</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>(2) FRANKLIN HILL PRESBYTERIAN CHURCH</td>
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<td>FMV</td>
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<td>(3) FRANKLIN INSTITUTE</td>
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<td>(4) FRANKLIN LAND TRUST INC</td>
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<td>(6) FRANKLIN ROAD ACADEMY INC</td>
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<td>300,000.</td>
<td>FMV</td>
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<td>4700 FRANKLIN PIKE NASHVILLE, TN 37220</td>
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<td>(7) FRANKLIN W OLIN COLLEGE OF ENGINEERING INC</td>
<td>06-1519057</td>
<td>501 (C) 3</td>
<td>338,000.</td>
<td>FMV</td>
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<tr>
<td>1000 OLIN WAY NEEDHAM, MA 2492</td>
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<td>(8) FRANSALEAN MISSIONARIES INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(9) FRASSATI CATHOLIC ACADEMY</td>
<td>81-3209179</td>
<td>501 (C) 3</td>
<td>38,600.</td>
<td>FMV</td>
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<td>1300 S STEELE ST DENVER, CO 80210</td>
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<td>(10) FRAXA RESEARCH FOUNDATION INC</td>
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<td>FMV</td>
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<td>10 PRINCE FL NEWBURYPORT, MA 1950</td>
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<td>(11) FRED HOLLONS FOUNDATION USA</td>
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<td>(12) FRED HUTCHINSON CANCER RESEARCH CENTER</td>
<td>23-7156071</td>
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<td>168,500.</td>
<td>FMV</td>
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Schedule I (Form 990) 2020

JSA
OE 1288 1.000

18674H 1467  V 20-7.21
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRED JORDAN MISSIONS</td>
<td>95-6000110</td>
<td>501 (c) 3</td>
<td>719,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FREDERICK HISS SCHOLARSHIP FUND INC</td>
<td>20-8741963</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREDERICKSBURG BAPTIST CHURCH</td>
<td>30-0523302</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FREDERICKSBURG REGIONAL FOODBANK</td>
<td>54-1255013</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE METHODIST CHURCH OF NORTH AMERICA</td>
<td>35-0877568</td>
<td>501 (c) 3</td>
<td>6,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE SOFTWARE FOUNDATION INC</td>
<td>04-2888848</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE SPEECH FOR PEOPLE INC</td>
<td>45-0709993</td>
<td>501 (c) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE SPIRIT MEDIA NFP</td>
<td>36-4456215</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE THE KIDS INC</td>
<td>22-3741436</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE THE OPPRESSED</td>
<td>47-4648581</td>
<td>501 (c) 3</td>
<td>25,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FREE THE PEOPLE FIGHT THE POWER FOUNDATION</td>
<td>47-5598652</td>
<td>501 (c) 3</td>
<td>185,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>FREE TO CHOOSE NETWORK</td>
<td>52-1455677</td>
<td>501 (c) 3</td>
<td>185,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

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3. Enter total number of other organizations listed in the line 1 table.  

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II
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</thead>
<tbody>
<tr>
<td>FREE WHEELCHAIR MISSION</td>
<td>15279 ALTON PKWY STE 300 IRVINE, CA 92618</td>
<td>31-1781635</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM ALLIANCE</td>
<td>25570 MARKEY CT STERLING, VA 20166</td>
<td>54-1411430</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM FROM RELIGION FOUNDATION INC</td>
<td>10 N HENRY ST MADISON, WI 53703</td>
<td>39-1302520</td>
<td>501 (C) 3</td>
<td>59,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM FUND</td>
<td>315 FLATBUSH AVE # 406 BROOKLYN, NY 1 1217</td>
<td>30-0805768</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM HOUSE INC</td>
<td>1850 M ST NW FL 11 WASHINGTON, DC 20036</td>
<td>13-1656647</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM OF THE PRESS FOUNDATION</td>
<td>222 SUTTER ST STE 600 SAN FRANCISCO, CA 941</td>
<td>46-0967274</td>
<td>501 (C) 3</td>
<td>202,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM SERVICE DOGS INC</td>
<td>7193 S DILLON CT ENGLEWOOD, CO 80112</td>
<td>84-1068936</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOM VILLAGE EDUCATIONAL ASSOCIATION</td>
<td>23442 EL TORO RD APT E327 LAKE FOREST, CA 9</td>
<td>33-0440269</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOMS PROMISE INC</td>
<td>PO BOX 58996 NASHVILLE, TN 37205</td>
<td>26-0566457</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREEDOMWORKS FOUNDATION</td>
<td>111 K ST NE FL 6 WASHINGTON, DC 20002</td>
<td>52-1526916</td>
<td>501 (C) 3</td>
<td>1,287,499.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREESSET INCORPORATED</td>
<td>2943 RIVERSIDE DR CINCINNATI, OH 45226</td>
<td>45-3341123</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>FREESTORE-FOODBANK INC</td>
<td>1141 CENTRAL PKWY CINCINNATI, OH 45202</td>
<td>23-7122205</td>
<td>501 (C) 3</td>
<td>112,006.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - [x] Yes
   - [ ] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1</td>
<td>FREIRE CHARTER SCHOOL WILMINGTON INC</td>
<td>46-5680913</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FREIRE FOUNDATION</td>
<td>27-2568814</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>FREMONT STREET METHODIST CHURCH</td>
<td>93-0395576</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>FRENCH AMERICAN INTERNATIONAL SCHOOL</td>
<td>94-1558658</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>FRENCH AMERICAN SCHOOL OF NEW YORK INC</td>
<td>13-3052502</td>
<td>501 (c) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>FRENCH AND PICKERING CREEKS CONSERVATION TR</td>
<td>23-6429095</td>
<td>501 (c) 3</td>
<td>22,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>FRENCH QUARTER FESTIVAL INC</td>
<td>72-1046163</td>
<td>501 (c) 3</td>
<td>230,000</td>
<td>FMV</td>
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<td>8</td>
<td>FREMICHAN WAY CONSERVANCY</td>
<td>22-2849309</td>
<td>501 (c) 3</td>
<td>321,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>FRIEQUENT FLIES PRODUCTIONS INC</td>
<td>84-1136452</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>FRESH AIR FUND</td>
<td>13-1656653</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>11</td>
<td>FRESH LIFE CHURCH</td>
<td>71-1024772</td>
<td>501 (c) 3</td>
<td>13,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>FRESH LIFELINES FOR YOUTH INC</td>
<td>52-2234595</td>
<td>501 (c) 3</td>
<td>25,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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</thead>
<tbody>
<tr>
<td>FRESH MINISTRIES INC 1131 N LAURA ST JACKSONVILLE, FL 32206 59-2967898 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRESHFARM MARKETS INC 655 NEW YORK AVE NW FL O WASHINGTON, DC 200 35-2169859 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRESHWATER LAND TRUST 2308 1ST AVE N BIRMINGHAM, AL 35203 72-1387424 501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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<tr>
<td>FRESNO PACIFIC UNIVERSITY 1717 S CHESTNUT AVE FRESNO, CA 93702 94-1021164 501 (C) 3</td>
<td>56,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>FRESNO STATE BULLDOG FOUNDATION 2771 E SHAW AVE FRESNO, CA 93710 94-6080933 501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRICK ART &amp; HISTORICAL CENTER INC 7227 REYNOLDS ST PITTSBURGH, PA 15208 25-1596285 501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIEDENS COMMUNITY MINISTRIES INC 1220 W VLIET ST MILWAUKEE, WI 53205 39-1587037 501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIEDREICHS ATAXIA RESEARCH ALLIANCE PARA PO BOX 1537 SPRINGFIELD, VA 22151 52-2122720 501 (C) 3</td>
<td>110,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDLY ARABIC CHURCH 1292 WHICKER RD KERNERSVILLE, NC 27284 56-1921518 501 (C) 3</td>
<td>17,610.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDLY GARDEN CLUB OF TRAVERSE CITY PO BOX 726 TRAVERSE CITY, MI 49685 32-0117174 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDS &amp; FOUNDATION OF THE SAN FRANCISCO P THE SAN FRANCISCO MAIN LIBRARY 710 SAN FRAN 94-6085452 501 (C) 3</td>
<td>47,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDS ACADEMY DUCK POND RD LOCUST VALLEY, NY 11560 11-1633485 501 (C) 3</td>
<td>56,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

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(g) Description of non-cash assistance
(h) Purpose of grant or assistance

(1) FRIENDS AND FAMILY MEAL

   1104 IRVING ST NW WASHINGTON, DC 20010
   84-5174818 501 (C) 3 32,000. FMV N/A FOR RECIPIENT’S EXEM

(2) FRIENDS AND FAMILY OF PS 11

   320 W 21ST ST NEW YORK, NY 10011
   26-4153754 501 (C) 3 10,000. FMV N/A FOR RECIPIENT’S EXEM

(3) FRIENDS ASSOCIATION FOR CARE & PROTECTION

   113 W CHESTNUT ST WEST CHESTER, PA 19380
   23-1381006 501 (C) 3 18,000. FMV N/A FOR RECIPIENT’S EXEM

(4) FRIENDS CENTER FOR CHILDREN INC

   225 E GRAND AVE NEW HAVEN, CT 6513
   57-1203361 501 (C) 3 17,300. FMV N/A FOR RECIPIENT’S EXEM

(5) FRIENDS CENTRAL SCHOOL CORPORATION

   1101 CITY AVE WYNNEWOOD, PA 19096
   23-1352366 501 (C) 3 15,500. FMV N/A FOR RECIPIENT’S EXEM

(6) FRIENDS COUNCIL ON EDUCATION

   1507 CHERRY STREET PHILADELPHIA, PA 19102
   23-1352147 501 (C) 3 164,025. FMV N/A FOR RECIPIENT’S EXEM

(7) FRIENDS FOR YOUTH INC

   1741 BROADWAY ST REDWOOD CITY, CA 94063
   94-2961034 501 (C) 3 8,000. FMV N/A FOR RECIPIENT’S EXEM

(8) FRIENDS GENERAL CONFERENCE

   1216 ARCH ST STE 2B PHILADELPHIA, PA 19107
   23-1352148 501 (C) 3 71,000. FMV N/A FOR RECIPIENT’S EXEM

(9) FRIENDS IN ACTION INTERNATIONAL INC

   PO BOX 323 ELIZABETHTOWN, PA 17022
   77-0296087 501 (C) 3 13,150. FMV N/A FOR RECIPIENT’S EXEM

(10) FRIENDS IN SONOMA HELPING

    PO BOX 507 SONOMA, CA 95476
    23-7441289 501 (C) 3 7,000. FMV N/A FOR RECIPIENT’S EXEM

(11) FRIENDS OF ACADIA

    PO BOX 45 BAR HARBOR, ME 4609
    01-0425071 501 (C) 3 28,025. FMV N/A FOR RECIPIENT’S EXEM

(12) FRIENDS OF AHIMSA FOUNDATION INC

    2000 P ST NW STE 708 WASHINGTON, DC 20036
    84-3621513 501 (C) 3 10,500. FMV N/A FOR RECIPIENT’S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | | | | | | |</p>
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<thead>
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<tr>
<td>1</td>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
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<td>1</td>
<td>FRIENDS OF AT FIMA ANIMAL CARE CENTER</td>
<td>47-4160770</td>
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<td>2</td>
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<td>86-1702655</td>
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<td>3</td>
<td>FRIENDS OF BREAVAL ACAD. ARTS &amp; DESI</td>
<td>13-2952614</td>
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<td>10,540.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FRIENDS OF BOCA GRANDE COMMUNITY CENTER INC</td>
<td>59-2818741</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>FRIENDS OF BOSTON HOMELESS INC</td>
<td>12-2866770</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>FRIENDS OF BREAKTHROUGH SCHOOLS</td>
<td>22-2966770</td>
<td>501 (C) 3</td>
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<td>FRIENDS OF BRISTOL VALLEY PLAYHOUSE FOUNDAT</td>
<td>22-2540875</td>
<td>501 (C) 3</td>
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<td>8</td>
<td>FRIENDS OF BUCKLAND RECREATION INC</td>
<td>84-3630628</td>
<td>501 (C) 3</td>
<td>300,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>FRIENDS OF CAMP ANOKIJKI INC</td>
<td>20-3211411</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>FRIENDS OF CAMP GALLAGHER</td>
<td>47-3468099</td>
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<td>11</td>
<td>FRIENDS OF CAPE HENLOPEN STATE PARK</td>
<td>31-1655033</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>FRIENDS OF CARITAS CUBANA CORPORATION</td>
<td>20-3023256</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>FRIENDS OF CAROLINE HOSPICE OF BEAUFORT INC</td>
<td>57-0725866</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF CASCO BAY</td>
<td>00-0452620</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF CATHOLIC UNIVERSITY IN CHILE INC</td>
<td>52-1656495</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF CHABAD OF BOCA RATON INC</td>
<td>65-0591634</td>
<td>501 (C) 3</td>
<td>15,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF CHAMBER MUSIC</td>
<td>23-7124366</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF CHIKUMBUS INC</td>
<td>27-0414264</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF COBBOSSEE WATERSHED DISTRICT</td>
<td>01-0545442</td>
<td>501 (C) 3</td>
<td>10,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF COMPASS INC</td>
<td>26-3724642</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF DONGYU CATSAL LING INC</td>
<td>80-0198191</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF DXE</td>
<td>46-4318107</td>
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<td>11,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF ETHIOPIAN JEWS INC</td>
<td>06-1512486</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF EXCEL ACADEMY INC</td>
<td>30-0211613</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
</table>
| FRIENDS OF FACES  
12030 SUNRISE VALLEY DR STE 450 RESTON, VA | 20-8944024 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FACING HISTORY SCHOOL INC  
1838 MOHEGAN AVE BRONX, NY 10460 | 82-0933916 | 501 (C) 3 | 13,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FATHER JUDGE HIGH SCHOOL INC  
3301 SOLLY AVE PHILADELPHIA, PA 19136 | 75-3053213 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FATHER VINCENT PROJECT  
407 WEATHERBY AVE SWEDESBORO, NJ 8085 | 41-2212048 | 501 (C) 3 | 28,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF PETTES COLLEGE INC  
PO BOX 961209 BOSTON, MA 2196 | 04-3410156 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FISHER HOUSE CHARLESTON INC  
7 KING ST CHARLESTON, SC 29401 | 46-2521401 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FLAGSTAFFS FUTURE  
PO BOX 23462 FLAGSTAFF, AZ 86002 | 02-0690212 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FOUNDATION ACADEMY INC  
363 W STATE ST TRENTON, NJ 8618 | 27-2091277 | 501 (C) 3 | 27,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FSR RESEARCH  
217 19TH PL KIRKLAND, WA 98033 | 86-1108537 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF FT LIBERTE  
PO BOX 8282 SOUTH CHARLESTON, WV 25303 | 55-0727588 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF GOOD SHEPHERD SCHOOL-INWOOD NEW  
954 LEXINGTON AVE # 252 NEW YORK, NY 10021 | 45-1645817 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| FRIENDS OF GUALALA RIVER  
PO BOX 1543 GUALALA, CA 95445 | 83-4233346 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>(1)</td>
<td>FRIENDS OF HARLEY CLARKE</td>
<td>83-2913873</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(2)</td>
<td>FRIENDS OF HEC INC</td>
<td>20-8152139</td>
<td>501 (C) 3</td>
<td>42,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>FRIENDS OF HILDENE INC</td>
<td>51-0201160</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>FRIENDS OF HOG ISLAND</td>
<td>27-3608853</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>FRIENDS OF HONDO CANYON</td>
<td>83-2707017</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>FRIENDS OF HONG KONG CHARITIES INC</td>
<td>30-0136665</td>
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<td>11,500.</td>
<td>FMV</td>
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<td>(7)</td>
<td>FRIENDS OF HOPFELL VALLEY OPEN SPACE</td>
<td>22-2810757</td>
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<td>11,500.</td>
<td>FMV</td>
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<td>(8)</td>
<td>FRIENDS OF IDAHO PUBLIC TELEVISION INC</td>
<td>82-0400218</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(9)</td>
<td>FRIENDS OF INDEX ON CENSORSHIP</td>
<td>82-4919712</td>
<td>501 (C) 3</td>
<td>9,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>FRIENDS OF INDIA CHRISTIAN MINISTRIES INC</td>
<td>20-0813055</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>FRIENDS OF INDIAN HILL CEMETERY INC</td>
<td>47-5003411</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>FRIENDS OF INDUS HOSPITAL INC</td>
<td>20-4751162</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**General Information on Grants and Assistance**

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<td>1</td>
<td>FRIENDS OF ISRAEL DISABLED VETERANS INC BEI</td>
<td>13-3392711</td>
<td>501 (C) 3</td>
<td>14,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>FRIENDS OF JACKSONVILLE PARKS</td>
<td>47-4190032</td>
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<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>FRIENDS OF JCC KRAKOW INC</td>
<td>46-5714234</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>FRIENDS OF KATAHIN WOODS AND WATERS</td>
<td>81-5102906</td>
<td>501 (C) 3</td>
<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>FRIENDS OF KEXP</td>
<td>91-2061474</td>
<td>501 (C) 3</td>
<td>9,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6</td>
<td>FRIENDS OF KWMU INC</td>
<td>20-2460152</td>
<td>501 (C) 3</td>
<td>41,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>FRIENDS OF LANCASTER FOR RESPONSIBLE DEVELOP</td>
<td>84-3017721</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>FRIENDS OF LANE</td>
<td>47-0971734</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>FRIENDS OF LARCHE INC</td>
<td>20-3091620</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>FRIENDS OF LEVITT SHELL SIOUX FALLS INC</td>
<td>61-1699910</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>FRIENDS OF LINCOLN</td>
<td>93-1188791</td>
<td>501 (C) 3</td>
<td>8,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>FRIENDS OF LOPEX ISLAND POOL</td>
<td>26-2079787</td>
<td>501 (C) 3</td>
<td>500,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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</tr>
</thead>
<tbody>
<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>(1) FRIENDS OF MAGNOLIA MOUND PLANTATION INC</td>
<td>72-1430320</td>
</tr>
<tr>
<td>(2) FRIENDS OF MAKOSHIKA</td>
<td>81-0464014</td>
</tr>
<tr>
<td>(3) FRIENDS OF MASSEY UNIVERSITY</td>
<td>27-1424188</td>
</tr>
<tr>
<td>(4) FRIENDS OF MATENNA INC</td>
<td>27-2898086</td>
</tr>
<tr>
<td>(5) FRIENDS OF MAYANOT INSTITUTE INC</td>
<td>228 PARK AVE S # 96553 NEW YORK, NY 10003</td>
</tr>
<tr>
<td>(6) FRIENDS OF MCGILL UNIVERSITY INC</td>
<td>44 PRYER TER NEW ROCHELLE, NY 10804</td>
</tr>
<tr>
<td>(7) FRIENDS OF MEVAKSHEI DERECH INC</td>
<td>2536 OXFORD CIR ANN ARBOR, MI 48103</td>
</tr>
<tr>
<td>(8) FRIENDS OF MICHLALAH YERUSHALAYIM</td>
<td>9 SUTTON RD MONSEY, NY 10952</td>
</tr>
<tr>
<td>(9) FRIENDS OF MONTESSORI FOUNDATION</td>
<td>5 W 22ND ST NEW YORK, NY 10010</td>
</tr>
<tr>
<td>(10) FRIENDS OF MOSDOT GOOR INC</td>
<td>3611 14TH AVE STE 217 BROOKLYN, NY 11218</td>
</tr>
<tr>
<td>(11) FRIENDS OF MOUNT AUBURN CEMETERY</td>
<td>580 MOUNT AUBURN ST CAMBRIDGE, MA 2138</td>
</tr>
<tr>
<td>(12) FRIENDS OF MVYRADIO INC</td>
<td>PO BOX 1148 VINEYARD HAVEN, MA 2568</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FRIENDS OF NACHUSA GRASSLANDS 8772 S LONDON RD FRANKLIN GROVE, IL 61031 26-3303031 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>2. FRIENDS OF NEW CANAAN BASKETBALL INC 145 KIMBERLY PL NEW CANAAN, CT 6840 86-2318362 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>3. FRIENDS OF NEWPORT BEACH ANIMAL SHELTER PO BOX 10791 NEWPORT BEACH, CA 92658 82-1830129 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. FRIENDS OF GONG ROAD PO BOX 581308 MINNEAPOLIS, MN 55458 20-4690846 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>5. FRIENDS OF PBS WISCONSIN INC 821 UNIVERSITY AVE # 1076 MADISON, WI 53706 23-7300462 501 (C) 3 29,800. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. FRIENDS OF PEB INC PO BOX 72453 TORNADO, PA 19372 26-2624529 501 (C) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7. FRIENDS OF PUBLIC RADIO ARIZONA 2323 N 14TH ST TEMPE, AZ 85281 01-0579687 501 (C) 3 16,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>8. FRIENDS OF RAISING THE VILLAGE INCORPORATED 511 AVENUE OF THE AMERICAS NEW YORK, NY 100 81-2578460 501 (C) 3 460,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. FRIENDS OF RAMANAS GARDEN INC PO BOX 33312 WASHINGTON, DC 20033 25-1921398 501 (C) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. FRIENDS OF REACH OUTS HIV-AIDS AFRICA INITI BVCHRISTENSEN 1701 FOREST LANE MCLEAN, VA 2 14-1997532 501 (C) 3 18,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>11. FRIENDS OF REFUGEES INC PO BOX 548 CLARKSTON, GA 30021 20-1989492 501 (C) 3 14,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>12. FRIENDS OF RODEPH SHLOM SCHOOL INC 7 N 83RD ST NEW YORK, NY 10024 20-3099468 501 (C) 3 99,200. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ] No [x]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRIENDS OF RYE NATURE CENTER INC PO BOX 274 RYE, NY 10580</td>
<td>13-6176032</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF SAINT THOMAS OF VILLANOVA SCHOOL PO BOX 2627 PALATINE, IL 60078</td>
<td>45-5311784</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF SARNELLI HOUSE UA 800 UNIVERSITY BAY DR STE 200 MADISON, WI 5 20-4519502</td>
<td>501 (C) 3</td>
<td></td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>FRIENDS OF SCHMEECKLE RESEVE INC 2419 N POINT DR STEVENS POINT, WI 54481</td>
<td>46-4511784</td>
<td>501 (C) 3</td>
<td>25,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF SCHOOL IN THE SQUARE INC 120 WADSWORTH AVE NEW YORK, NY 10033</td>
<td>47-1825735</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF SEVA MANDIR INC 200 METROPLEX DR STE 300 EDISON, NJ 8817</td>
<td>27-0672296</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FRIENDS OF SHEBA MEDICAL CENTER INC 6505 WILSHIRE BLVD STE 615 LOS ANGELES, CA</td>
<td>23-7076117</td>
<td>501 (C) 3</td>
<td>241,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FRIENDS OF SHELDON JACKSON MUSEUM 104 COLLEGE DR SITKA, AK 99835</td>
<td>92-0112427</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF SOUTH DAKOTA PUBLIC BROADCASTING 601 N PHILLIPS AVE STE 100 SIOUX FALLS, SD</td>
<td>23-7310698</td>
<td>501 (C) 3</td>
<td>62,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF ST MALACHY INCORPORATED 1012 W THOMPSON ST PHILADELPHIA, PA 19122</td>
<td>23-2837410</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF ST STEPHENS YOUTH PROGRAMS INC 31 LENOX ST BOSTON, MA 2118</td>
<td>26-1749602</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF SUESNOS 308 E LANCASTER AVE STE 325 WYNNEWOOD, PA 83-1995328</td>
<td>501 (C) 3</td>
<td></td>
<td>54,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| FRIENDS OF SULLIVAN FARM INC  
140 PARK LANE RD NEW MILFORD, CT 6776  
27-2036844 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF SWITCHPOINTE INC  
948 N 1300 W SAINT GEORGE, UT 84770  
78-0740457 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF TAVARUA  
360 ALDER LN SUELLTON, CA 93427  
81-2426739 501 (C) 3 2,736,236. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE 1980 MIRACLE ON ICE HOCKEY T  
2244 LAFAYETTE ST NORTH BELLMORE, NY 11710  
83-1247014 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE AMERICAN UNIVERSITY OF AFGH  
1901 PENNSYLVANIA AVE NW STE 207 WASHINGTON  
26-3639601 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE ANACORTES COMMUNITY FOREST L  
PO BOX 2213 ANACORTES, WA 98221  
91-1430220 501 (C) 3 8,891. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE ARAVA INSTITUTE LTD  
1320 CENTRE ST STE 206 NEWTON CENTER, MA 24  
11-3485736 501 (C) 3 22,400. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE AUSTRALIAN BUSH HERITAGE FUN  
PO BOX 2013 PORT BRAGG, CA 95437  
27-0671965 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE BAHAMAS HUMANE SOCIETY INC  
301 W ATLANTIC AVE STE 0-5 DELRAY BEACH, FL  
84-1923420 501 (C) 3 214,000. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE BLOOMFIELD TOWNSHIP PUBLIC L  
1099 LONE FINE RD BLOOMFIELD HILLS, MI 4830  
38-1642932 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE BOUNDARY WATERS WILDERNESS  
2550 UNIVERSITY AVE W STE 180S SAINT PAUL,  
36-3414821 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |
| FRIENDS OF THE CHEYENNE BOTANIC GARDEN  
710 S LIONS PARK DR CHEYENNE, WY 82001  
83-0302260 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM | | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

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Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
## Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [x]  
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

### 1 (a) Name and address of organization or government

| (1) FRIENDS OF THE CHICAGO RIVER | 411 S WELLS ST STE 800 CHICAGO, IL 60607 | 36-3559764 | 501 (C) 3 | 13,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) FRIENDS OF THE CHILDREN-BOSTON INC | HIBERNIAN HALL - SUITE 100 ROXBURY, MA 2119 | 20-1581289 | 501 (C) 3 | 43,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) FRIENDS OF THE CHILDREN-PORTLAND | 44 NE MORRIS ST PORTLAND, OR 97212 | 93-1098105 | 501 (C) 3 | 96,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) FRIENDS OF THE COLUMBIA GORGE | 333 SW 5TH AVE STE 300 PORTLAND, OR 97204 | 93-0782467 | 501 (C) 3 | 45,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) FRIENDS OF THE CONGO | 1629 K ST NW WASHINGTON, DC 20006 | 37-1516674 | 501 (C) 3 | 23,319 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) FRIENDS OF THE CORNELL LAB OF ORNITHOLOGY I | CO P H BARTELS 52 DRUID LANE RIVERSIDE, CT | 46-1979945 | 501 (C) 3 | 14,900 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) FRIENDS OF THE CUMBRES & TOLTEC | 4421 MCLEOD RD NE STE F ALBUQUERQUE, NM 87108 | 95-0363487 | 501 (C) 3 | 6,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) FRIENDS OF THE EARTH | 1101 15TH ST NW 11TH FLOOR WASHINGTON, DC 2 20005 | 23-7420660 | 501 (C) 3 | 18,800 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) FRIENDS OF THE EMMET ONEAL LIBRARY INC | 50 OAK ST MOUNTAIN BRK, AL 35213 | 23-7264536 | 501 (C) 3 | 25,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) FRIENDS OF THE FAIRFIELD LIBRARY | PO BOX 183 FAIRFIELD, MT 59436 | 84-1406854 | 501 (C) 3 | 8,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) FRIENDS OF THE FARM AT HILLTOP INC | PO BOX 372 SUFFIELD, CT 06781 | 81-0595608 | 501 (C) 3 | 7,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) FRIENDS OF THE FOREST PRESERVES | 411 S WELLS ST STE 300 CHICAGO, IL 60607 | 36-4519273 | 501 (C) 3 | 24,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

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

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

🏠 Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I-General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☒ No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II-Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) FRIENDS OF THE FORUM</td>
<td>20-8943695</td>
<td>501 (C) 3</td>
<td>26,800.</td>
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<tr>
<td>35 2ND PL BROOKLYN, NY 11231</td>
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<td>(2) FRIENDS OF THE FROMM INSTITUTE FOR LIFE-LON</td>
<td>94-2427266</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>80 E SIR FRANCIS DRAKE BLVD # 4 LARKSPUR, C</td>
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<td>(3) FRIENDS OF THE GARDEN THEATER</td>
<td>82-2531689</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV N/A</td>
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<tr>
<td>PO BOX 341 FRANKFORT, MI 49635</td>
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<td>FMV N/A</td>
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<td>8739 PIERPOINT CV GERMANTOWN, TN 38139</td>
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<td>(5) FRIENDS OF THE GREAT COMMISSION</td>
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<td>10,500.</td>
<td>FMV N/A</td>
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<tr>
<td>310 S 14TH ST COLORADO SPRINGS, CO 80904</td>
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<td>(6) FRIENDS OF THE GREEN CRESCENT</td>
<td>47-4037028</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>107 SLOAN ST STE 3 CLEMSON, SC 29631</td>
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<td>(7) FRIENDS OF THE HENNEPIN COUNTY LIBRARY</td>
<td>36-3579536</td>
<td>501 (C) 3</td>
<td>21,750.</td>
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<tr>
<td>300 NICOLLET MALL MINNEAPOLIS, MN 55401</td>
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<td>(8) FRIENDS OF THE HIGH LINE INC</td>
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<td>6,500.</td>
<td>FMV N/A</td>
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<tr>
<td>820 WASHINGTON ST NEW YORK, NY 10014</td>
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<td>(9) FRIENDS OF THE HIGHWOOD PUBLIC LIBRARY</td>
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<tr>
<td>102 HIGHWOOD AVE HIGHWOOD, IL 60040</td>
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<tr>
<td>DLA 1251 AVOF THE AMERICAS NEW YORK, NY 100</td>
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<td>(11) FRIENDS OF THE INYQ</td>
<td>13-3156445</td>
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<td>1,435,418.</td>
<td>FMV N/A</td>
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<tr>
<td>60 E 42ND ST NEW YORK, NY 10165</td>
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3. Enter total number of other organizations listed in the line 1 table.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) FRIENDS OF THE ITHACA YOUTH BUREAU</td>
<td>PO BOX 4198 ITHACA, NY 14852</td>
<td>27-1480389</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(2) FRIENDS OF THE JERUSALEM INSTITUTE FOR STRA</td>
<td>11152 OAK RIDGE DR S JACKSONVILLE, FL 32225</td>
<td>84-3820476</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(3) FRIENDS OF THE KATY TRAIL INC</td>
<td>3102 MAPLE AVE STE 230 DALLAS, TX 75201</td>
<td>75-2708139</td>
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<td>41,500.</td>
<td>FMV</td>
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<tr>
<td>(4) FRIENDS OF THE LEVITT PAVILION - ARLINGTON</td>
<td>505 E BORDER ST ARLINGTON, TX 76010</td>
<td>26-0849441</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5) FRIENDS OF THE LYRIC INC</td>
<td>59 SW FLAGLER AVE STUART, FL 34994</td>
<td>65-0016846</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(6) FRIENDS OF THE MATTAPOISETT BICYCLE &amp; RECRE</td>
<td>PO BOX 1336 MATTAPOISETT, MA 2739</td>
<td>04-3525654</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<tr>
<td>(7) FRIENDS OF THE MISSIONARY SISTERS OF THE HO</td>
<td>36 E MAIN ST NORRISTOWN, PA 19401</td>
<td>46-5013843</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) FRIENDS OF THE MUSEES DES ARTS DECORATIFS</td>
<td>MARGARET BULT 40 E 78TH ST NO 12G NEW YORK,</td>
<td>13-4080242</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) FRIENDS OF THE NEWTON FREE LIBRARY</td>
<td>330 HOMER ST NEWTON CENTER, MA 2459</td>
<td>04-2691337</td>
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<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>(10) FRIENDS OF THE NORTH FORK OF THE SHENANDOAH</td>
<td>305 W COURT ST WOODSTOCK, VA 22664</td>
<td>54-1457869</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(11) FRIENDS OF THE NORWALK RIVER VALLEY TRAIL</td>
<td>PO BOX 174 GEORGETOWN, CT 6829</td>
<td>45-1496672</td>
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<td>53,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) FRIENDS OF THE OSA</td>
<td>1012 14TH ST NW STE 625 WASHINGTON, DC 2000</td>
<td>81-0621147</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) FRIENDS OF THE PALO ALTO CHILDREN'S THEATRE</td>
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<td>100,000</td>
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<td>N/A</td>
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<tr>
<td>1305 MIDDLEFIELD RD PALO ALTO, CA 94301</td>
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<td>(2) FRIENDS OF THE PARKS</td>
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<td>67 E MADISON ST CHICAGO, IL 60603</td>
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<td>(3) FRIENDS OF THE PUBLIC GARDEN INC</td>
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<td>64,500</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>69 BEACON ST BOSTON, MA 2108</td>
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<tr>
<td>(4) FRIENDS OF THE ROBERT CROWN CENTER</td>
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<td>FMV</td>
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<td>PO BOX 8064 EVANSTON, IL 60204</td>
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<td>6685 CUTTALOSSA RD NEW HOPE, PA 18938</td>
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<td>(6) FRIENDS OF THE SAN FELIPE DE AUSTIN STATE H</td>
<td>76-0265549</td>
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<td>10,000</td>
<td>FMV</td>
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<td>(7) FRIENDS OF THE SANTA CRUZ PUBLIC LIBRARIES</td>
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<td>FMV</td>
<td>N/A</td>
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<td>PO BOX 8472 SANTA CRUZ, CA 95061</td>
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<td>(8) FRIENDS OF THE SHELLFORD LIBRARY</td>
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<tr>
<td>10612 LAGUNA CANYON RD LAGUNA BEACH, CA 926</td>
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<td>FMV</td>
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<td>316 N MONTGOMERY AVE SHEFFIELD, AL 35660</td>
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<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>870 KOOTENAI CUT OFF RD PONDERAY, ID 83852</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(12) FRIENDS OF THE SPARTA FREE LIBRARY</td>
<td>45-5397422</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 71 SPARTA, WI 54656</td>
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(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FRIENDS OF THE UNIVERSITY OF SUSSEX</td>
<td>155 E 44TH ST STE 34 NEW YORK, NY 10017</td>
<td>31-1506862</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2. FRIENDS OF THE UNIVERSITY OF WATERLOO FOUND</td>
<td>3815 N DICKERSON ST ARLINGTON, VA 22207</td>
<td>54-1746974</td>
<td>501 (C) 3</td>
<td>8,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. FRIENDS OF THE URBAN FORESTS</td>
<td>1007 GENERAL KENNEDY AVE STE 1 SAN FRANCISCO</td>
<td>94-2699528</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4. FRIENDS OF THE VAIL PUBLIC LIBRARY</td>
<td>292 W MEADOW DR VAIL, CO 81657</td>
<td>75-4025046</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FRIENDS OF THE VIRGIN ISLANDS NATIONAL PARK</td>
<td>PO BOX 811 ST JOHN, WI 831</td>
<td>66-0463113</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. FRIENDS OF THE VOLCANO SCHOOL OF ARTS &amp; SCI</td>
<td>PO BOX 845 VOLCANO, HI 96785</td>
<td>99-0347476</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. FRIENDS OF THE WAKE COUNTY GUARDIAN AD LITE</td>
<td>PO BOX 4941 CARY, NC 27519</td>
<td>58-1930264</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. FRIENDS OF THE WARNER PARKS INC</td>
<td>50 VAUGHN RD NASHVILLE, TN 37221</td>
<td>62-1333658</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9. FRIENDS OF THE WHITEHALL PUBLIC LIBRARY</td>
<td>100 BOROUGH PARK DR PITTSBURGH, PA 15236</td>
<td>25-1799069</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10. FRIENDS OF THE MISSAHECKON INC</td>
<td>40 W EVERGREEN AVENUE SUITE 10 PHILADELPHIA</td>
<td>23-6251649</td>
<td>501 (C) 3</td>
<td>64,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. FRIENDS OF THE WORLD FOOD PROGRAM INC</td>
<td>1725 I ST NW STE 510 WASHINGTON, DC 20006</td>
<td>13-3843435</td>
<td>501 (C) 3</td>
<td>490,272.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. FRIENDS OF TREES</td>
<td>3117 NE M L KING BLVD PORTLAND, OR 97212</td>
<td>93-0999999</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th></th>
<th>Name and address of organization or government</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
|1. | FRIENDS OF UFM INC  
   CO RLM 7900 WESTPARK DRIVE NO T MCLEAN, VA | 27-2852264 | 501 (C) 3 | 1,451,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
|2. | FRIENDS OF UNFPA INC  
   605 3RD AVE FL 4 NEW YORK, NY 10158 | 13-3996346 | 501 (C) 3 | 26,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|3. | FRIENDS OF UNITED HATZALAH INC  
   INC 300 EAST 51ST STREET STE 8G NEW YORK, N | 11-3533002 | 501 (C) 3 | 344,280. | FMV | N/A | FOR RECIPIENT'S EXEM |
|4. | FRIENDS OF UPPER DUBLIN PUBLIC LIBRARY  
   805 LOCH ALSH AVE FORT WASHINGTON, PA 19034 | 23-2557467 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
|5. | FRIENDS OF UTAH AVALANCHE FORCAST CENTER  
   PO BOX 521353 SALT LAKE CITY, UT 84152 | 87-0481453 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
|6. | FRIENDS OF VISITATION  
   300 E LEHIGH AVE PHILADELPHIA, PA 19125 | 26-1399527 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|7. | FRIENDS OF WEHR NATURE CENTER INC  
   9701 W COLLEGE AVE FRANKLIN, WI 53132 | 39-1416519 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|8. | FRIENDS OF WELLESLEY METCO INC  
   PO BOX 81163 WELLESLEY HILLS, MA 2481 | 26-0866367 | 501 (C) 3 | 13,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|9. | FRIENDS OF WESTCHESTER TORAH ACADEMY INC  
   150 STRATTON RD WHITE PLAINS NY 10606-3821 | 46-1157563 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|10. | FRIENDS OF WHIDBEE STATE PARKS  
   PO BOX 1561 COUPEVILLE, WA 98239 | 82-1056710 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
|11. | FRIENDS OF WILSON PRESCHOOL  
   1840 BENTON ST SANTA CLARA, CA 95050 | 46-0839392 | 501 (C) 3 | 6,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
|12. | FRIENDS OF WINNATASKA INC  
   PO BOX 59514 BIRMINGHAM, AL 35259 | 63-1195492 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ✗ Yes  ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>FRIENDS OF WLNR INC</td>
<td>23-7365001</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FRIENDS OF YAD SARAH INC</td>
<td>13-3106175</td>
<td>501 (C) 3</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>FRIENDS PEACE TEAMS INC</td>
<td>42-1590796</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FRIENDS PUBLISHING CORPORATION</td>
<td>23-1465406</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>FRIENDS SCHOOL OF BALTIMORE INC</td>
<td>52-0591602</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>FRIENDS SEMINARY</td>
<td>13-5562223</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>FRIENDS WORLD COM FOR CONSULTATION SECTION</td>
<td>23-1353362</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>FRIENDSHIP BRIDGE</td>
<td>84-1141078</td>
<td>501 (C) 3</td>
<td>24,447.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>FRIENDSHIP CIRCLE</td>
<td>38-3613944</td>
<td>501 (C) 3</td>
<td>47,700.</td>
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<td>10</td>
<td>FRIENDSHIP CIRCLE INC</td>
<td>26-0817688</td>
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<td>28,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>FRIENDSHIP MINISTRIES FOUNDATION</td>
<td>23-2832200</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
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<td>12</td>
<td>FRIENDSHIP PLACE</td>
<td>52-1925494</td>
<td>501 (C) 3</td>
<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>FRIENDSHIP TRAYS INC</td>
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<td>2401 DISTRIBUTION ST STE A CHARLOTTE, NC 28</td>
<td>56-1201496</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>FRISCH SCHOOL</td>
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<td>120 W CENTURY RD PARAMUS, NJ 7652</td>
<td>22-1937461</td>
<td>501 (C) 3</td>
<td>59,900.</td>
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<td>FROM THE HEART PRODUCTIONS INC</td>
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<td>1455 MANDALAY BEACH RD OXNARD, CA 93025</td>
<td>95-4445418</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>FRONT LINE COVID 19 CRITICAL CARE ALLIANCE</td>
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<td>6006 N HIGHLANDS AVE MADISON, WI 53705</td>
<td>85-2270146</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>FRONT ROYAL WOMENS RESOURCE CENTER INC</td>
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<td>68-0406744</td>
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<td>FRONTERA FARMER FOUNDATION</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>445 N CLARK ST CHICAGO, IL 60654</td>
<td>33-1055393</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>FRONTIER DEVELOPMENT FOUNDATION</td>
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<td>03-0435293</td>
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<td>48,000.</td>
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<tr>
<td>FRONTIER MISSION FELLOWSHIP</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>1605 E ELIZABETH ST PASADENA, CA 91104</td>
<td>95-3095682</td>
<td>501 (C) 3</td>
<td>13,350.</td>
<td>FMV</td>
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<tr>
<td>FRONTIER SCHOOL OF THE BIBLE</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>83-6007943</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>FRONTIERS OF FLIGHT MUSEUM INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6911 LEMMON AVE DALLAS, TX 75209</td>
<td>75-2244531</td>
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<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>FRONTIERS USA</td>
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<td>95-3731505</td>
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<td>172,310.</td>
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<tr>
<td>FRONTLINE DADS</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4440 N REESE ST PHILADELPHIA, PA 19140</td>
<td>45-4700802</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1. FRONTLINE MISSIONS INTERNATIONAL INC 208 ARTILLERY RD TAYLORS, SC 29687 57-0963411</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2. FROST VALLEY YMCA 2000 FROST VALLEY RD CLARYVILLE, NY 12725</td>
<td>22-1625176</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. FROSTBURG STATE UNIVERSITY FOUNDATION 101 BRADDOCK RD FROSTBURG, MD 21532</td>
<td>22-7120883</td>
<td>501 (C) 3</td>
<td>11,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4. FSHD SOCIETY 75 N MAIN ST # 107 RANDOLPH, MA 2368</td>
<td>52-1762747</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. FUGEES FAMILY INC 1933 E DUBLIN GRANVILLE RD COLUMBUS, OH 432</td>
<td>20-5771149</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6. FULCRUM FOUNDATION 710 9TH AVE SEATTLE, WA 98104</td>
<td>16-1616262</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7. FULL GOSPEL OF CHRIST FELLOWSHIP INC 11307 WIMBERLY DR HENRICO, VA 23238</td>
<td>54-1786799</td>
<td>501 (C) 3</td>
<td>39,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8. FULL PLATES FULL POTENTIAL 188 STATE ST STE 407 PORTLAND, ME 4101</td>
<td>82-2032867</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. FULL TURN MINISTRIES INC 298 REYNOLDS RD STE 100 HIRAM, GA 30141</td>
<td>51-0431909</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. FULLER CENTER FOR HOUSING INC 701 S MARTIN LUTHER KING JR BLVD AMERICUS,</td>
<td>52-2455871</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. FULLER THEOLOGICAL SEMINARY 135 N OAKLAND AVE PASADENA, CA 91101</td>
<td>95-1699394</td>
<td>501 (C) 3</td>
<td>86,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. FULLNESS IN CHRIST FELLOWSHIP 945 TARAVAL ST SAN FRANCISCO, CA 94116</td>
<td>26-4561144</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I - General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**  
   - **Yes**  
   - **No**  

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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</tr>
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<tbody>
<tr>
<td>1</td>
<td>FULSHEAR OUTREACH AND DEVELOPMENT CORPORATION</td>
<td>46-3023417</td>
<td>501(c)(3)</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FULTON THEATRE COMPANY</td>
<td>23-1631733</td>
<td>501(c)(3)</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>FUN TIME EARLY CHILDHOOD ACADEMY INC</td>
<td>59-1039978</td>
<td>501(c)(3)</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>FUND FOR ARMENIAN RELIEF INC</td>
<td>13-3706646</td>
<td>501(c)(3)</td>
<td>34,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>FUND FOR CATHOLIC SCHOOLS INC</td>
<td>26-2290458</td>
<td>501(c)(3)</td>
<td>1,005,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>FUND FOR PUBLIC SCHOOLS INC</td>
<td>11-2656137</td>
<td>501(c)(3)</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>FUND FOR RECONCILIATION &amp; DEVELOPMENT</td>
<td>23-2569447</td>
<td>501(c)(3)</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>FUND FOR SANTA BARBARA INC</td>
<td>77-0070742</td>
<td>501(c)(3)</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>FUND FOR THE CITY OF NEW YORK INC</td>
<td>13-2612524</td>
<td>501(c)(3)</td>
<td>253,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>FUND FOR THE GUGGENHEIM FELLOWSHIPS</td>
<td>85-1338112</td>
<td>501(c)(3)</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>FUNDACRISTO MISSIONS INTERNATIONAL</td>
<td>82-2480203</td>
<td>501(c)(3)</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>FURMAN UNIVERSITY</td>
<td>57-0314395</td>
<td>501(c)(3)</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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### SCHEDULE I
**(Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FUSE EDUCATION FUND</td>
<td>1402 3RD AVE STE 406 SEATTLE, WA 98101</td>
<td>87-0800705</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>FUSION-FRIENDS UNITED TO SHELTER THE INDIGENOUS</td>
<td>PO BOX 23934 FEDERAL WAY, WA 98093</td>
<td>01-0814641</td>
<td>501 (C) 3</td>
<td>11,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>FUTURE S INC</td>
<td>135 ATLANTIC ST STAMFORD, CT 6901</td>
<td>46-2986201</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>FUTURE HARVEST INC</td>
<td>1114 SHAWAN RD STE 1 COCKEYSVILLE, MD 21030</td>
<td>52-2132982</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>FUTURE HEIGHTS</td>
<td>2843 WASHINGTON BLVD STE 105 CLEVELAND HEIG</td>
<td>34-1948426</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>FUTURE OF FREEDOM FOUNDATION INC</td>
<td>11350 RANDOM HILLS RD FAIRFAX, VA 22030</td>
<td>74-2541375</td>
<td>501 (C) 3</td>
<td>162,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>FUTURES AND OPTIONS INC</td>
<td>120 BROADWAY STE 1018 NEW YORK, NY 10271</td>
<td>13-4060658</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>FUTURES IN EDUCATION</td>
<td>243 PROSPECT PARK W BROOKLYN, NY 11215</td>
<td>20-5496382</td>
<td>501 (C) 3</td>
<td>8,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>FUTURES WITHOUT VIOLENCE</td>
<td>100 MONTGOMERY ST SAN FRANCISCO, CA 94129</td>
<td>94-3110973</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>FWBUS EDUCATION FUND</td>
<td>PO BOX 34506 WASHINGTON, DC 20043</td>
<td>82-0962378</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>FYMS INC</td>
<td>107 E 22ND ST HOUSTON, TX 77008</td>
<td>26-0020294</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>G &amp; P ROTARY CHARITIES INC</td>
<td>5880 LAKE OCONEE PWY GREENSBORO, GA 30642</td>
<td>45-3029132</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152
## SCHEDULE I (Form 990)

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### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>G E MINISTRIES INC</td>
<td>712 N BROAD ST PHILADELPHIA, PA 19130</td>
<td>81-0746983</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>G FRED DIBONA JR MEMORIAL FOUNDATION</td>
<td>1245 LAFAYETTE RD CLADWYN, PA 19035</td>
<td>23-2867497</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>G G MINISTRIES INC</td>
<td>11501 PLANTSIDE DR STE 14 LOUISVILLE, KY 40</td>
<td>36-4092893</td>
<td>501 (C) 3</td>
<td>11,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4.</td>
<td>GABLESTAGE INC</td>
<td>1200 ANASTASIA AVE STE 230 CORAL GABLES, FL</td>
<td>59-1972774</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>GADEN KHACHOE SHING MONASTERY INC</td>
<td>2150 E DOLAN RD BLOOMINGTON, IN 47408</td>
<td>80-0317031</td>
<td>501 (C) 3</td>
<td>23,320.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>GADS HILL CENTER</td>
<td>1919 W CULLERTON ST CHICAGO, IL 60608</td>
<td>36-2167082</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>GAGE ACADEMY OF ART</td>
<td>1501 10TH AVE E SEATTLE, WA 98102</td>
<td>91-1992593</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>GAINING GROUND INC</td>
<td>PO BOX 374 CONCORD, MA 1742</td>
<td>04-3083976</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9.</td>
<td>GAIT THERAPEUTIC RIDING CENTER</td>
<td>PO BOX 69 MILFORD, PA 18337</td>
<td>22-3444872</td>
<td>501 (C) 3</td>
<td>125,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>GALA CHORUSES INC</td>
<td>PO BOX 99998 PITTSBURGH, PA 15233</td>
<td>74-2586442</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11.</td>
<td>GALA INC GRUPO DE ARTISTAS LATINOAMERICANO</td>
<td>PO BOX 43209 WASHINGTON, DC 20010</td>
<td>52-1064097</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12.</td>
<td>GALAPAGOS CONSERVANCY INC</td>
<td>11150 FAIRFAX BLVD STE 408 FAIRFAX, VA 2203</td>
<td>13-3281486</td>
<td>501 (C) 3</td>
<td>33,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(1) GALERIA STUDIO 24 PO BOX 720162 SAN FRANCISCO, CA 94172</td>
<td>94-2495604</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) GALILEE CENTER 66-101 HAMMOND ROAD MECCA, CA 92254</td>
<td>27-3133601</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) GALLERY NORTH INC 50 N COUNTRY RD SETAUKET, NY 11733</td>
<td>11-2368016</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) GALLOWAY SCHOOL INC 215 CHASTAIN PARK AVE NW ATLANTA, GA 30342</td>
<td>58-1052217</td>
<td>501 (C) 3</td>
<td>5,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) GAMALIEL OF CALIFORNIA PO BOX 503 GRATON, CA 95444</td>
<td>45-2369887</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) GAN ISRAEL FLORIDA INC 7495 PARK LANE RD LAKE WORTH, FL 33449</td>
<td>47-3967124</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) GANN ACADEMY THE NEW JEWISH HIGH SCHOOL OF 333 FOREST ST WALTHAM, MA 2452</td>
<td>06-3286969</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) GANNA WALSKA LOTUSLAND 695 ASHLEY RD SANTA BARBARA, CA 93108</td>
<td>23-7082550</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) GANCES FAMILY FOUNDATION 1901 S 9TH ST PHILADELPHIA, PA 19148</td>
<td>45-3555133</td>
<td>501 (C) 3</td>
<td>40,000.</td>
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<tr>
<td>(10) GARDEN CITY COMMUNITY CHURCH 245 STEWART AVE GARDEN CITY, NY 11530</td>
<td>11-1666236</td>
<td>501 (C) 3</td>
<td>8,000.</td>
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<tr>
<td>(11) GARDEN CONSERVANCY INC PO BOX 608 GARRISON, NY 10524</td>
<td>13-3570145</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
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<tr>
<td>(12) GARDEN OF CEDAR 529 BOGART PL APT 305 SCRANTON, PA 18503</td>
<td>84-3212076</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>GARDENA VALLEY BAPTIST CHURCH 1630 W 158TH ST GARDENA, CA 90247</td>
<td>95-2046030</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GARDENS PRESBYTERIAN CHURCH 4677 HOLLAND RD PALM BEACH GARDENS, FL 33418</td>
<td>65-0605191</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>GARDENVIEW HORTICULTURAL PARK INC 16711 PEARL RD STRONGSVILLE, OH 44136</td>
<td>34-0901963</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GARDENWORKSFORKIDS 10966 BRYANT ST YUCAIPA, CA 92399</td>
<td>46-2428869</td>
<td>501 (C) 3</td>
<td>16,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GARDERE COMMUNITY CHRISTIAN SCHOOL 6638 MILLSTONE AVE BATON ROUGE, LA 70808</td>
<td>61-1614861</td>
<td>501 (C) 3</td>
<td>22,500</td>
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<tr>
<td>GARFIELD HERITAGE SOCIETY INC 3NO16 GARFIELD RD BOX 403 LAFOX, IL 60147</td>
<td>36-2943960</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>GARFIELD PARK CONSERVATORY ALLIANCE 300 N CENTRAL PARK AVE CHICAGO, IL 60624</td>
<td>36-4200490</td>
<td>501 (C) 3</td>
<td>6,525</td>
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<tr>
<td>GARLAND SYMPHONY ORCHESTRA ASSOCIATION INC 1919 S SHILTON RD STE 101 GARLAND, TX 75042</td>
<td>75-1592443</td>
<td>501 (C) 3</td>
<td>120,000</td>
<td>FMV</td>
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<tr>
<td>GARRETT EVANGELICAL THEOLOGICAL SEMINARY 2121 SHERIDAN RD EVANSTON, IL 60201</td>
<td>36-2167085</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>GARRISON FOREST SCHOOL INC 300 GARFIELD FOREST RD OWINGS MILLS, MD 211</td>
<td>52-0591516</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
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<tr>
<td>GARY SINISE FOUNDATION 21700 OXNARD ST WOODLAND HILLS, CA 91367</td>
<td>80-0587086</td>
<td>501 (C) 3</td>
<td>213,250</td>
<td>FMV</td>
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<tr>
<td>GARZA COUNTY HISTORICAL MUSEUM 119 N AVENUE N POST, TX 79356</td>
<td>75-1373297</td>
<td>501 (C) 3</td>
<td>13,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1. GASPARILLA ISLAND CONSERVATION AND IMPROVEM</td>
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<td>PO BOX 446 BOCA GRANDE, FL 33921</td>
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<td>2. GASTON COMMUNITY FOUNDATION</td>
<td>58-1340834</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 123 GASTONIA, NC 28053</td>
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<td>3. GATE CITY CHRISTIAN CHURCH</td>
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<td>202 W. SIPHON RD. CHUBBUCK, ID 83202</td>
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<td>4. GATES OF ZION INC</td>
<td>81-3125165</td>
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<td>FMV</td>
<td>N/A</td>
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<td>500 FRANK W BURR BLVD STE 47 TEANECK, NJ 76</td>
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<td>5. GATES PHILANTHROPY PARTNERS</td>
<td>47-3290897</td>
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<tr>
<td>PO BOX 23350 SEATTLE, WA 98102</td>
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<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>9555 COUNTY ROAD 9 FINDLAY, OH 45840</td>
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<td>8. GATEWAY CHURCH OF EAU CLAIRE INC</td>
<td>39-1486135</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3445 GATEWAY DR EAU CLAIRE, WI 54701</td>
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<td>9. GATEWAY COMMUNITY CHURCH</td>
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<tr>
<td>42350 TALL CEDARS PKWY CHANTILLY, VA 20152</td>
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<td>10. GATEWAY FOR CANCER RESEARCH INC</td>
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<td>FMV</td>
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<td>500 REMINGTON RD SCHAUMBURG, IL 60173</td>
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<td>11. GATEWAY FOUNDATION INC</td>
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<tr>
<td>55 E JACKSON BLVD STE 1500 CHICAGO, IL 6060</td>
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<td>12. GATEWAY PET GUARDIANS</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>725 N 15TH ST EAST SAINT LOUIS, IL 62205</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>GATEWAY PUBLIC SCHOOLS 1430 SCOTT ST SAN FRANCISCO, CA 94115</td>
<td>94-3278357</td>
<td>501 (c) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>GATEWAY REGION YOUNG MENS CHRISTIAN ASSOCIA</td>
<td>43-0653616</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>3</td>
<td>GATEWAY SCHOOL OF NEW YORK</td>
<td>13-2572597</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>GATEWAYS ORGANIZATION INC</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>5</td>
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<td>GATHER HOUSTON</td>
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<td>FMV</td>
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<td>GATHERING OF WEST CHESTER</td>
<td>20-3707328</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
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<td>47-1335811</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>501 (c) 3</td>
<td>100,000.</td>
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<td>11</td>
<td>GATHERING WATERS INC</td>
<td>39-1805090</td>
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<td>FMV</td>
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<td>12</td>
<td>GATOR WILDERNESS CAMP SCHOOL INC</td>
<td>65-0704638</td>
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<td>5,469.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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**Part II**

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) GAY MENS HEALTH CRISIS INC</td>
<td>13-3130146</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>307 W 38TH ST FNT 7 NEW YORK, NY 10018</td>
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<tr>
<td>(2) GAYLORD UNITED CHURCH OF CHRIST</td>
<td>41-0885859</td>
<td>501 (C) 3</td>
<td>15,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 385 GAYLORD, MN 55334</td>
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<td>(4) GAZETTE CHARITIES</td>
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<td>(5) GBOWEE PEACE FOUNDATION AFRICA-USA</td>
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<td>(6) GBS CIDP FOUNDATION INTERNATIONAL</td>
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<td>375 E ELM ST STE 101 CONSHOHOCKEN, PA 19428</td>
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<td>(11) GEesta RAMAYAN GROUP OF GREATER ST LOUIS</td>
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<td>(12) GEnder health CENTER</td>
<td>26-3839452</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>GENERAL CONFERENCE OF THE CHURCH OF GOD -SE</td>
<td>54-1041300</td>
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<td>30,000.</td>
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<td>GENERAL COUNCIL ON FINANCE &amp; ADMINS OF THE</td>
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<tr>
<td>GENERAL SECRETARIAT OF THE FRANCISCAN MISSI</td>
<td>39-1396579</td>
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<td>12,100.</td>
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<tr>
<td>GENERAL THEO SEMINARY OF THE PROST EPISCOPA</td>
<td>13-5563022</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>GENERATION - YOU EMPLOYED INC</td>
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<td>750,000.</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................................................... ✔ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) GENERATION CITIZEN INC</td>
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<td>110 WALL ST FL 5 NEW YORK, NY 10005</td>
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<td>(2) GENERATION HOPE</td>
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<td>415 MICHIGAN AVENUE NE STE 430 WASHINGTON,</td>
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<td>(3) GENERATION LIFE</td>
<td>20-0288693</td>
<td>501 (C) 3</td>
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<td>(4) GENERATION NEXT INC</td>
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<td>17,880.</td>
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<td>215 VETERANS BLVD BRANSON, MO 65616</td>
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<td>(5) GENERATIONS CHURCH OF PLEASANT HILL</td>
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<td>24,700.</td>
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<tr>
<td>3474 BUSKIRK AVE STE A PLEASANT HILL, CA 94</td>
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<td>(6) GENERATIONS WITH PRIDE</td>
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<td>10,000.</td>
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<td>N/A</td>
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<td>(8) GENEROSITY NEW YORK INC</td>
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<td>(9) GENESSE LAND TRUST INC</td>
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<td>23-7104179</td>
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<td>40,500.</td>
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<td>1 COLLEGE CIRCLE GENESSEO, NY 14454</td>
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<td>(11) GENESIS BLOCK FOUNDATION INC</td>
<td>85-2618849</td>
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<td>75,000.</td>
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<td>(12) GENESIS HEALTH SERVICES FOUNDATION</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................................................................

3. Enter total number of other organizations listed in the line 1 table ................................................................................................................

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...  
   - Yes ☒  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>33-0938302</td>
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<td>2</td>
<td>GENESIS UNITED METHODIST CHURCH</td>
<td>56-1575135</td>
<td>501 (C) 3</td>
<td>106,160.</td>
<td>FMV</td>
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<td>GENESIS WATERS</td>
<td>83-0698492</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>GENEVA CENTER OF CONCERN INC</td>
<td>22-2224711</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>7</td>
<td>GENEVA READS INC</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>9</td>
<td>GENTLE GIANTS DRAFT HORSE RESCUE SOCIETY LT</td>
<td>59-3982764</td>
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<td>10</td>
<td>GEORGE C MARSHALL RESEARCH FOUNDATION</td>
<td>54-6052427</td>
<td>501 (C) 3</td>
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<td>GEORGE EASTMAN MUSEUM</td>
<td>16-0743991</td>
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<td>12</td>
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<td>33-1070696</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
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<td>94-3255845</td>
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<td>59-2162597</td>
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<td>6</td>
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<tr>
<td>7</td>
<td>GEORGE W. HOYERHAUSER PACIFIC RIM BONSAI COLL</td>
<td>61-1727426</td>
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<td>8</td>
<td>GEORGETOWN CARING PLACE</td>
<td>74-2386902</td>
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<tr>
<td>9</td>
<td>GEORGETOWN DAY SCHOOL INC</td>
<td>53-0204701</td>
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<td>10</td>
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<tr>
<td>11</td>
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<td>12</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>GEORGETOWN PRESBYTERIAN CHURCH - GEORGETOWN</td>
<td>57-0648722</td>
<td>501 (C) 3</td>
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<tr>
<td>4</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
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<td>N/A</td>
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<td>8</td>
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<td>9</td>
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<td>12</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>GEORGIA TRUST FOR HISTORIC PRESERVATION INC</td>
<td>23-7357226</td>
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<td>3</td>
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<td>2</td>
<td>GEORGIE BADIEL FOUNDATION INC</td>
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<td>3</td>
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<td>25,000.</td>
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<td>4</td>
<td>GERMANTOWN AVENUE CRISIS MINISTRY</td>
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<td>GERSHMAN Y</td>
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<td>11,000.</td>
<td>FMV</td>
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<td>59-1651492</td>
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<td>26-4644018</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<td>85-2700002</td>
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<td>GETHSEMANE LUTHERAN CHURCH</td>
<td>31-0745246</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>GETTYSBURG COLLEGE</td>
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<td>FMV</td>
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<tr>
<td>GETTYSBURG HOSPITAL FOUNDATION</td>
<td>23-2251358</td>
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<td>FMV</td>
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<td>GEYServille Volunteer Firefighters Assoc</td>
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<td>68-0404917</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..........................  
3. Enter total number of other organizations listed in the line 1 table ..........................................................  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**SCHEDULE I**
(Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
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<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation</td>
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<tr>
<td>---</td>
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<td>(6)</td>
<td>GIFT OF ADOPTION FUND INC</td>
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<td>13,500</td>
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<tr>
<td>(7)</td>
<td>GIFT OF DIGNITY INC</td>
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<td>501 (C) 3</td>
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<td>(8)</td>
<td>GIFT OF LIFE FOUNDATION</td>
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<td>501 (C) 3</td>
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<td>(9)</td>
<td>GIG HARBOR PENINSULA FISH</td>
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<td>19,000</td>
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<td>(10)</td>
<td>GIGIS PLAYHOUSE INC</td>
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<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>(11)</td>
<td>GILBERT ALBERT COMMUNITY CENTER INC</td>
<td>30-0430263</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
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<td>(12)</td>
<td>GILCHRIST HOSPICE CARE INC</td>
<td>52-1851251</td>
<td>501 (C) 3</td>
<td>19,000</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  
   -  

3. Enter total number of other organizations listed in the line 1 table  
   -  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) GILDS CLUB CHICAGO 537 N WELLS ST CHICAGO, IL 60654</td>
<td>36-4115144</td>
<td>501 (C) 3</td>
<td>12,025.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) GILDS CLUB GRAND RAPIDS 1806 BRIDGE ST NW GRAND RAPIDS, MI 49504</td>
<td>38-3367525</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) GILDS CLUB KENTUCKIANA 2440 GRINSTEAD DR LOUISVILLE, KY 40204</td>
<td>20-1635170</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) GILDS CLUB WESTCHESTER INC 80 MAPLE AVE WHITE PLAINS, NY 10601</td>
<td>13-3939823</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) GILDER LEHRMAN INSTITUTE OF AMERICAN HISTOR 49 WEST 45TH STREET SIXTH FLOOR NEW YORK, N</td>
<td>13-3795391</td>
<td>501 (C) 3</td>
<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) GILMAN SCHOOL INC 5407 ROLAND AVE BALTIMORE, MD 21210</td>
<td>52-0591604</td>
<td>501 (C) 3</td>
<td>104,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) GINDI MAIMONIDES ACADEMY 8511 BEVERLY PL LOS ANGELES, CA 90048</td>
<td>95-3214146</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) GINTER PARK PRESBYTERIAN CHURCH ENDOWMENT F 3601 SEMINARY AVE RICHMOND, VA 23227</td>
<td>51-0189622</td>
<td>501 (C) 3</td>
<td>77,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) GIRAFFE CONSERVATION FOUNDATION USA 17 S MAGNOLIA AVE ORLANDO, FL 32801</td>
<td>81-2749463</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
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<tr>
<td>(10) GIRAFFE LAUGH INC 1191 W GRAND AVE BOISE, ID 83702</td>
<td>82-0481812</td>
<td>501 (C) 3</td>
<td>40,500.</td>
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<tr>
<td>(11) GIRSFORD HEALTH CLINIC 131 LINDBLAD AVENUE GIRSFORD, AK 99587</td>
<td>90-0622646</td>
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<td>150,000.</td>
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<td>(12) GIRL RISING 28 VERANDAH PL BROOKLYN, NY 11201</td>
<td>82-2862554</td>
<td>501 (C) 3</td>
<td>12,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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   - No

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>(1) GIRL SCOUTS HEART OF NEW JERSEY INC</td>
<td>22-1638950</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) GIRL SCOUTS OF EASTERN PENNSYLVANIA INC</td>
<td>23-1352309</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) GIRL SCOUTS OF THE UNITED STATES OF AMERICA</td>
<td>13-1624016</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) GIRL SCOUTS SAN DIEGO-IMPERIAL COUNCIL INC</td>
<td>95-1644585</td>
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<tr>
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<td>25,000.</td>
<td>FMV</td>
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<td>(6) GIRLS INCORPORATED</td>
<td>13-1915124</td>
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<td>(7) GIRLS INCORPORATED OF ALAMEDA COUNTY</td>
<td>94-1558073</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) GIRLS INCORPORATED OF SAN ANTONIO</td>
<td>20-5468038</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) GIRLS INCORPORATED OF SARASOTA COUNTY</td>
<td>23-7363275</td>
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<tr>
<td>(10) GIRLS LEADERSHIP INSTITUTE INC</td>
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<td>501 (C) 3</td>
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<td>(12) GIRLS ON THE RUN INTERNATIONAL</td>
<td>84-3865261</td>
<td>501 (C) 3</td>
<td>5,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>GIRLS ON THE RUN OF SAN DIEGO</td>
<td>20-3588183</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>GIRLS PREPARATORIAL SCHOOL INC</td>
<td>62-0475682</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>GIRLS WHO CODE INC</td>
<td>28 W 23RD STREET 4TH FLOOR NEW YORK, NY 100</td>
<td>30-0728021</td>
<td>501 (C) 3</td>
<td>124,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>GIRLS WHO INVEST INC</td>
<td>1400 W ANDERSON LN AUSTIN, TX 78757</td>
<td>31-1595414</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>GIRLSTART</td>
<td>1515 ROBERTS AVE CLOVIS, CA 93611</td>
<td>84-4883289</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>GIVAT HAVIVA EDUCATIONAL FOUNDATION INC</td>
<td>500 FASHION AVE # 8 NEW YORK, NY 10018</td>
<td>13-2584337</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>GIVE CULTURE FOUNDATION FOR IMPACT</td>
<td>11040 BOLLINGER CANYON RD SAN RAMON, CA 945</td>
<td>02-0570370</td>
<td>501 (C) 3</td>
<td>84,327.</td>
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<td>8</td>
<td>GIVE KIDS THE WORLD INC</td>
<td>210 S BASS RD KISSIMMEE, FL 34746</td>
<td>59-2654440</td>
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<td>14,600.</td>
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<td>6,500.</td>
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<td>11</td>
<td>GIVEDIRECTLY INC</td>
<td>27-1661997</td>
<td>501 (C) 3</td>
<td>6,279,820.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - Yes ☑️ ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1)</td>
<td>GIVEN INSTITUTE INC</td>
<td>82-4360581</td>
<td>501 (C) 3</td>
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<td>(2)</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>GIVING BACK FUND INC</td>
<td>04-3367888</td>
<td>501 (C) 3</td>
<td>40,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>GIVING IS LOVING INC</td>
<td>46-3976261</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
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<td>11,500</td>
<td>FMV</td>
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<tr>
<td>(6)</td>
<td>GIVING TREE GLOBAL INC</td>
<td>46-4633078</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>GLAAD INC</td>
<td>13-3384027</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>GLACIER NATIONAL PARK ASSOCIATES INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(9)</td>
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<td>(10)</td>
<td>GLADNEY CENTER FOR ADOPTION</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>GLASSROOTS INC</td>
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<td>(12)</td>
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<td>26-1456470</td>
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<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) GLASTONBURY PUBLIC SCHOOLS</td>
<td>628 HEBRON AVENUE PO BOX 191 GLASTONBURY, C</td>
<td>06-6001616</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) GLAUCOMA RESEARCH FOUNDATION</td>
<td>251 POST ST STE 600 SAN FRANCISCO, CA 94108</td>
<td>94-2495035</td>
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<td>21,750.</td>
<td>FMV</td>
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<tr>
<td>(3) GLBTQ LEGAL ADVOCATES &amp; DEFENDERS INC</td>
<td>18 TREMONT ST STE 950 BOSTON, MA 2108</td>
<td>04-2660498</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) GLEANERS COMMUNITY FOOD BANK INC</td>
<td>2131 BEAUFIT ST DETROIT, MI 48207</td>
<td>38-2156255</td>
<td>501 (C) 3</td>
<td>74,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) GLEANERS FOOD BANK OF INDIANA INC</td>
<td>3737 WALDENERE AVE INDIANAPOLIS, IN 46241</td>
<td>35-1483868</td>
<td>501 (C) 3</td>
<td>135,352.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) GLEN ELYN COMMUNITY RESOURCE CENTER</td>
<td>346 TAFT AVE STE 205 GLEN ELYN, IL 60137</td>
<td>20-0628057</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) GLEN ELYN FOOD PANTRY INC</td>
<td>493 FOREST AVE GLEN ELYN, IL 60137</td>
<td>36-3423123</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) GLEN HAVEN AREA VOLUNTEER FIRE DEPARTMENT</td>
<td>PO BOX 53 GLEN HAVEN, CO 80532</td>
<td>84-1013850</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) GLEN HELEN ASSOCIATION</td>
<td>405 CORRY ST YELLOW SPRINGS, OH 45387</td>
<td>31-0963193</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) GLEN MAR UNITED METHODIST CHURCH</td>
<td>4701 NEM CUT RD ELICOTT CITY, MD 21043</td>
<td>52-0899896</td>
<td>501 (C) 3</td>
<td>13,300.</td>
<td>FMV</td>
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<td>(11) GLENCOE UNION CHURCH</td>
<td>263 PARK AVE GLENCOE, IL 60022</td>
<td>36-2182029</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
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<td>(12) GLENDALE CHRISTIAN CHURCH SCHOOLS INC</td>
<td>3146 S GOLDEN AVE SPRINGFIELD, MO 65807</td>
<td>26-2534327</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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<thead>
<tr>
<th>(1)</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1)</td>
<td>GLENVIEW COMMUNITY CHURCH 1000 ELM STREET  GLENVIEW, IL 60025</td>
<td>36-2229575</td>
<td>501(C) 3</td>
<td>9,200.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>GLENWOOD ACADEMY 500 W 187TH ST GLENWOOD, IL 60025</td>
<td>36-2167087</td>
<td>501(C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>GLENWOOD PARK TRUST PO BOX 447 MIDDLETOWN, VA 20118</td>
<td>54-0752959</td>
<td>501(C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>GLIMMERGLASS OPERA THEATRE INC THE GLIMMERGLASS FESTIVAL 7300 STATE HIGHWAY</td>
<td>16-1053970</td>
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<td>8,000.</td>
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<td>(5)</td>
<td>GLOBAL AIDS INTERFAITH ALLIANCE 2171 FRANCISCO BLVD E STE I SAN RAFAEL, CA</td>
<td>94-3364364</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>GLOBAL ALLIANCE FOR IMPROVED NUTRITION 1701 RHODE ISLAND AVE NW WASHINGTON, DC 200</td>
<td>98-0404435</td>
<td>501(C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>GLOBAL CAMPS AFRICA INC 700 12TH ST LYNCHBURG, VA 24504</td>
<td>91-2191939</td>
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<td>N/A</td>
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<td>(8)</td>
<td>GLOBAL CONNECTION INTERNATIONAL PO BOX 462 DALLAS, TX 80514</td>
<td>84-1537632</td>
<td>501(C) 3</td>
<td>134,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>GLOBAL CONSERVATION NETWORK 12101 JOHNNY CARE RIDGE RD SAINT PAUL, MN 5</td>
<td>41-1719362</td>
<td>501(C) 3</td>
<td>70,000.</td>
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<td>(10)</td>
<td>GLOBAL DOWN SYNDROME FOUNDATION 3239 E 2ND AVE DENVER, CO 80206</td>
<td>26-4431001</td>
<td>501(C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>GLOBAL FUND FOR WOMEN INC 800 MARKET ST FL 7 SAN FRANCISCO, CA 94102</td>
<td>77-0155782</td>
<td>501(C) 3</td>
<td>131,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(12)</td>
<td>GLOBAL GLIMPSE 490 LAKE PARK AVE UNIT 16039 OAKLAND, CA 94</td>
<td>26-0651273</td>
<td>501(C) 3</td>
<td>9,840.</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - X Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>GLOBAL HEALTH CORPS INC</td>
<td>80-0512336</td>
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<td>FMV</td>
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<td>2</td>
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<td>3</td>
<td>GLOBAL HEALTHCARE FOUNDATION INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
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<td>5</td>
<td>GLOBAL HUNGER PROJECT</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
<td>GLOBAL INDEPENDENT BAPTIST MISSIONS</td>
<td>48-1281943</td>
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<td>FMV</td>
<td>N/A</td>
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<td>N/A</td>
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<td>8</td>
<td>GLOBAL LIVINGSTON INSTITUTE</td>
<td>45-4683531</td>
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<td>FMV</td>
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<td>9</td>
<td>GLOBAL LYME ALLIANCE INC</td>
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<td>10</td>
<td>GLOBAL MEDIA OUTREACH</td>
<td>84-1720344</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>11</td>
<td>GLOBAL MEDICAL RELIEF FUND INC</td>
<td>13-3987722</td>
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<td>FMV</td>
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<td>12</td>
<td>GLOBAL MIDWIFE EDUCATION FOUNDATION</td>
<td>27-2924419</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..................................................  

3. Enter total number of other organizations listed in the line 1 table: ..................................................  

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
**SCHEDULE I**
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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---

**Part I**
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   ![Yes] Yes  ![No] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<td>3. GLOBAL NETWORK FOUNDATION INC</td>
<td>58-2069383</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>4. GLOBAL OUTREACH INTERNATIONAL INC</td>
<td>48-1256219</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5. GLOBAL PARTNERS FOR DEVELOPMENT</td>
<td>94-2537375</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6. GLOBAL PARTNERSHIPS</td>
<td>82-0574491</td>
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<td>7. GLOBAL PHILADELPHIA ASSOCIATION INC</td>
<td>27-2901461</td>
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<td>8. GLOBAL RESPONSE MANAGEMENT INC</td>
<td>81-5163032</td>
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<td>9. GLOBAL RIVER CHURCH</td>
<td>56-1746056</td>
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<td>10. GLOBAL SERVICE NETWORK INC</td>
<td>20-8686806</td>
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<td>FMV</td>
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<td>11. GLOBAL SERVICE OFFICE</td>
<td>95-4244940</td>
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<td>17,710.</td>
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<td>12. GLOBAL SMILE FOUNDATION</td>
<td>26-2668127</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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**Schedule I (Form 990) 2020**
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

**23-2888152**

## Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   □ Yes  
   □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 6507 PEORIA, AZ 85385</td>
<td></td>
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<td>(2) GLOBAL WILDLIFE CONSERVATION</td>
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<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
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<tr>
<td>PO BOX 129 AUSTIN, TX 78767</td>
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<td>(3) GLOBALGIVING FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>296,875</td>
<td>FMV</td>
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<tr>
<td>1 THOMAS CIR NW WASHINGTON, DC 20005</td>
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<td>(4) GLOBE AWARE</td>
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<td>FMV</td>
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<td>7232 FISHER RD DALLAS, TX 75214</td>
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<td>(5) GLOBE INTERNATIONAL MINISTRIES INC</td>
<td>23-7453583</td>
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<tr>
<td>PO BOX 3040 PENSACOLA, FL 32516</td>
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<td>(6) GLOBEKWORKS INTERNATIONAL INC</td>
<td>63-1235001</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 661435 BIRMINGHAM, AL 35266</td>
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<td>(7) GLORIA DEI CHURCH</td>
<td>23-1531261</td>
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<td>FMV</td>
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<td>570 WELSH ROAD HUNTINGDON VALLEY, PA 19006</td>
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<td>(8) GLORIA DEI LUTHERAN CHURCH</td>
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<td>(9) GLORIA DEI LUTHERAN CHURCH</td>
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<td>(10) GLORIA DEI LUTHERAN CHURCH OF SIOUX FALLS S</td>
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<td>(11) GLORY CHINESE BAPTIST CHURCH INC</td>
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<td>(12) GLORY OF CHRIST LUTHERAN CHURCH</td>
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</table>

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

- Enter total number of other organizations listed in the line 1 table.
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of noncash assistance</td>
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<td>3</td>
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<td>4</td>
<td>GLYNDEBOURNE AMERICA INC</td>
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<td>5</td>
<td>GLYWOOD CENTER INC</td>
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<td>6</td>
<td>GO INTERNATIONAL INC</td>
<td>61-6058541</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>7</td>
<td>GO PHILANTHROPIC CHARITABLE FUND</td>
<td>27-4939698</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>GOD CENTERED LIFE MINISTRIES</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>GOD IS FAITHFUL TEMPORARY SHELTER</td>
<td>26-1452370</td>
<td>501 (C) 3</td>
<td>58,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>GOD OF LIFE INTERNATIONAL MINISTRY</td>
<td>46-2916723</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>GODDARD COLLEGE CORPORATION</td>
<td>03-0179419</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>12</td>
<td>GODDARD RIVERSIDE COMMUNITY CENTER</td>
<td>13-1893908</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Schedule I**

(Form 990)

Section I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Section II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tbody>
<tr>
<td>GODS CHILD PROJECT</td>
<td>45-0422424</td>
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<tr>
<td>GODS EYES INC</td>
<td>20-5395804</td>
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<tr>
<td>GODS LOVE WE DELIVER INC</td>
<td>13-3366846</td>
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<tr>
<td>GODS PANTRY FOOD BANK INC</td>
<td>31-0979404</td>
</tr>
<tr>
<td>GODS PIT CREW INC</td>
<td>54-1974979</td>
</tr>
<tr>
<td>GODS WORLD PUBLICATIONS INC</td>
<td>56-0538016</td>
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<tr>
<td>GOFUNDME ORG</td>
<td>81-2279757</td>
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<tr>
<td>GOOGLE WORKS</td>
<td>41-2165262</td>
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<tr>
<td>GHAWKEYE FOUNDATION</td>
<td>47-1968703</td>
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<tr>
<td>GOLDA OCH ACADEMY INC</td>
<td>47-1968703</td>
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<tr>
<td>GOLDEN EMPIRE GLEANERS</td>
<td>77-0084637</td>
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<tr>
<td>GOLDEN GATE AUDUBON SOCIETY INC</td>
<td>94-6086896</td>
</tr>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>GOLDEN GATE NATIONAL PARKS CONSERVANCY 201 FORT MASON PL 3 SAN FRANCISCO, CA 94123</td>
<td>94-2781708</td>
<td>501 (c) 3</td>
<td>70,100.</td>
<td>FMV</td>
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<tr>
<td>GOLDEN HARVEST FOOD BANK INC 3310 COMMERCE DR AUGUSTA, GA 30909</td>
<td>58-1466516</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>GOLDEN HISTORICAL MUSEUMS 923 10TH ST GOLDEN, CO 80401</td>
<td>84-1473577</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>GOLDEN RESCUE SOUTH FLORIDA INC PO BOX 17084 FORT LAUDERDALE, FL 33318</td>
<td>68-0626628</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>GOLDEN RETRIEVER RESCUE OF ATLANTA PO BOX 7743 ATLANTA, GA 30357</td>
<td>58-2186090</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>GOLDEN SLIPPER CLUB CHARITIES 215 PRESIDENTIAL BLVD BALA CYNYDY, PA 19004</td>
<td>23-6430340</td>
<td>501 (c) 3</td>
<td>51,000.</td>
<td>FMV</td>
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<td>GOLDMAN SACHS PHILANTHROPY FUND 200 WEST ST FL 15 NEW YORK, NY 10282</td>
<td>31-1774905</td>
<td>501 (c) 3</td>
<td>55,020.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>GOLF FIGHTS CANCER INC 300 ARNOLD PALMER BLVD NORTON, MA 2766</td>
<td>34-1987772</td>
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<td>FMV</td>
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<tr>
<td>GONZAGA COLLEGE HIGH SCHOOL 19 I ST NW WASHINGTON, DC 20001</td>
<td>53-0204703</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
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<td>GONZAGA PREPARATORY SCHOOL FOUNDATION OF SP 1224 E EUCLID AVE SPOKANE, WA 99207</td>
<td>91-6072663</td>
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<td>FMV</td>
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<td>GOOCHLANDCARES INC 2999 RIVER RD W GOOCHLAND, VA 23063</td>
<td>54-1967650</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>GOOD COUNSEL INC 22 LINDEN AVE SPRING VALLEY, NY 10977</td>
<td>22-2831271</td>
<td>501 (c) 3</td>
<td>144,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>108 MCARTHUR CT YOUNGSVILLE, LA 70592</td>
<td>82-4718778</td>
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<td>15,000.</td>
<td>FMV</td>
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<td>GOOD FOOD INSTITUTE INC</td>
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<td>731,470.</td>
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<td>26-0335357</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>36-3107283</td>
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<td>GOOD PEOPLE FUND INC</td>
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<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .........................................................

3. Enter total number of other organizations listed in the line 1 table: .........................................................

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) GOOD SAMARITAN CATHOLIC CHURCH ELLIJAY INC</td>
<td>74-3178453</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) GOOD SAMARITAN FAMILY RESOURCE CENTER OF SA</td>
<td>94-3154078</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) GOOD SAMARITAN FOUNDATION</td>
<td>22-7017276</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) GOOD SAMARITAN HEALTH CENTER OF CBB INC</td>
<td>32-0045238</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) GOOD SAMARITAN HEALTH CLINIC OF CULLMAN INC</td>
<td>20-0149215</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) GOOD SAMARITAN MINISTRIES LTD</td>
<td>54-1371830</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) GOOD SAMARITAN SERVICES</td>
<td>23-3011817</td>
<td>501 (C) 3</td>
<td>92,250.</td>
<td>FMV</td>
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<td>(8) GOOD SHEPHERD FOOD BANK</td>
<td>22-2986809</td>
<td>501 (C) 3</td>
<td>86,450.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) GOOD SHEPHERD CATHOLIC SCHOOL</td>
<td>48-1202926</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>(10) GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>22-6048083</td>
<td>501 (C) 3</td>
<td>11,920.</td>
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<td>(11) GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>56-1543975</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>59-1227018</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................

3. Enter total number of other organizations listed in the line 1 table: .................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### 1. Name and address of organization or government

<table>
<thead>
<tr>
<th>#</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>23-7390015</td>
<td>501 (C) 3</td>
<td>15,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>39-1321376</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>36-2944356</td>
<td>501 (C) 3</td>
<td>7,202.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>95-2427129</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>91-1634373</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>GOOD SHEPHERD LUTHERAN CHURCH</td>
<td>59-6473811</td>
<td>501 (C) 3</td>
<td>7,579.</td>
<td>FMV</td>
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<td>7</td>
<td>GOOD SHEPHERD PRESBYTERIAN CHURCH</td>
<td>36-4003804</td>
<td>501 (C) 3</td>
<td>14,250.</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>GOOD SHEPHERD SERVICES</td>
<td>13-5598710</td>
<td>501 (C) 3</td>
<td>1,132,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>GOOD WORKS INC</td>
<td>23-2513834</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>GOOD360</td>
<td>54-1282616</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>GOODLETTSVILLE CHURCH OF THE NAZARENE</td>
<td>62-1099977</td>
<td>501 (C) 3</td>
<td>10,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>GOODMAN INSTITUTE FOR PUBLIC POLICY RESEARCH</td>
<td>27-1841798</td>
<td>501 (C) 3</td>
<td>56,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................................................
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) GOODRICH ISD</td>
<td>74-6001011</td>
<td>501 (C) 3</td>
<td>260,008.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 789 GOODRICH, TX 77335</td>
<td></td>
<td></td>
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<tr>
<td>(2) GOODSPEED OPERA HOUSE FOUNDATION INC</td>
<td>13-1969314</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6 MAIN ST EAST HADDAM, CT 6423</td>
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<td>(3) GOODWILL BAPTIST CHURCH</td>
<td>91-1249502</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>125 15TH AVE SEATTLE, WA 98122</td>
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<td>(4) GOODWILL FOUNDATION OF CENTRAL AND SOUTHERN</td>
<td>23-7148440</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1635 W MICHIGAN ST INDIANAPOLIS, IN 46222</td>
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<td>(5) GOODWILL INDUSTRIES INTERNATIONAL INC</td>
<td>53-0196517</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>15810 INDIANOLA DR DERWOOD, MD 20855</td>
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<tr>
<td>(6) GOODWILL INDUSTRIES OF N GEORGIA INC</td>
<td>58-0566193</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2201 LAWRENCEVILLE HWY SUITE 300 DECATUR, GA</td>
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<tr>
<td>(7) GOODWORD PARTNERSHIP</td>
<td>20-3545214</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4619 ARDEN AVE MINNEAPOLIS, MN 55424</td>
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<tr>
<td>(8) GORDON A RICH MEMORIAL FOUNDATION</td>
<td>03-0385929</td>
<td>501 (C) 3</td>
<td>78,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>170 GERMAR ROAD PLAINVIEW, NY 11803</td>
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<tr>
<td>(9) GORDON COLLEGE</td>
<td>04-2104258</td>
<td>501 (C) 3</td>
<td>112,001.</td>
<td>FMV</td>
<td>N/A</td>
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<td>255 GRAPEVINE RD WENHAM, MA 1984</td>
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<tr>
<td>(10) GORDON CONNELL THEOLOGICAL SEMINARY INC</td>
<td>04-2463847</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>130 ESSEX ST SOUTH HAMILTON, MA 1982</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>(11) GORDON RESEARCH CONFERENCES</td>
<td>26-0150662</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>512 LIBERTY LN WEST KINGSTON, RI 2892</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(12) GOSHEN COLLEGE INC</td>
<td>35-2158366</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>1700 S MAIN ST GOSHEN, IN 46526</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| GOSHEN INTERFAITH HOSPITALITY NETWORK INC  
PO BOX 137 GOSHEN, IN 46527 | 35-1969470 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL FOR ASIA INC  
1116 ST THOMAS WAY WILLS POINT, TX 75169 | 73-1099096 | 501 (C) 3 | 11,440. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL MINISTRIES INTERNATIONAL INC  
PO BOX 661 BELLEVILLE, IL 62222 | 43-1747185 | 501 (C) 3 | 21,800. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL MISSIONARY UNION  
10000 N OAK TFWY KANSAS CITY MO 64155-2010 | 44-0594428 | 501 (C) 3 | 20,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL PARTNERS MEDIA INC  
3070 WINDWARD PLZ ALPHARETTA, GA 30005 | 45-3788065 | 501 (C) 3 | 24,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL PROJECTS  
525 A ST NE WASHINGTON, DC 20002 | 47-1679070 | 501 (C) 3 | 41,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL RESCUE MISSION INC  
707 W MIRACLE MILE TUCSON, AZ 85705 | 86-6054088 | 501 (C) 3 | 14,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOSPEL VOLUNTEERS INC  
PO BOX 250 SPECULATOR, NY 12164 | 59-6001191 | 501 (C) 3 | 50,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GUNT QUESTIONS MINISTRIES  
6050 STETSON HILLS BLVD 254 COLORADO SPRING | 37-1422141 | 501 (C) 3 | 14,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOUCHER COLLEGE  
1021 DULANEY VALLEY RD TOMSON, MD 21204 | 52-0591613 | 501 (C) 3 | 72,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOUDEY ACADEMY  
39 CHURCH ST BETHEL, ME 4217 | 01-0211509 | 501 (C) 3 | 10,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| GOVERNMENT ACCOUNTABILITY INSTITUTE  
2900 NORTHMONT DR TALLAHASSEE, FL 32303 | 45-4681912 | 501 (C) 3 | 25,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | GOVERNMENT ACCOUNTABILITY PROJECT INC  
   1612 K ST NW WASHINGTON, DC 20006 | 52-1343924 | 501 (C) 3 | 18,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | GOVERNOR DUMMER ACADEMY  
   1 ELM ST BYFIELD, MA 1922 | 04-2103564 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | GRACE & PEACE ECONOMOCO  
   1411 CLEARWATER DR S ECONOMOCO, WI 53066 | 85-1122101 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | GRACE ACADEMY INC  
   277 MAIN ST HARTFORD, CT 6106 | 27-1673012 | 501 (C) 3 | 23,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | GRACE AND PEACE COMMUNITY CHURCH  
   1701 WASHINGTON AVE PHILADELPHIA, PA 19146 | 27-3063352 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | GRACE AND ST. STEPHEN'S EPISCOPAL CHURCH  
   601 N TEJON ST COLORADO SPRINGS, CO 80903 | 84-0405258 | 501 (C) 3 | 32,799. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | GRACE BAPTIST CHURCH  
   1300 CEITUS TER CAFE CORAL, FL 33991 | 59-2241594 | 501 (C) 3 | 7,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | GRACE BAPTIST CHURCH - SALADO, TX  
   PO BOX 736 SALADO, TX 76571 | 74-2370624 | 501 (C) 3 | 55,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | GRACE BAPTIST CHURCH INC  
   22833 COPPER HILL DR SANTA CLARITA, CA 9135 | 95-2754936 | 501 (C) 3 | 37,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | GRACE BAPTIST CHURCH OF BLUE BELL  
   PO BOX 122 BLUE BELL, PA 19422 | 23-1352400 | 501 (C) 3 | 24,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | GRACE BAPTIST CHURCH OF GLENDORA CALIFORNIA  
   1515 S GLENDORA AVE GLENDORA, CA 91740 | 95-6056420 | 501 (C) 3 | 70,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | GRACE BIBLE CHURCH  
   201 MICHIGAN AVE OWOSSO, HI 96826 | 38-1722901 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. GRACE BIBLE CHURCH</td>
<td>99-0169244</td>
<td>501 (C) 3</td>
<td>149,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2. GRACE BIBLE CHURCH EFCA</td>
<td>11-3659605</td>
<td>501 (C) 3</td>
<td>23,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3. GRACE BIBLE CHURCH OF ARROYO GRANDE</td>
<td>95-3458743</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4. GRACE BIBLE CHURCH OF BRYAN TEXAS</td>
<td>74-6072966</td>
<td>501 (C) 3</td>
<td>38,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. GRACE BIBLE CHURCH OF THE VERNIA</td>
<td>74-2799801</td>
<td>501 (C) 3</td>
<td>17,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. GRACE BIBLE CHURCH OF MONTICELLO</td>
<td>83-3906347</td>
<td>501 (C) 3</td>
<td>14,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. GRACE BIBLE CHURCH FREMONT, IL</td>
<td>36-3679135</td>
<td>501 (C) 3</td>
<td>11,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8. GRACE BIBLE PRESBYTERIAN CHURCH</td>
<td>31-1067505</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9. GRACE BRETHREN CHURCH OF LITITZ</td>
<td>23-1887649</td>
<td>501 (C) 3</td>
<td>6,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. GRACE BRETHREN CHURCH OF NORTON</td>
<td>23-7153982</td>
<td>501 (C) 3</td>
<td>22,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. GRACE CENTER FOUNDATION INC</td>
<td>20-4510552</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. GRACE CHAPEL INC</td>
<td>06-6130149</td>
<td>501 (C) 3</td>
<td>40,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
# SCHEDULE I

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization:

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number:

23-2888152

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑ No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>GRACE CHAPEL INC</td>
<td>3279 SOUTHWALL RD FRANKLIN, TN 37064</td>
<td>62-1572898 501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE CHRISTIAN ACADEMY OF LEIPERS FORK</td>
<td>3279 SOUTHWALL RD FRANKLIN, TN 37064</td>
<td>26-328392 501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHRISTIAN FELLOWSHIP</td>
<td>1250 FISHER AVE CORTLAND, NY 13045</td>
<td>16-1171340 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH</td>
<td>3626 STATE ROAD 31 RACINE, WI 53405</td>
<td>39-0829530 501 (C) 3</td>
<td>380,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>8595 EAST DAY ROAD BAINBRIDGE ISLAND, WA 98</td>
<td>27-3758292 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>19905 NE 101ST AVENUE BATTLE GROUND, WA 981</td>
<td>27-2243745 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>1350 OSS ST SAN LUIS OBLIPCO, CA 93401</td>
<td>95-6001503 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH OF EAST COUNTY</td>
<td>PO BOX 247 LA MESA, CA 91944</td>
<td>46-0755249 501 (C) 3</td>
<td>31,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>9301 EDEN FRAIRIE RD EDEN FRAIRIE, MN 55347</td>
<td>41-0870840 501 (C) 3</td>
<td>43,380.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>8500 W 159TH ST OVERLAND PARK, KS 66223</td>
<td>74-2807714 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>123 E WYOMING AVE PHILADELPHIA, PA 19120</td>
<td>26-4406600 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE CHURCH Disconnect</td>
<td>14 BOLTWOOD AVENUE AMHERST, MA 0102-2301</td>
<td>04-2104256 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:

3. Enter total number of other organizations listed in the line 1 table:

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRACE CHURCH ROSEVILLE INC</td>
<td>1310 COUNTY ROAD B2 W SAINT PAUL, MN 55113</td>
<td>36-3506866</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE CHURCH SAINT LOUIS</td>
<td>2695 CREVE COEUR MILL RD MARYLAND HEIGHTS,</td>
<td>43-1149290</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE CHURCH SCHOOL</td>
<td>86 4TH AVE NEW YORK, NY 10003</td>
<td>11-3752853</td>
<td>501 (C) 3</td>
<td>67,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE COMMUNITY BIBLE CHURCH</td>
<td>5121 FM 359 RD RICHMOND, TX 77406</td>
<td>76-0245400</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE COMMUNITY BIBLE CHURCH INC</td>
<td>1045 US HWY 41 BYPASS S VENICE ISL VENICE,</td>
<td>20-1672132</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>1 MALLARD LN WALPOLE, CA 91352</td>
<td>38-3829270</td>
<td>501 (C) 3</td>
<td>61,360.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>7041 OLD WAKE FOREST ROAD SUITE 107 RALEIGH</td>
<td>56-2189076</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>5504 E 146TH ST NOBLESVILLE, NC 27616</td>
<td>35-1837386</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>2707 DUBUQUE ST NE NORTH LIBERTY, IN 46062</td>
<td>42-1192395</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>13248 ROSCOE BLVD SUN VALLEY, IA 52317</td>
<td>95-6006357</td>
<td>501 (C) 3</td>
<td>74,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH</td>
<td>1320 AUBURN WAY S AUBURN, WA 98002</td>
<td>91-0730835</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH OF CYPRESS</td>
<td>5100 CERRITOS AVE CYPRESS, CA 90630</td>
<td>95-3664130</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRACE COMMUNITY CHURCH OF NEW CANAAN INC</td>
<td>06-1632417</td>
<td>501 (C) 3</td>
<td>38,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH OF RENO</td>
<td>88-0256896</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY CHURCH OF SC</td>
<td>57-1023259</td>
<td>501 (C) 3</td>
<td>75,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE COMMUNITY CHURCH OF SMITHVILLE</td>
<td>43-1888238</td>
<td>501 (C) 3</td>
<td>9,800.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE COMMUNITY CHURCH OF WILLOW STREET</td>
<td>23-2971442</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY COVENANT CHURCH OLYMPIA WA</td>
<td>91-1004474</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE COMMUNITY COVENANT CHURCH TUCSON AZ</td>
<td>74-2419663</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE COVENANT CHURCH INC</td>
<td>52-1273230</td>
<td>501 (C) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE COVENANT PRESBYTERIAN CHURCH</td>
<td>48-1000082</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRACE EPISCOPAL CHURCH</td>
<td>74-1885277</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE EPISCOPAL CHURCH AND DAY SCHOOL</td>
<td>52-0591598</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE EVANGELICAL FREE CHURCH OF FRIDLEY</td>
<td>41-1267803</td>
<td>501 (C) 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>GRACE EVANGELICAL FREE CHURCH OF LA MIRADA</td>
<td>12717 SANTA GERTRUDES AVE LA MIRADA, CA 906</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE EVANGELICAL LUTHERAN CHURCH</td>
<td>351 GREENWOOD ST HOP BOTTOM, PA 19468</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE EVANGELICAL LUTHERAN CHURCH</td>
<td>594 CHURCH ST FL 1 ROYERSFORD, PA 18824</td>
<td>501 (C) 3</td>
<td>14,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE EVANGELICAL LUTHERAN CHURCH - WAYNESS</td>
<td>500 SOUTH WAYNE AVENUE WAYNESBORO, VA 22980</td>
<td>501 (C) 3</td>
<td>17,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>GRACE FAMILY CHURCH INC</td>
<td>5101 VAN DYKE RD LUTZ, FL 33558</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE FARMS FOUNDATION</td>
<td>365 LUKE'S WOOD RD NEW CANAAN, CT 6840</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE FELLOWSHIP</td>
<td>1405 SEVEN VALLEYS RD YORK, PA 17408</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE FELLOWSHIP</td>
<td>860 SUMMERALL GATE ROAD ANNISTON, AL 36205</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>GRACE FELLOWSHIP CHAPEL</td>
<td>375 MAIN ST BEDMINSTER, NJ 7921</td>
<td>501 (C) 3</td>
<td>15,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRACE FELLOWSHIP CHURCH</td>
<td>1400 DOGWOOD RD SHELVILLE, GA 30078</td>
<td>501 (C) 3</td>
<td>23,667.</td>
<td>FMV</td>
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<td>GRACE FELLOWSHIP CHURCH</td>
<td>2314 S GREENWOOD DR JOHNSON CITY, TN 37604</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>GRACE FELLOWSHIP CHURCH</td>
<td>834 MONROE ST EUGENE, OR 97402</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
- Yes  
- No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>GRACE Fellowship Free Will Baptist Church</td>
<td>81-1075374</td>
<td>501 (C) 3</td>
<td>19,445.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>GRACE Fellowship United Methodist Church</td>
<td>76-0524702</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>Grace Immanuel Bible Church - Jupiter, FL</td>
<td>59-6559016</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>Grace International Churches and Ministries</td>
<td>27-0093525</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>Grace Life Church</td>
<td>41-1917555</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>Grace Life Community Church</td>
<td>95-3685703</td>
<td>501 (C) 3</td>
<td>78,518.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>Grace Life International Inc</td>
<td>56-1885063</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>Grace Lutheran Church</td>
<td>02-0395589</td>
<td>501 (C) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>Grace Lutheran Church</td>
<td>51-0111518</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>Grace Lutheran Church</td>
<td>39-1214330</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>Grace Lutheran Church</td>
<td>94-1251133</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12</td>
<td>Grace Lutheran Church of Pensacola FL Inc</td>
<td>59-1283958</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) GRACE MINISTRIES  
PO BOX 173 MILL CREEK, WV 26280 | 51-0612210 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (2) GRACE NEW TESTAMENT CHURCH  
200 SAGE RD CHAPEL HILL, NC 27514 | 56-1769507 | 501 (C) 3 | 7,975. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (3) GRACE OUTREACH  
378 E 151ST ST BRONX, NY 10455 | 86-1110482 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (4) GRACE PLACE FOR CHILDREN AND FAMILIES INC  
4300 21ST AVE SW NAPLES, FL 34116 | 65-1229558 | 501 (C) 3 | 36,500. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (5) GRACE PREP INCORPORATED  
848 SCIENCE PARK RD STATE COLLEGE, PA 16803 | 20-1224844 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (6) GRACE PRESBYTERIAN CHURCH  
444 OLD YORK RD JENKINTOWN, TX 77042 | 23-1352403 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (7) GRACE PRESBYTERIAN CHURCH  
40 VILLAGE WAY LEXINGTON, PA 19046 | 54-1050964 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (8) GRACE PRESBYTERIAN CHURCH  
10221 ELLA LEE LN HOUSTON, NV 89102 | 74-1216230 | 501 (C) 3 | 138,002. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (9) GRACE PRESBYTERIAN CHURCH  
1515 W CHARLESTON BLVD LAS VEGAS, VA 24450 | 46-2909257 | 501 (C) 3 | 9,900. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (10) GRACE PRESBYTERIAN CHURCH OF THE NORTH SHORE  
440 RIDGE AVE WINNETKA, IL 60093 | 36-4416196 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (11) GRACE ROAD CHURCH  
50 LIBERTY POLE WAY ROCHESTER, NY 14604 | 26-4747656 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S E XEM |
| (12) GRACE SACRAMENTO  
PO BOX 191394 SACRAMENTO, CA 95819 | 81-0714273 | 501 (C) 3 | 13,400. | FMV | N/A | FOR RECIPIENT'S E XEM |

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I  
(Form 990)  
Department of the Treasury  
Internal Revenue Service

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

### Part I  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>GRACE SCHOOLS</td>
<td>35-0868095</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>GRACE TO YOU</td>
<td>95-3846510</td>
<td>501 (C) 3</td>
<td>87,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>GRACE TRUST INC DBA ENCOMPASS WORLD PARTNER</td>
<td>35-0992713</td>
<td>501 (C) 3</td>
<td>10,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>GRACE UNITED METHODIST CHURCH</td>
<td>62-1086006</td>
<td>501 (C) 3</td>
<td>7,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>GRACE UNITED METHODIST CHURCH</td>
<td>61-0937865</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>GRACE UNITED METHODIST CHURCH</td>
<td>36-0251916</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>GRACE UNITED METHODIST CHURCH</td>
<td>43-0652635</td>
<td>501 (C) 3</td>
<td>21,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8</td>
<td>GRACE VALLEY CHRISTIAN CENTER INTERNATIONAL</td>
<td>84-2384671</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>GRACEHAVEN INC</td>
<td>26-2471442</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>GRACEINSIDE</td>
<td>54-0542300</td>
<td>501 (C) 3</td>
<td>25,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>GRACELAND UNIVERSITY</td>
<td>42-0707114</td>
<td>501 (C) 3</td>
<td>58,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>GRACELIFE FLORIDA INC</td>
<td>47-2039099</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
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<td>1</td>
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<td>62-1584204</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>GRAND BAG INC</td>
<td>86-2502503</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>GRAHAM GUND GALLERY</td>
<td>46-3140140</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>GRAHAM-HINDHAM</td>
<td>13-2926426</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>GRAMEEN AMERICA INC</td>
<td>20-8497991</td>
<td>501 (C) 3</td>
<td>63,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>GRAMEEN FOUNDATION USA</td>
<td>73-1502797</td>
<td>501 (C) 3</td>
<td>62,165.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>GRAMEEN RESEARCH INC</td>
<td>500 W CUMMINGS PARK STE 5200 WOBURN, MA 180 20-8498163</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>GRAND CANYON CONSERVANCY</td>
<td>86-0179548</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>GRAND CANYON TRUST INC</td>
<td>86-0512633</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>GRAND HARBOR COMMUNITY OUTREACH PROGRAM INC</td>
<td>51-0418002</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>GRAND MESA NORDIC COUNCIL</td>
<td>84-1138899</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>GRAND POINT CHURCH</td>
<td>23-1948444</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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Schedule I (Form 990) 2020
## General Information on Grants and Assistance

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<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GRAND RAPIDS COMMUNITY FOUNDATION</td>
<td>38-2877959</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>2</td>
<td>GRAND STAIRCASE ESCALANTE PARTNERS INC</td>
<td>34-1987583</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>GRAND STREET SETTLEMENT INC</td>
<td>12-5562230</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>GRAND TETON MUSIC FESTIVAL INC</td>
<td>23-7034152</td>
<td>501 (C) 3</td>
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<tr>
<td>5</td>
<td>GRAND TETON NATIONAL PARK FOUNDATION</td>
<td>83-0326668</td>
<td>501 (C) 3</td>
<td>25,025.</td>
<td>FMV</td>
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<td>6</td>
<td>GRAND TRAVERSE REGIONAL LAND CONSERVANCY</td>
<td>38-2994229</td>
<td>501 (C) 3</td>
<td>241,000.</td>
<td>FMV</td>
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<tr>
<td>7</td>
<td>GRAND VALLEY STATE UNIVERSITY</td>
<td>38-1684280</td>
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<td>5,100.</td>
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<td>GRANDFATHER MOUNTAIN STEWARDSHIP FOUNDATION</td>
<td>26-4812778</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>GRANDIN COURT BAPTIST CHURCH</td>
<td>54-0673413</td>
<td>501 (C) 3</td>
<td>76,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>GRANITE EDUCATION FOUNDATION INC</td>
<td>94-2951639</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>GRANITE SHOALS GRACE UNITED METHODIST CHURC</td>
<td>74-2918426</td>
<td>501 (C) 3</td>
<td>10,910.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>GRANITE UNITED WAY</td>
<td>02-6006033</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Grant Foundation</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>GRANT FOUNDATION</td>
<td>310 HOODRIDGE DR PITTSBURGH, PA 15234</td>
<td>25-1017587 501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRANT MEMORIAL METHODIST CHURCH</td>
<td>10 3RD ST PRESQUE ISLE, ME 04769</td>
<td>01-0263728 501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRANT PARK ORCHESTRAL ASSOCIATION</td>
<td>205 E RANDOLPH ST CHICAGO, IL 60601</td>
<td>32-0005884 501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRASSLAND BIRD TRUST INC</td>
<td>PO BOX 82 FORT EDWARD, NY 12828</td>
<td>27-4846966 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRASSLANDS FOUNDATION INC</td>
<td>601 UNION ST STE 3300 SEATTLE, WA 98101</td>
<td>81-2992067 501 (C) 3</td>
<td>25,610.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRASSROOT INSTITUTE OF HAWAII INC</td>
<td>1050 BISHOP ST STE 508 HONOLULU, HI 96813</td>
<td>99-0354937 501 (C) 3</td>
<td>17,760.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRASSROOT SOCCER INC</td>
<td>15 LEBANON ST HANOVER, NH 3755</td>
<td>43-1957920 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRASSROOTS INTERNATIONAL INC</td>
<td>179 BOYLSTON ST STE 4 JAMAICA PLAIN, MA 213</td>
<td>04-2791159 501 (C) 3</td>
<td>2,009,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRATEFUL GATHERINGS</td>
<td>1528 WEBSTER ST OAKLAND, CA 94612</td>
<td>47-1169913 501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRAUER FOUNDATION FOR EDUCATION</td>
<td>1500 S EL CAMINO REAL ENCINITAS, CA 92024</td>
<td>33-0708902 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GRAYHAWK CLASSIC RESIDENTS FOUNDATION</td>
<td>7501 E THOMPSON PEAK PKWY UNIT 100 SCOTTSDALE</td>
<td>02-0643508 501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>GRAYS HARBOR COLLEGE FOUNDATION INC</td>
<td>1620 EDWARD P SMITH DR ABERDEEN, WA 98520</td>
<td>91-6052939 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>4(b) EIN</th>
<th>7(c) IRC section (if applicable)</th>
<th>10(d) Amount of cash grant</th>
<th>13(e) Amount of non-cash assistance</th>
<th>16(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>19(g) Description of noncash assistance</th>
<th>22(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| GRAYS HARBOR COMMUNITY FOUNDATION 705 J ST HOQUIAM, WA 98550 91-1607005 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM | 12GRAYSON-JOCKEY CLUB RESEARCH FOUNDATION 40 E 52ND ST FL 15 NEW YORK, NY 10022 61-6031750 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM | 15GRAYWOLF PRESS 250 3RD AVE N STE 600 MINNEAPOLIS, MN 55401 91-1257237 501 (C) 3 19,000. FMV N/A FOR RECIPIENT'S EXEM | 18GREAT BOOKS FOUNDATION 233 N MICHIGAN AVE STE 420 CHICAGO, IL 60601 36-2182034 501 (C) 3 35,500. FMV N/A FOR RECIPIENT'S EXEM | 21GREAT BRIDGE PRESBYTERIAN CHURCH 333 CEDAR RD CHESAPEAKE, VA 23322 54-0922009 501 (C) 3 13,000. FMV N/A FOR RECIPIENT'S EXEM | 24GREAT CIRCLE PO BOX 189 SAINT JAMES, MD 65559 43-0681471 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM | 27GREAT CITIES MISSIONS 3939 BELT LINE RD STE 705 ADDISON, TX 75001 75-2449899 501 (C) 3 15,840. FMV N/A FOR RECIPIENT'S EXEM | 30GREAT COMPANY OF PUBLISHERS INC 1945 N FLORIDA AVE LAKELAND, FL 33805 82-1687269 501 (C) 3 270,000. FMV N/A FOR RECIPIENT'S EXEM | 33GREAT ENLIGHTENMENT BUDDHIST INSTITUTE SOCIETY 3209 PRODUCER WAY FOMONA, CA 91768 81-2865692 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM | 36GREAT ENLIGHTENMENT LOTUS SOCIETY INC 3209 PRODUCER WAY FOMONA, CA 91768 95-3787904 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM | 39GREAT FALLS PUBLIC SCHOOLS FOUNDATION PO BOX 2429 GREAT FALLS, MT 59403 27-2577990 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM | 422 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  | 433 Enter total number of other organizations listed in the line 1 table  | 44For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>GREAT HEADWATERS TRAILS FOUNDATION INC PO BOX 609 EAGLE RIVER, WI 54521</td>
<td>27-4655716</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>GREAT HEARTS AMERICA-Texas 7205 N PIMA RD SCOTTSDALE, AZ 85258</td>
<td>43-1973126</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT LAKES BASIN CONSERVANCY INC PO BOX 550 GATES MILLS, OH 44040</td>
<td>31-1502060</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT LAKES DRYHOOTCH PO BOX 1710 BROOKFIELD, WI 53008</td>
<td>81-3879969</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT LAND TRUST INC PO BOX 101272 ANCHORAGE, AK 99510</td>
<td>92-0155014</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>N/A</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT MEADOW FOUNDATION 5089 OLD TAVERN RD THE PLAINS, VA 20198</td>
<td>52-1257702</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>N/A</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT MN SCHOOLS 1330 LAGOON AVE FL 4 MINNEAPOLIS, MN 55408</td>
<td>81-1733895</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>N/A</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT OLD BROADS FOR WILDERNESS 555 RIVERGATE STE 81-110 DURANGO, CO 81301</td>
<td>87-0479828</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT OUTDOOR ADVENTURE TRIPS INC 1220 LAURENS RD GREENVILLE, SC 29607</td>
<td>26-4046643</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>N/A</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT PENINSULA CONSERVANCY 423 PACIFIC AVE STE 300 BREMERTON, WA 98337</td>
<td>91-1110978</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>N/A</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>GREAT PLAINS FOOD BANK 1720 3RD AVE N FARGO, ND 58102</td>
<td>47-2229589</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>GREAT PUBLIC SCHOOLS NOW 1150 S OLIVE ST STE 1325 LOS ANGELES, CA 90</td>
<td>47-4962715</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>GREAT SPRINGS PROJECT INC</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>GREAT SWAMP WATERSHED ASSOCIATION</td>
<td>22-2403906</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>3</td>
<td>GREAT VALLEY PRESBYTERIAN CHURCH</td>
<td>22-1353374</td>
<td>501 (C) 3</td>
<td>78,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>GREATER ALTOONA JEWISH FEDERATION</td>
<td>23-1352137</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>GREATER BALTIMORE MEDICAL CENTER</td>
<td>52-6049658</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>GREATER BATON ROUGE FOOD BANK INC</td>
<td>72-1065318</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>GREATER BERKS FOOD BANK</td>
<td>22-2456238</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>GREATER BIRMINGHAM HABITAT FOR HUMANITY INC</td>
<td>63-0962910</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>GREATER BIRMINGHAM MINISTRIES INC</td>
<td>63-0577439</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>GREATER BOSTON LEGAL SERVICES INC</td>
<td>04-2103907</td>
<td>501 (C) 3</td>
<td>102,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>GREATER BURLINGTON YOUNG MENS CHRISTIAN ASS</td>
<td>03-0185810</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☒ No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  

Attach to Form 990.  

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   - No

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**  

Schedule I (Form 990) 2020  

**Go to www.irs.gov/Form990 for the latest information.**
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes ☑  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
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<td>47-5438012</td>
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<td>(8) GREENWICH ACADEMY INC</td>
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</table>

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**SCHEDULE I**  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
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**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td><strong>(4) GREENWICH VILLAGE SOCIETY FOR HISTORIC PRES</strong></td>
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<tr>
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<td><strong>(8) GREGORIAN UNIVERSITY FOUNDATION</strong></td>
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</tbody>
</table>

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Schedule I (Form 990) 2020

JSA
2020-7.21
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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#### 1. Name and address of organization or government

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<thead>
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<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes √ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>GROUNDWORK CENTER FOR RESILIENT COMMUNITIES 148 E FRONT ST STE 301 TRAVERSE CITY, MI 49 38-2314954 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>GROW FURTHER CLUB 600 1ST AVE FL 1 SEATTLE, WA 98104 82-4177100 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>GROW IT GREEN MORRISTOWN INC 14 MAPLE AVE STE 300 MORRISTOWN, NJ 7960 26-4560703 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>GROW SMART RHODE ISLAND 144 WESTMINSTER ST STE 303 PROVIDENCE, RI 2 05-0499148 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>GROWING COMMUNITY MEDIA NFP 141 S OAK PARK AVE OAK PARK, IL 60302 84-2123099 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) GROWING HOPE INC 922 W MICHIGAN AVE YPSILANTI, MI 48197</td>
<td>74-3091845</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) GRUB STREET INC PO BOX 418 ARLINGTON, MA 2226</td>
<td>80-0005516</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) GRUNGRUND COUNTY HISTORICAL SOCIETY  PO BOX 1422 TRACY, TN 37387</td>
<td>30-0214768</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4) GUADALUPE CENTER INC 509 HOPE CIR IMMOKALEE, FL 34142</td>
<td>59-2617151</td>
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<td>73,500.</td>
<td>FMV</td>
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<tr>
<td>(5) GUADALUPE CLINIC INC 940 S SAINT FRANCIS ST WICHITA, KS 67211</td>
<td>20-1285208</td>
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<td>9,500.</td>
<td>FMV</td>
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<tr>
<td>(6) GUALALA ARTS PO BOX 244 GUALALA, CA 95445</td>
<td>94-6121872</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) GUANACASTE DRY FOREST CONSERVATION FUND 4780 MAIN RD HUNTINGTON, VT 54602</td>
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<tr>
<td>(8) GUARDIAN ANGEL SETTLEMENT ASSOCIATION 1127 N VANDEVENTER AVE SAINT LOUIS, MO 63111</td>
<td>43-0652636</td>
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<td>FMV</td>
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<td>(9) GUARDIAN ANGELS CHURCH AND SCHOOL 6531 BEECHMONT AVE CINCINNATI, OH 45230</td>
<td>31-0536982</td>
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<td>17,900.</td>
<td>FMV</td>
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<td>(11) GUARDIAN TRAINING 3007 SACRAMENTO ST BERKELEY, CA 94702</td>
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<td>(12) GUEST HOUSE OF MILWAUKEE INC 1216 N 13TH ST MILWAUKEE, WI 53205</td>
<td>39-1539301</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(3) GUIDE DOGS FOR THE BLIND INC</td>
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<td>(5) GUIDELINE SERVICES</td>
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<td>(6) GUIDING EYES FOR THE BLIND INC</td>
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<td>(7) GUIDING LIGHT MISSION INC</td>
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<td>255 DIVISION AVE S GRAND RAPIDS, MI 49503</td>
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<tr>
<td>(8) GUIDING STAR PROJECT</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 51 POMONA, AJ 8240</td>
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<td>(9) GUILFORD COLLEGE</td>
<td>56-0529982</td>
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<td>18,000.</td>
<td>FMV</td>
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<tr>
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<td>(10) GUILFORD COLLEGE UNITED METHODIST CHURCH</td>
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<td>27,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 35 GUILFORD, CT 6437</td>
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SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   
   Yes [X] No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1)</td>
<td>GULF ARCHAEOLOGY RESEARCH INSTITUTE</td>
<td>59-3296789</td>
<td>501 (C) 3</td>
<td>321,528.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>GULF COAST COMMUNITY MINISTRIES INC</td>
<td>30-0225661</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<tr>
<td>(3)</td>
<td>GULF COAST KIDS HOUSE INC</td>
<td>59-3520130</td>
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<td>FMV</td>
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<td>(4)</td>
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<td>59-244318</td>
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<td>FMV</td>
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<td>(5)</td>
<td>GULF PRAIRIE PRESBYTERIAN CHURCH</td>
<td>74-2161500</td>
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<td>(6)</td>
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<td>36-4512524</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(7)</td>
<td>GULFSHORE PLAYHOUSE INC</td>
<td>90-0178566</td>
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<td>(8)</td>
<td>GULLIVER PREPARATORY SCHOOL INC</td>
<td>65-0900712</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(9)</td>
<td>GUINDESEN LUTHERAN MEDICAL FOUNDATION INC</td>
<td>39-1249705</td>
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<td>FMV</td>
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<td>(10)</td>
<td>GUNILDA RIANDA SENIOR CENTER ASSOCIATION</td>
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<td>(11)</td>
<td>GUNN MEMORIAL LIBRARY INC</td>
<td>06-0691373</td>
<td>501 (C) 3</td>
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<td>(12)</td>
<td>GUNNISON COUNTRY FOOD PANTRY</td>
<td>20-8197462</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>GUNNISON HINSDALE YOUTH SERVICES INC</td>
<td>84-1157649</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>GUNSDOWN INC</td>
<td>82-2687652</td>
<td>501 (c) 3</td>
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<td>GUNNIE COMMUNITY CHURCH</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>GURU NAHAK MISSION</td>
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<td>GUSTAVUS ADOLPHUS COLLEGE</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>GUTHY-JACKSON RESEARCH FOUNDATION INC</td>
<td>47-2186708</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>H A L O</td>
<td>86-0832160</td>
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<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>H LEE MOFFITT CANCER CENTER AND RESEARCH IN</td>
<td>59-3238636</td>
<td>501 (c) 3</td>
<td>180,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>H LEE MOFFITT CANCER CENTER AND RESEARCH IN</td>
<td>59-2451713</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>H O M E INC</td>
<td>01-0287624</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</table>

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

Schedule I (Form 990) 2020
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>HABITAT FOR HUMANITY CHOPTANK</td>
<td>29349 W. MAPLE AVENUE SUITE 3 TRAPPE, MD 21</td>
<td>52-1785188</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY FRESNO INC</td>
<td>4991 E MCKINLEY AVE STE 123 FRESNO, CA 9372</td>
<td>77-0076649</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY GREATER ORLANDO AND OS</td>
<td>4116 SILVER STAR RD ORLANDO, FL 32808</td>
<td>59-2789167</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY IN ATLANTA INC</td>
<td>824 MEMORIAL DR SE ATLANTA, GA 30316</td>
<td>58-1535414</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL</td>
<td>560 NACHES AVE SW STE 110 RENTON, WA 98057</td>
<td>91-1342397</td>
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<td>569,100.</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>14 PARK ST DANVERS, GA 31709</td>
<td>22-2672831</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>240 COMMERCIAL ST BOSTON, TN 37130</td>
<td>04-2994233</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>PO BOX 1159 MANCHESTER, TX 77801</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>PO BOX 1 SALISBURY, KS 67214</td>
<td>06-1316993</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>60 PARK PL STE 1012 NEWARK, MN 55104</td>
<td>22-2762202</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>146 N 1ST ST PATERSON, TX 77305</td>
<td>22-2598353</td>
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<td>47,500.</td>
<td>FMV</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>111 JOHN ST FL 23 NEW YORK, PA 19121</td>
<td>11-2857055</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 755 CULVER RD ROCHESTER, NC 28803</td>
<td>13-3281487</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 1829 N 19TH ST PHILADELPHIA, OH 44102</td>
<td>42-1580163</td>
<td>501 (C) 3</td>
<td>68,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 1853 E LINCOLN HWY COATESVILLE, OH 45405</td>
<td>23-2549743</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 1920 HUTTON ST WILMINGTON, NJ 7522</td>
<td>51-0294138</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 919 W MAIN ST CHARLOTTESVILLE, IN 47711</td>
<td>54-1574925</td>
<td>501 (C) 3</td>
<td>13,800.</td>
<td>FMV</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 2526 HUNTINGTON, NC 28315</td>
<td>55-0697541</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2420 N RALEIGH BLVD RALEIGH, CA 94612</td>
<td>56-1492703</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC 8 CHURCH ST S CONCORD, NY 14609</td>
<td>56-1678395</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 3815 LATROBE DR CHARLOTTE, NC 28269</td>
<td>56-1366233</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2268 NC 5 HWY ABERDEEN, PA 19320</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 33 MEADOW RD ASHEVILLE, NC 28803</td>
<td>56-1363466</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 1206 GREENVILLE, ID 83301</td>
<td>57-0827063</td>
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<td>11,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 2747 BLUFFTON, IL 65601</td>
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</tr>
<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>58-2157723</td>
<td>501 (C) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>814 MIMOSA BLVD ROSWELL, FL 32967</td>
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<tr>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>91-1914868</td>
<td>501 (C) 3</td>
<td>3,665,649.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>322 W LAMAR ST AMERICUS, MO 65708</td>
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<tr>
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<td>2700 AKRON RD WOOSTER, OR 97707</td>
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<td>115 W RIVERVIEW AVE DAYTON, NC 28025</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   [X] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>560 E DIAMOND AVE EVANSVILLE, OH 44691</td>
<td>35-1602775</td>
<td>501 (C) 3</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>350 6TH AVE SE CEDAR RAPIDS, NC 28211</td>
<td>42-1320296</td>
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<td>3</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>3181 BERLIN DR LA CROSSE, DE 19802</td>
<td>39-1706999</td>
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<td>29,000.</td>
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<td>4</td>
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<td>36-3363171</td>
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<td>79,000.</td>
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<td>5</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>2171 UNIVERSITY AVE W SAINT PAUL, WA 98801</td>
<td>41-1889904</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>233 N MICHIGAN AVE STE 1820 CHICAGO, IL 524</td>
<td>36-4257107</td>
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<td>17,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>PO BOX 123 MONETT, WA 2109</td>
<td>81-0564485</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>130 E MURDOCK ST STE 102 WICHITA, FL 33483</td>
<td>58-1735540</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>9333 N NORMANDALE ST FORT WORTH, TX 83864</td>
<td>75-2239189</td>
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<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>PO BOX 2624 CONROE, TX 6068</td>
<td>76-0276330</td>
<td>501 (C) 3</td>
<td>71,779.</td>
<td>FMV</td>
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<td>11</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>119 LAKE ST BRYAN, FL 32333</td>
<td>74-2542417</td>
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<td>96,000.</td>
<td>FMV</td>
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<td>12</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC</td>
<td>PO BOX 4194 JACKSON, WY 83001</td>
<td>83-0312179</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Schedule I
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2016 N WAS TWIN FALLS, WA 99220</td>
<td>82-0442486</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 1191 SANDPOINT, VT 5254</td>
<td>82-0449303</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 500 WASHINGTON ST STE 250 SAN FRANCISCO, CA 94111</td>
<td>94-3088881</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2619 BROADWAY # 205 OAKLAND, CA 94111</td>
<td>94-3053667</td>
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<td>36,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 3364 BEND, OR 97703</td>
<td>93-1123270</td>
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<td>6.</td>
<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 2279 OAK HARBOR, WA 98269</td>
<td>91-1882362</td>
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<td>FMV</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 871570 VANCOUVER, WA 98663</td>
<td>91-1557462</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC 1408 WASHINGTON ST WICHITA FALLS, TX 76301</td>
<td>91-1482979</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 4130 SPOKANE, WA 99214</td>
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<td>HABITAT FOR HUMANITY OF COASTAL FAIRFIELD COUNTY INC 1542 BARNUM AVE BRIDGEPOR, CT 6610</td>
<td>22-2597077</td>
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<td>11.</td>
<td>HABITAT FOR HUMANITY OF COLLIER COUNTY INC 11145 TAMAMI TRAIL NAPLES, FL 34113</td>
<td>59-1834479</td>
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<td>HABITAT FOR HUMANITY OF DURHAM INC 215 N CHURCH ST DURHAM, NC 27701</td>
<td>58-1674794</td>
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<td>20,000.</td>
<td>FMV</td>
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## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Attach to Form 990.**

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>HABITAT FOR HUMANITY OF GREATER MIAMI INC 3800 NW 22ND AVE MIAMI, FL 33142</td>
<td>65-0108974</td>
<td>501 (c) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HABITAT FOR HUMANITY OF KANSAS CITY 1423 E LINWOOD BLVD KANSAS CITY, MO 64109</td>
<td>43-1175749</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HABITAT FOR HUMANITY OF LEE &amp; HENDRY COUNTY 1288 N TAMiami TRL NORTH PORT MYERS, FL 339</td>
<td>59-2236174</td>
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<td>FMV</td>
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<td>HABITAT FOR HUMANITY OF MONTGOMERY &amp; DELAWARE 533 FOUNDRY RD NORRISTOWN, PA 19403</td>
<td>23-2544395</td>
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<td>FMV</td>
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<td>HABITAT FOR HUMANITY ORANGE COUNTY 88 VILCOM CENTER DR STE L110 CHAPEL HILL, NC 27514</td>
<td>58-1603427</td>
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<td>HABITAT FOR HUMANITY TUCSON INC 3501 N MOUNTAIN AVE TUCSON, AZ 85719</td>
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<td>HABITAT FOR HUMANITY VAIL VALLEY INC PO BOX 4149 AVON, CO 81620</td>
<td>84-1278922</td>
<td>501 (c) 3</td>
<td>55,000.</td>
<td>FMV</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2830 W GLENDALE AVE STE 33 PHOENIX, AZ 8505</td>
<td>74-2401708</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>HABITAT FOR HUMANITY INTERNATIONAL INC 2000 KINNELL PARKWAY IRVING, TX 75063</td>
<td>75-2261480</td>
<td>501 (c) 3</td>
<td>42,000.</td>
<td>FMV</td>
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<td>HACKENSACK MERIDIAN HEALTH INC 160 ESSEX ST STE 101 LODI, NJ 7644</td>
<td>22-2339534</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HACKLEY SCHOOL 293 BENEDICT AVE TARRYTOWN, NY 10591</td>
<td>13-1740452</td>
<td>501 (c) 3</td>
<td>161,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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Schedule I (Form 990) 2020

JSA 18674H 1467 V 20-7.21
## SCHEDULE I  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
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- Attach to Form 990.  

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---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HADASSAH THE WOMENS ZIONIST ORGANIZATION OF 40 WALL ST FL 8 NEW YORK, NY 10005</td>
<td>13-1656651</td>
<td>501 (C) 3</td>
<td>62,140</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>HADASSAH THE WOMENS ZIONIST ORGANIZATION OF 60 REVERE DR STE #00 NORTHBROOK, IL 60062</td>
<td>36-3005699</td>
<td>501 (C) 3</td>
<td>6,360</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>HADDONFIELD UNITED METHODIST CHURCH 29 WARWICK RD HADDONFIELD, NJ 07933</td>
<td>21-063477</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>HAGAR USA INC 1609 E 5TH ST STE 2 CHARLOTTE, NC 28204</td>
<td>20-1507669</td>
<td>501 (C) 3</td>
<td>51,200</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5</td>
<td>HAGGAI INTERNATIONAL INSTITUTE FOR ADVANCED 4725 PEACHTREE CORNERS CIR # 2 PEACHTREE CO</td>
<td>58-0898309</td>
<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HAI GLOBAL 593 N MCDONELL BLVD STE B PELALUMA, CA 94954</td>
<td>26-3847947</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>HAITI OUTREACH MINISTRIES PO BOX 71042 DURHAM, NC 27722</td>
<td>54-1650694</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>HAITIAN BRIDGE ALLIANCE 13 OVERTURE LN ALISO VIEJO, CA 92656</td>
<td>81-3358713</td>
<td>501 (C) 3</td>
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<td>9</td>
<td>HAITIAN EDUCATION &amp; LEADERSHIP PROGRAM 64 FULTON ST NEW YORK, NY 10038</td>
<td>02-0602245</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>10</td>
<td>HAITIAN GLOBAL HEALTH ALLIANCE INC 68 JAY ST STE 201 BROOKLYN, NY 11201</td>
<td>98-0158310</td>
<td>501 (C) 3</td>
<td>440,000</td>
<td>FMV</td>
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<td>11</td>
<td>HAITIAN HEALTH FOUNDATION INC 97 SHERMAN ST NORWICH, CT 6360</td>
<td>06-1135999</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<td>12</td>
<td>HAITIAN RESOURCE DEVELOPMENT FOUNDATION 854 MARINA DR WESTON, FL 33327</td>
<td>72-1074082</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ____________

3. Enter total number of other organizations listed in the line 1 table: ____________

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JSA  
OE1288 1.000  
18674H 1467  
V 20-7.21
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### 1. General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### 2. Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1. HAKSHIVA INC</td>
<td>20-4966120</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>2. HALACHIC ORGAN DONOR SOCIETY INC</td>
<td>13-4199797</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. HALEAKALA INC</td>
<td>13-2828576</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. HALES CORNERS LUTHERAN CHURCH</td>
<td>39-6020915</td>
<td>501 (C) 3</td>
<td>56,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5. HALEY HOUSE INC</td>
<td>04-2437845</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. HALO TRUST USA INC</td>
<td>52-2158152</td>
<td>501 (C) 3</td>
<td>19,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. HAMILTON COUNTY CATHOLIC HIGH</td>
<td>35-2103486</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. HAMILTON COUNTY SOCIETY FOR THE PREVENTION</td>
<td>31-0543284</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. HAMILTON FAMILIES</td>
<td>94-3055602</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. HAMILTON HABITAT INC</td>
<td>84-4333414</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. HAMILTON UNITED METHODIST CHURCH</td>
<td>58-2283292</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>12. HAMILTON-MADISON HOUSE INC</td>
<td>13-5562412</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 

Enter total number of other organizations listed in the line 1 table: 

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   YES ☑ ☐  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>HAMLIN SCHOOL 2120 BROADWAY ST SAN FRANCISCO, CA 94115</td>
<td>94-1393894</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>HAMPTON HEALTH FOUNDATION 302 FRENCH ST ERIE, PA 16507</td>
<td>25-1400999</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>HAMPTON-SYDNEY COLLEGE PO BOX 127 HAMPDEN SYDNEY, VA 23943</td>
<td>54-0505906</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>4</td>
<td>HAMPSHIRE COMMUNITY UNITED WAY 71 KING ST NORTHAMPTON, MA 1060</td>
<td>04-2104792</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>HAMPTON ROADS EDUCATIONAL TELECOMMUNICATION 5200 HAMPTON BLVD NORFOLK, VA 23508</td>
<td>54-0843118</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HAMPTONS TAKE 2 DOCUMENTARY FILM FESTIVAL I PO BOX 915 BRIDGEMANHAMPTON, NY 11932</td>
<td>45-2788364</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>Hanaim Church Inc 690 RIVER DR ELMWOOD PARK, NJ 7407</td>
<td>20-1958834</td>
<td>501 (C) 3</td>
<td>159,000.</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>Hanalei Initiative PO BOX 422 HANALEI, HI 96714</td>
<td>83-1572601</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>Hancock County Food Pantry Inc PO BOX 244 GREENFIELD, IN 46140</td>
<td>35-1923567</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>Hancock Shaker Village Inc PO BOX 927 PITTSFIELD, MA 1202</td>
<td>04-2281657</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>Hancock United Church of Christ 1912 MASSACHUSETTS AVE LEXINGTON, MA 2421</td>
<td>04-2108364</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>Hand in Hand American Friends of CNTR for J 2929 SW MULTNOMAH BLVD STE 204 PORTLAND, OR</td>
<td>93-1269590</td>
<td>501 (C) 3</td>
<td>8,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Attach to Form 990.

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<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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</tr>
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<td>(1) HAND IN HAND MINISTRIES INC</td>
<td>61-1352889</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
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<td>(2) HAND IN HAND OF GLYNN INC</td>
<td>83-1620221</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>(3) HAND UP INC</td>
<td>58-1128801</td>
<td>501 (C) 3</td>
<td>45,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) HAND2HAND</td>
<td>27-2973348</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5) HANDEL AND HAYDN SOCIETY</td>
<td>04-2126598</td>
<td>501 (C) 3</td>
<td>22,600</td>
<td>FMV</td>
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<td>(6) HANDICAPPED DEVELOPMENT CENTER</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(7) HANDI-CRAFTERS INC</td>
<td>23-1609968</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) HANDMAIDS OF THE SACRED HEART OF JESUS</td>
<td>23-1445666</td>
<td>501 (C) 3</td>
<td>29,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(9) HANDS FOR HAITI</td>
<td>26-0498705</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(10) HANDS IN OUTREACH INC</td>
<td>56-1628440</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>(11) HANDS ON HARTFORD INC</td>
<td>06-0861268</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) HANDS ON TZEDEKAH INC</td>
<td>86-1067535</td>
<td>501 (C) 3</td>
<td>36,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
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3 Enter total number of other organizations listed in the line 1 table .............................................................................................................
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**1.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
- Yes [x]  
- No [ ]

**2.** Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td><strong>1</strong> HANDS TOGETHER FOR HAITIANS INC</td>
<td>12415 INDIAN RD NORTH PALM BEACH, FL 33408</td>
<td>20-2512245 501 (C) 3</td>
<td>12,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td><strong>2</strong> HANDS TOGETHER INC</td>
<td>10 CENTER ST STE 413 CHICOPEE, MA 1013</td>
<td>23-2566502 501 (C) 3</td>
<td>21,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td><strong>3</strong> HANDSON BAY AREA</td>
<td>1504 BRYANT ST STE 100 SAN FRANCISCO, CA 94</td>
<td>77-0195144 501 (C) 3</td>
<td>69,250. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>4</strong> HANOVER CHARITIES USA INC</td>
<td>824 ISLAND CIR W SAINT HELENA ISLAND, SC 29</td>
<td>26-3836362 501 (C) 3</td>
<td>7,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td><strong>5</strong> HANOVER COLLEGE TRUSTEES</td>
<td>517 BALL DR HANOVER, IN 47243</td>
<td>35-0868096 501 (C) 3</td>
<td>6,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td><strong>6</strong> HANUMAN MAUI</td>
<td>PO BOX 795050 PAIA, HI 96779</td>
<td>84-4420082 501 (C) 3</td>
<td>50,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>7</strong> HAPPY BAR NUTRITION INC</td>
<td>5424 CHAPELFORD LN SAINT LOUIS, MO 63119</td>
<td>81-1744558 501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>8</strong> HAN ZION TEMPLE</td>
<td>1500 NAGYS FORD RD PENN VALLEY, PA 19072</td>
<td>23-1365242 501 (C) 3</td>
<td>9,526. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>9</strong> HARADA HOUSE FOUNDATION</td>
<td>PO BOX 2272 RIVERSIDE, CA 92516</td>
<td>82-3538548 501 (C) 3</td>
<td>7,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>10</strong> HARAMBEE USA FOUNDATION</td>
<td>117 E 70TH ST NEW YORK, NY 10021</td>
<td>36-4612166 501 (C) 3</td>
<td>16,253. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>11</strong> HARBOR CAMPS INC</td>
<td>PO BOX 920251 NEEDHAM, MA 2492</td>
<td>26-4037161 501 (C) 3</td>
<td>20,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td><strong>12</strong> HARBOR CHURCH</td>
<td>423 KAMAKEE ST HONOLULU, HI 96814</td>
<td>20-2588323 501 (C) 3</td>
<td>79,750. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

**2.** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
- [ ]

**3.** Enter total number of other organizations listed in the line 1 table.  
- [ ]
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HARBOR HUMANE SOCIETY</td>
<td>14345 BAGLEY ST WEST OLIVE, MI 49460</td>
<td>38-1623660 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HARBOR POINT CHURCH</td>
<td>32222 DEL OBIISO ST SAN JUAN CAPISTRANO, CA</td>
<td>82-1485040 501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HARBOR SPRINGS AREA HISTORICAL SOCIETY</td>
<td>PO BOX 812 HARBOR SPRINGS, MI 49740</td>
<td>38-2934124 501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HARBOR SPRINGS LIBRARY</td>
<td>206 S SPRING ST HARBOR SPRINGS, MI 49740</td>
<td>38-1722820 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HARBORLIGHT COMMUNITY PARTNERS</td>
<td>PO BOX 507 BEVERLY, MA 1915</td>
<td>04-2313571 501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>HARBORSIDE CHRISTIAN CHURCH INC</td>
<td>2200 MARSHALL ST SAFETY HARBOR, FL 34695</td>
<td>59-2348246 501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HARDING ACADEMY</td>
<td>170 WINDSOR DR NASHVILLE, TN 37205</td>
<td>62-0852815 501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HARICANDB EDUCATION FUND</td>
<td>4554 ELM ST BELLAIRE, TX 77401</td>
<td>26-2221008 501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HARLEM ACADEMY</td>
<td>1330 5TH AVE NEW YORK, NY 10026</td>
<td>56-2454573 501 (C) 3</td>
<td>122,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HARLEM CHILDRENS ZONE INC</td>
<td>35 E 125TH ST NEW YORK, NY 10035</td>
<td>23-7112974 501 (C) 3</td>
<td>47,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HARLEM EDUCATIONAL ACTIVITIES FUND INC</td>
<td>2090 ADAM CLAYTON POWELL JR BLVD NEW YORK,</td>
<td>13-3568672 501 (C) 3</td>
<td>39,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>HARLEM LACROSSE AND LEADERSHIP CORPORATION</td>
<td>8 W 126TH ST NEW YORK, NY 10027</td>
<td>45-1634118 501 (C) 3</td>
<td>21,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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<tr>
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<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>(1) HARLEM LINK ChARTER SCHOOL</td>
<td>20 W 112TH ST FL 3 NEW YORK, NY 10026</td>
</tr>
<tr>
<td>(2) HARLEM RBI INCORPORATED</td>
<td>1991 2ND AVE NEW YORK, NY 10029</td>
</tr>
<tr>
<td>(3) HARLEM VALLEY RAIL TRAIL ASSOCIATION INC</td>
<td>PO BOX 356 MILLERTON, NY 12546</td>
</tr>
<tr>
<td>(4) HARM REDUCTION COALITION</td>
<td>22 W 27TH ST FL 5 NEW YORK, NY 10001</td>
</tr>
<tr>
<td>(5) HARMONY SOUTH DAKOTA</td>
<td>2522 W 41ST ST # 125 SIOUX FALLS, SD 57105</td>
</tr>
<tr>
<td>(6) HARMONY UNITED METHODIST CHURCH</td>
<td>380 EAST COLONIAL HWY HAMILTON, VA 20158</td>
</tr>
<tr>
<td>(7) HAROLD GRINSPOON FOUNDATION</td>
<td>67 HUNT ST STE 100 AGAWAN, MA 001</td>
</tr>
<tr>
<td>(8) HARPETH HALL SCHOOL</td>
<td>3801 ROBB'S RD NASHVILLE, TN 37215</td>
</tr>
<tr>
<td>(9) HARPETH HILLS CHURCH OF CHRIST</td>
<td>1949 OLD HICKORY BLVD BRENTWOOD, TN 37027</td>
</tr>
<tr>
<td>(10) HARRIS-STONE UNIVERSITY</td>
<td>3026 LACLEDE AVENUE SAINT LOUIS, MO 63103-2</td>
</tr>
<tr>
<td>(11) HARRY AND ROSE SAMSON FAMILY JEWISH COMMUNITY</td>
<td>6255 SANTA MONICA BLVD MILWAUKEE, WI 5321</td>
</tr>
<tr>
<td>(12) HARRY CHAPIN FOOD BANK OF SOUTHWEST FLORIDA</td>
<td>3760 FOWLER ST FT MYERS, FL 33901</td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ...............................

Enter total number of other organizations listed in the line 1 table. ...............................

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

I

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

General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>C/O ISAAC HAGER 881 EASTERN PARKWAY BROOKLY</td>
<td>20-3437952</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>313 S MARKET ST WICHITA, KS 67202</td>
<td>48-0952990</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>134 FARMINGTON AVE HARTFORD, CT 6105</td>
<td>81-1546773</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>68 SPELMAN POINT RD EAST HAMPTON, CT 624</td>
<td>26-1223920</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>80 SEYMOUR ST HARTFORD, CT 6106</td>
<td>06-0646668</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>116 COTTAGE GROVE RD STE 202 BLOOMFIELD, CT</td>
<td>06-6102327</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>134 FARMINGTON AVE HARTFORD, CT 6105</td>
<td>06-0646669</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>166 CAPITOL AVE HARTFORD, CT 6106</td>
<td>06-0637319</td>
<td>501 (C) 3</td>
<td>21,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>411 CENTRAL AVE RM 107 SALINAS, CA 93901</td>
<td>94-2781664</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1 HARTWICK DR ONEONTA, NY 13820</td>
<td>15-0533561</td>
<td>501 (C) 3</td>
<td>14,255.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>36 SOUTH ST ROXBURY, CT 6783</td>
<td>04-6111721</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>35 W 44TH ST NEW YORK, NY 10036</td>
<td>13-6117421</td>
<td>501 (C) 3</td>
<td>44,358.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
<td>1. HARVARD GAY &amp; LESBIAN REVIEW INC</td>
<td>04-3267948</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. HARVARD STUDENT AGENCIES INC</td>
<td>04-2230366</td>
<td>501 (c) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. HARVARD UNION INC</td>
<td>81-3022935</td>
<td>501 (c) 3</td>
<td>45,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. HARVARD-EPWORTH UNITED METHODIST CHURCH</td>
<td>04-2137232</td>
<td>501 (c) 3</td>
<td>50,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. HARVARD-WESTLAKE SCHOOL</td>
<td>95-1644019</td>
<td>501 (c) 3</td>
<td>276,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. HARVEST COMMUNITY CHURCH</td>
<td>93-0933591</td>
<td>501 (c) 3</td>
<td>11,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. HARVEST EVANGELICAL FREE CHURCH</td>
<td>43-1722116</td>
<td>501 (c) 3</td>
<td>10,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. HARVEST FIELD CORNERS</td>
<td>61-1450604</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. HARVEST FOOD PANTRY INC</td>
<td>56-2534532</td>
<td>501 (c) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10. HARVEST HOPE FOOD BANK</td>
<td>57-0725560</td>
<td>501 (c) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. HARVEST PARTNERS INC</td>
<td>43-1857543</td>
<td>501 (c) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. HARVEST TABERNACLE OF SARASOTA INC</td>
<td>59-2186807</td>
<td>501 (c) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>2</td>
<td>HARVESTER CHRISTIAN CHURCH</td>
<td>43-1232569</td>
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<td>81-3261157</td>
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<td>HARVESTERS REACHING THE NATIONS INC</td>
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<td>HARVESTERS REACHING THE NATIONS INC</td>
<td>39-2017746</td>
<td>501 (c) 3</td>
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<td>6</td>
<td>HARVESTERS-THE COMMUNITY FOOD NETWORK</td>
<td>43-1208665</td>
<td>501 (c) 3</td>
<td>147,346</td>
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<td>HARVESTWOOD COVENANT PRESBYTERIAN CHURCH</td>
<td>54-1558142</td>
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<td>HARVEY BROWNE MEMORIAL PRESBYTERIAN CHURCH</td>
<td>61-0529829</td>
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<td>9</td>
<td>HARVEY MUDD COLLEGE</td>
<td>95-1911219</td>
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<td>220,400</td>
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<td>13-1740454</td>
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<td>FMV</td>
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<td>11</td>
<td>HARWICH CONSERVATION TR</td>
<td>04-6599166</td>
<td>501 (c) 3</td>
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<td>12</td>
<td>HASAGAH INC</td>
<td>45-3542842</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   ![Yes/No] Yes

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>HABSBARA FELLOWSHIPS INC 315 W 36TH ST NEW YORK, NY 10018</td>
<td>20-1651102</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV N/A</td>
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<tr>
<td>HASTINGS CENTER INC 21 MALCOLM GORDON RD GARRISON, NY 10524</td>
<td>13-2662222</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HASTINGS COLLEGE FOUNDATION 710 N TURNER AVE HASTINGS, NE 68901</td>
<td>51-0247972</td>
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<td>10,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HASTINGS EDUCATION FOUNDATION INC 1 MOUNT HOPE BLVD HASTINGS ON HUDSON, NY 10</td>
<td>13-3946644</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HATHAWAY BROWN SCHOOL 19600 N PARK BLVD SHAKER HEIGHTS, OH 44122</td>
<td>34-0714426</td>
<td>501 (C) 3</td>
<td>443,000.</td>
<td>FMV N/A</td>
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<tr>
<td>HATO REY PRESBYTERIAN CHURCH 134 ELEANOR ROOSEVELT HATO REY, PR 00918-310</td>
<td>66-0239811</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV N/A</td>
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<td>HATZOLAH EMERGENCY MEDICAL SERVICES INC PO BOX 256 LAKEWOOD, NJ 8701</td>
<td>22-3219824</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV N/A</td>
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<tr>
<td>HAVE JUSTICE-WILL TRAVEL INC 9580 VT ROUTE 113 VEREMSBURY, VT 5079</td>
<td>03-0358613</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV N/A</td>
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<tr>
<td>HAVEN PO BOX 752 ATZEMAN, MT 57771</td>
<td>81-0389914</td>
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<td>16,500.</td>
<td>FMV N/A</td>
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<tr>
<td>HAVEN AT FIRST &amp; MARKET INC 112 WEST MARKET ST CHARLOTTESVILLE, VA 2290</td>
<td>47-1841856</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV N/A</td>
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<tr>
<td>HAVEN HOUSE 121 WHITEHILLS DR EAST LANSING, MI 48823</td>
<td>38-2433890</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HAVEN OF GRACE 1225 WARREN ST SAINT LOUIS, MO 63106</td>
<td>43-1611181</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table**

3. **Enter total number of other organizations listed in the line 1 table**

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

JSA 0E1288 1.000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes ☒ No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>HAVEN OF HOPE</td>
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<td>N/A</td>
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<td>2</td>
<td>HAVEN OF REST MINISTRIES INCORPORATED</td>
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<td>FMV</td>
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<td>3</td>
<td>HAVEN PROJECT INC</td>
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<td>HAVEN SHELTER AND SERVICES INC</td>
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<td>5</td>
<td>HAVEN-VIOLENCE PREVENTION AND SUPPORT SERVINC</td>
<td>02-0337620</td>
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<td>HAWAIIAN ISLANDS LAND TRUST</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>401 SW GAGE BLVD TOPEKA, KS 66606</td>
<td>48-0608886</td>
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<td>1800 GLENWOOD AVE RALEIGH, NC 27608</td>
<td>56-0615207</td>
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<td>2209 FAIRVIEW RD RALEIGH, NC 27609</td>
<td>56-0566083</td>
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<td>17,587.</td>
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<tr>
<td>42 SEAVENRS AVE JAMAICA PLAIN, MA 2130</td>
<td>04-2586725</td>
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<td>1700 FORT BRAGG RD FAYETTEVILLE, NC 28303</td>
<td>56-0649255</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 518 DEER ISLE, ME 4627</td>
<td>01-0243548</td>
<td>501 (C) 3</td>
<td>5,745.</td>
<td>FMV</td>
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<td>PO BOX 779 HAYWARD, WI 54843</td>
<td>39-1596757</td>
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<td>297 HAYWOOD ST ASHEVILLE, NC 28801</td>
<td>46-5301549</td>
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<td>7,500.</td>
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<td>PO BOX 11 CENTER CITY, MN 55012</td>
<td>41-0682405</td>
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<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>116 JOHNSON RD FALLS VILLAGE, CT 6031</td>
<td>13-1623922</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>750 CROSS POINTE RD STE Q COLUMBUS, OH 4323</td>
<td>20-2929264</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<tr>
<td>19 E CHICAGO AVE HINSDALE, IL 60521</td>
<td>36-2174821</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

Schedule I (Form 990) 2020
**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>HE CARES 3118 KIOWA CT INDIANAPOLIS, IN 46235</td>
<td>81-5236718</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEAD FOR THE CURE 1607 OK ST KANSAS CITY, MO 64108</td>
<td>20-8345719</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEAD OF THE LAKES UNITED WAY 424 W SUPERIOR ST STE 402 DULUTH, MN 55802</td>
<td>41-0857077</td>
<td>501 (C) 3</td>
<td>19,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEAD STRONG PROJECT INC 22 CHARLES ST WEST HAVEN, CT 6516</td>
<td>45-5261907</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HEADING HOME INC 529 MAIN ST CHARLESTOWN, MA 2129</td>
<td>23-7364546</td>
<td>501 (C) 3</td>
<td>14,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEADLANDS CENTER FOR THE ARTS 944 FORT BARRY SAUSALITO, CA 94965</td>
<td>94-2817843</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HEADLONG DANCE THEATER 1170 S BROAD ST PHILADELPHIA, PA 19146</td>
<td>23-2803557</td>
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<td>16,250</td>
<td>FMV</td>
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<td>HEADREST INC 14 CHURCH ST LEBANON, NH 3766</td>
<td>23-7256865</td>
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<tr>
<td>HEAD-ROYCE SCHOOL 4315 LINCOLN AVE OAKLAND, CA 94602</td>
<td>94-1518656</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>HEADWATERS RAPPAHANNOCK COUNTY PUBLIC EDUCATION OFFICE PO BOX 368 WASHINGTON, VA 22747</td>
<td>54-1844267</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HEAL CHILD SKIN DISEASE FOUNDATION 1574 HILLGRADE AVE ALAMO, CA 94507</td>
<td>46-1250078</td>
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<td>350,000</td>
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<tr>
<td>HEAL HOUSE OF IOWA 16727 HARDING ST INDIANOLA, IA 50125</td>
<td>30-1067087</td>
<td>501 (C) 3</td>
<td>21,393</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) HEAL INC</td>
<td>43995 COBHAM CT ASHBURN, VA 20147</td>
<td>26-2946288</td>
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<tr>
<td>(2) HEAL THE BAY</td>
<td>1444 9TH ST SANTA MONICA, CA 90401</td>
<td>95-4031055</td>
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<td>32,500.</td>
<td>FMV</td>
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<td>(3) HEAL TRAFFICKING INC</td>
<td>PO BOX 31602 LOS ANGELES, CA 90031</td>
<td>47-3969303</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) HEALDSBURG JAZZ FESTIVAL INC</td>
<td>PO BOX 266 HEALDSBURG, CA 95448</td>
<td>71-0910474</td>
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<td>28,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) HEALING &amp; INTERCESSORY PRAYER MINISTRIES</td>
<td>15246 BARNWALL ST LA MIRADA, CA 90638</td>
<td>95-4766850</td>
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<td>30,000.</td>
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<td>(6) HEALING GROVE HEALTH CENTER FOUNDATION INC</td>
<td>448 GOODYEAR ST SAN JOSE, CA 95110</td>
<td>84-4620762</td>
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<td>38,340.</td>
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<td>(7) HEALING HAITI</td>
<td>2629 S SHORE BLVD SAINT PAUL, MN 55110</td>
<td>20-5874563</td>
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<td>7,500.</td>
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<td>463 NORTHSIDE RD ELIVERSON, PA 19520</td>
<td>80-0658463</td>
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<td>20-1877757</td>
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<td>13,500.</td>
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<td>(10) HEALING PLACE INC</td>
<td>1020 W MARKET ST LOUISVILLE, KY 40202</td>
<td>61-1164775</td>
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<td>52,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) HEALING TRANSITIONS INTERNATIONAL INC</td>
<td>1251 GOODE ST RALEIGH, NC 27603</td>
<td>56-2135246</td>
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<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) HEALTH ALLIANCE FOR AUSTIN MUSICIANS</td>
<td>PO BOX 301496 AUSTIN, TX 78703</td>
<td>80-0147620</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..............................................................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................................

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

Schedule I (Form 990) 2020

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JSA
0E1288 1,000

18674H 1467 V 20-7.21
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>3</td>
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<td>8</td>
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<td>12</td>
<td>HEALTHY CITIES TUTORING INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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### SCHEDULE I
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**Part I**  
General Information on Grants and Assistance

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   - Yes  
   - No

   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>HEALTHY LIFESTARS</td>
<td>1645 E MISSOURI AVE STE 330 PHOENIX, AZ 850</td>
<td>47-0916068</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>HEALTHY LIVING INC</td>
<td>3900 TUNLAW RD NW APT 314 WASHINGTON, DC 20</td>
<td>16-1664493</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>HEALTHY NEWSWORKS</td>
<td>PO BOX 431 PILGRIM GARDENS, PA 19026</td>
<td>81-4668072</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>HEAR WISCONSIN INC</td>
<td>10243 W NATIONAL AVE MILWAUKEE, WI 53227</td>
<td>39-0826101</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>HEARD MUSEUM</td>
<td>2301 N CENTRAL AVE PHOENIX, AZ 8504</td>
<td>86-0107517</td>
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<td>60,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>HEARING AND SPEECH CENTER OF NORTHERN CALIF</td>
<td>1234 DIVISADERO ST SAN FRANCISCO, CA 94115</td>
<td>94-1322198</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>7</td>
<td>HEARING LOSS ASSOCIATION OF AMERICA INC</td>
<td>6116 EXECUTIVE BLVD STE 320 ROCKVILLE, MD 2</td>
<td>52-1177011</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>HEART ESSENCE SANGHA INC</td>
<td>460 ST MICHAELS DR STE 703 SANTA FE, NM 875</td>
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<td>8,500.</td>
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<tr>
<td>9</td>
<td>HEART FOR LEBANON FOUNDATION</td>
<td>PO BOX 1294 BLACK MOUNTAIN, NC 28711</td>
<td>26-0354460</td>
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<td>166,600.</td>
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<td>10</td>
<td>HEART GALLERY OF ALABAMA INC</td>
<td>3100 INDEPENDENCE DR STE 200 BIRMINGHAM, AL</td>
<td>20-3026109</td>
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<td>11</td>
<td>HEART HAVENS INC</td>
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<td>54-1823934</td>
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<td>FMV</td>
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<tr>
<td>12</td>
<td>HEART MINISTRIES INC</td>
<td>PO BOX 390 WEST POINT, VA 23181</td>
<td>27-3090782</td>
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<td>27,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>X</td>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<tr>
<td>PO BOX 2068 HUTCHINSON, KS 67504</td>
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<tr>
<td>(2) HEART OF A CHAMPION</td>
<td>75-2721125</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 92790 SOUTHLAKE, TX 76092</td>
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<tr>
<td>(3) HEART OF FLORIDA UNITED WAY</td>
<td>59-0808854</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1940 CANNERY WAY PL ORLANDO, FL 32804</td>
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<tr>
<td>(4) HEART OF GOD MINISTRIES LTD</td>
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<td>501 (c) 3</td>
<td>29,920.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3720 S HINASSEE RD CHOTOM, OK 73020</td>
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<tr>
<td>PO BOX 110 BELVILL, TX 77418</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>213 CRICKET AVE ARDMORE, PA 19003</td>
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<td>38-1360923</td>
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<td>FMV</td>
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<td>118 COMMERCE AVE SW GRAND RAPIDS, MI 49503</td>
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<td>(9) HEART TO HEART INTERNATIONAL INC</td>
<td>48-1108359</td>
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<td>81,000.</td>
<td>FMV</td>
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<td>11550 RENNER BLVD LEXENA, KS 66219</td>
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<td>23-7355592</td>
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<td>127,500.</td>
<td>FMV</td>
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<td>(12) HEARTBEAT OPERA LTD</td>
<td>47-4122815</td>
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<td>57,000.</td>
<td>FMV</td>
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### Notes
1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
2. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HEARTBRIGHT FOUNDATION 2101 CAMBRIDGE BELTWAY DR STE C CHARLOTTE,</td>
<td>45-0496759</td>
<td>501 (C) 3</td>
<td>12,450</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>HEARTFELT CARDIAC CONNECTIONS 1278 GLENNEYRE ST LAGUNA BEACH, CA 92651</td>
<td>82-1469017</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>HEARTLAND ALLIANCE FOR HUMAN NEEDS &amp; HUMAN 208 S LASALLE ST CHICAGO, IL 60604</td>
<td>36-1877640</td>
<td>501 (C) 3</td>
<td>43,550</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>HEARTLAND FARM SANCTUARY INC PO BOX 45746 MADISON, WI 53744</td>
<td>27-0244485</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>HEARTLAND INITIATIVE INC PO BOX 369 MICHIGAN CITY, IN 46361</td>
<td>47-1138215</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HEARTLAND INSTITUTE 3939 N WILKE RD ARLINGTON HEIGHTS, IL 60004</td>
<td>36-3309812</td>
<td>501 (C) 3</td>
<td>256,500</td>
<td>FMV</td>
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<td>7</td>
<td>HEARTLAND PRESBYTERIAN CENTER OF PARKVILLE 16965 NW HIGHWAY 45 KANSAS CITY, MO 64152</td>
<td>47-3113563</td>
<td>501 (C) 3</td>
<td>32,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>HEARTLIGHT MINISTRIES FOUNDATION PO BOX 480 HALSVILLE, TX 75650</td>
<td>20-3179800</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>HEARTLINE MINISTRIES 910 FRANKLIN AVE STE 3 SUNNYSIDE, WA 98944</td>
<td>91-2072330</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>HEARTS &amp; CRAFTS COUNSELING INC 442 BROADWAY HILLSDALE, NJ 7642</td>
<td>20-0956381</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>HEARTS CRY CHILDRENS MINISTRY 3505 LUBBOCK DR RALEIGH, NC 27612</td>
<td>26-3138306</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>HEARTS FOR THE HOMELESS OF WESTERN NEW YORK 890 TONAWANDA ST BUFFALO, NY 14207</td>
<td>22-3245314</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>HEART-TO-HEART COMIENZOS EAST INC</td>
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<td>2</td>
<td>HEAT OREGON</td>
<td>93-1029993</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>HEBREW ACADEMY OF CLEVELAND</td>
<td>34-0714428</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>4</td>
<td>HEBREW AT THE CENTER INC</td>
<td>39-2076615</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>HEBREW CONGREGATION OF NORTH TARRYTOWN &amp; TA</td>
<td>13-1869806</td>
<td>501 (C) 3</td>
<td>11,980.</td>
<td>FMV</td>
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<td>6</td>
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<td>7</td>
<td>HEBREW HIGH SCHOOL OF NEW ENGLAND INC</td>
<td>06-1455973</td>
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<td>8</td>
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<td>20-4352212</td>
<td>501 (C) 3</td>
<td>123,750.</td>
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<td>9</td>
<td>HEBREW HOME OF GREATER WASHINGTON INC</td>
<td>3-3198506</td>
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<td>123,750.</td>
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<td>90-0183119</td>
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<td>6,000.</td>
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<td>HEBREW UNION COLLEGE-JEWISH INSTITUTE OF RE</td>
<td>31-0537067</td>
<td>501 (C) 3</td>
<td>123,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12</td>
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<td>123,750.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..............................................................................................................................

3. Enter total number of other organizations listed in the line 1 table: ..............................................................................................................................

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>54-1123345</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 1099 MADISON, VA 22727</td>
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<td>HEDGE FUNDS CARE INC</td>
<td>43-1959796</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>HEICHAL HATORAH</td>
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<td>35,000.</td>
<td>FMV</td>
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<td>HEIDELBERG UNIVERSITY</td>
<td>34-4428219</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>HEIDELBERG UNIVERSITY ASSOCIATION INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>57,500.</td>
<td>FMV</td>
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<td>HEIFER PROJECT INTERNATIONAL</td>
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<td>447,846.</td>
<td>FMV</td>
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<td>1 WORLD AVE LITTLE ROCK, AR 72202</td>
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<tr>
<td>HEIGHS FOUNDATION INC</td>
<td>65-1003872</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15570 HAGIE DR FORT MYERS, FL 33908</td>
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<tr>
<td>HELEN DAY ART CENTER INC</td>
<td>03-0284825</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 411 STOWE, VT 5672</td>
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<tr>
<td>HELEN KELLER INTERNATIONAL</td>
<td>13-5562162</td>
<td>501 (C) 3</td>
<td>249,982.</td>
<td>FMV</td>
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<tr>
<td>1 DAG HAMMARSKJOLD PLZ FL 2 NEW YORK, NY 10017</td>
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<td>HELLENIC COLLEGE INC</td>
<td>04-2218946</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>50 GODDARD AVE BROOKLINE, MA 2445</td>
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<td>HELLENIC ORTHODOX COMMUNITY OF DENVER</td>
<td>84-0520100</td>
<td>501 (C) 3</td>
<td>15,387.</td>
<td>FMV</td>
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<tr>
<td>4610 EAST ALAMEDA AVENUE DENVER, CO 80246</td>
<td></td>
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</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</thead>
<tbody>
<tr>
<td>(1)</td>
<td>HELLENIC-AMERICAN CULTURAL FOUNDATION</td>
<td>27-3629259</td>
<td>501 (C) 3</td>
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<td>(2)</td>
<td>HELMS HOPE FOUNDATION</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(3)</td>
<td>HELP A NEIGHBOR INC</td>
<td>26-0249582</td>
<td>501 (C) 3</td>
<td>8,800.</td>
<td>FMV</td>
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<td>(4)</td>
<td>HELP AND EMERGENCY RESPONSE INC</td>
<td>52-1349827</td>
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<td>(5)</td>
<td>HELP FOR THE HURTING</td>
<td>26-2558270</td>
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<td>(6)</td>
<td>HELP FROM PEOPLE TO PEOPLE INC</td>
<td>13-3567993</td>
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<td>(7)</td>
<td>HELP OF BEAUFORT</td>
<td>57-0721545</td>
<td>501 (C) 3</td>
<td>6,806.</td>
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<tr>
<td>(8)</td>
<td>HELP OF DOOR COUNTY INC</td>
<td>39-1331181</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9)</td>
<td>HELP ONE CHILD MISSION TO CHILDREN AT RISK</td>
<td>77-0330145</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(10)</td>
<td>HELP OUR WORLD ONE ON ONE</td>
<td>27-0235851</td>
<td>501 (C) 3</td>
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<td>(11)</td>
<td>HELP OUR WOUNDED FOUNDATION</td>
<td>46-3568088</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(12)</td>
<td>HELP THE PERSECUTED INC</td>
<td>83-1799054</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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Enter total number of other organizations listed in the line 1 table.

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**Part I General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes
   - No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments**

<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
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<tr>
<td>HELPHOPELIVE INC</td>
<td>52-1322317</td>
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<tr>
<td>R 2 RADNOR CRP CTR 100 MATSONFORD RD RADNOR,</td>
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<tr>
<td>HELPING CHILDREN WORLDWIDE INC</td>
<td>14101 PARKS LONG CT STE T CHANTILLY, VA 201</td>
<td>501 (C) 3</td>
<td>41,994.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HAND FOR RELIEF &amp; DEVELOPMENT INC</td>
<td>21199 HILLTOP ST SOUTHFIELD, MI 48033</td>
<td>501 (C) 3</td>
<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HAND FOR CHILDREN</td>
<td>3804 AVENUE B AUSTIN, TX 78751</td>
<td>501 (C) 3</td>
<td>133,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HANDS FOR SINGLE MOMS DALLAS</td>
<td>1900 PRESTON RD STE 267 # 73 PLANO, TX 7509</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HANDS MINISTRIES INC</td>
<td>PO BOX 337 TALLULAH FALLS, GA 30573</td>
<td>501 (C) 3</td>
<td>155,868.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HANDS OF GEORGETOWN</td>
<td>1813 HIGHMARKET ST GEORGETOWN, SC 29440</td>
<td>501 (C) 3</td>
<td>34,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HANDS OF SPRINGFIELD INC</td>
<td>1023 E WASHINGTON ST SPRINGFIELD, IL 62703</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING HANDS SIMIAN AIDS FOR THE DISABLED</td>
<td>541 CAMBRIDGE ST ALLSTON, MA 2134</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>HELPING ISRAEL FUND INC</td>
<td>20 CHALMERS RD EAST BRUNSWICK, NJ 8816</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>HELPING PAWS OF MINNESOTA INC</td>
<td>630 12TH AVE S HOPKINS, MN 55343</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HELPING RESTORE ABILITY</td>
<td>4300 BELMAY PL STE 130 ARLINGTON, TX 76018</td>
<td>501 (C) 3</td>
<td>200,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
</tbody>
</table>

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3. **Enter total number of other organizations listed in the line 1 table.**
Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (e) Amount of non-cash assistance</th>
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<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>HELPING UP MISSION INCORPORATED</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>HELPLINE HOUSE</td>
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<td>HELPUSADOPT ORG INC</td>
<td>20-8823606</td>
<td>501 (c) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REMLOCK SOCIETY OF SAN DIEGO INC</td>
<td>33-0467982</td>
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<td>FMV</td>
<td>N/A</td>
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<td>HENDERSON CHRISTIAN COMMUNITY OUTREACH INC</td>
<td>61-1109652</td>
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<td>N/A</td>
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<td>HENDRICK SCHOLARSHIP FOUNDATION</td>
<td>75-2376396</td>
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<td>HENNEPIN HEALTH FOUNDATION</td>
<td>41-0845733</td>
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<td>FMV</td>
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<td>HENNEPIN UNITED METHODIST CHURCH</td>
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<td>HENRICO EDUCATION FOUNDATION INCORPORATED</td>
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<td>HENRY E HUNTINGTON LIBRARY &amp; ART GALLERY</td>
<td>95-1644589</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>HENRY FORD HEALTH SYSTEM</td>
<td>38-1357020</td>
<td>501 (c) 3</td>
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<td>N/A</td>
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<td>HENRY FRANCIS DU PONT WINTERTHUR MUSEUM INC</td>
<td>51-0066038</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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| 3 Enter total number of other organizations listed in the line 1 table. | | | | | | | |

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   - Yes  
   - No  

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<tbody>
<tr>
<td>(1) HENRY JACKSON SOCIETY INC</td>
<td>244 5TH AVE # D-260 NEW YORK, NY 10001</td>
<td>11-6190785</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) HENRY L FERGUSON MUSEUM</td>
<td>187 WILLIAMS ST NEW LONDON, CT 6320</td>
<td>11-6015380</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) HENRY STREET SETTLEMENT</td>
<td>265 HENRY ST NEW YORK, NY 10002</td>
<td>13-1562242</td>
<td>501 (C) 3</td>
<td>830,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) HERBERT H LEHMAN COLLEGE FOUNDATION INC</td>
<td>250 BEDFORD PARK BLVD W BRONX, NY 10468</td>
<td>13-3150922</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) HERITAGE BAPTIST CHURCH OF THE GREATER HUNT</td>
<td>16 WOODLAND TER HIGH BRIDGE, NJ 8829</td>
<td>13-3032201</td>
<td>501 (C) 3</td>
<td>12,215.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) HERITAGE CLASSIC FOUNDATION</td>
<td>PO BOX 3 HILTON HEAD ISLAND, SC 29938</td>
<td>57-0835114</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) HERITAGE CONSERVANCY</td>
<td>85 OLD DUBLIN FIKE DOYLESTOWN, PA 18901</td>
<td>23-6296515</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) HERITAGE FOUNDATION</td>
<td>214 MASSACHUSETTS AVE NE WASHINGTON, DC 200</td>
<td>23-7327730</td>
<td>501 (C) 3</td>
<td>841,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) HERITAGE FUND OF BARTHOLOMEW COUNTY INC</td>
<td>538 FRANKLIN ST COLUMBUS, IN 47201</td>
<td>35-1343903</td>
<td>501 (C) 3</td>
<td>101,500.</td>
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<td>N/A</td>
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<td>(10) HERITAGE UNIVERSITY</td>
<td>3240 FORT RD TOPPENISH, WA 98948</td>
<td>91-1160585</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) HERMAN AVENUE ELEMENTARY SCHOOL PARENT TEAC</td>
<td>2 N HERMAN AVE AUBURN, NY 13021</td>
<td>16-1338957</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) HERMANN PARK CONSERVANCY</td>
<td>1700 HERMANN DR HOUSTON, TX 77004</td>
<td>76-0327389</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>HERMITAGE CHURCH OF THE NAZARENE</td>
<td>4151 SAUNDERSVILLE ROAD OLD HICKORY, TN 371</td>
<td>62-1067467</td>
<td>501 (C) 3</td>
<td>21,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HERO DOGS INC</td>
<td>PO BOX 64 BROOKEVILLE, MD 20833</td>
<td>27-0887317</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEROES INC</td>
<td>1200 29TH ST NW WASHINGTON, DC 20007</td>
<td>52-6057916</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HEROIC HEARTS PROJECT INC</td>
<td>PO BOX 3000 HESSTON, KS 67062</td>
<td>44-0548361</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HERZL-NER TAMID CONSERVATIVE CONGREGATION</td>
<td>PO BOX 574 MERCER ISLAND, WA 98040</td>
<td>91-0254210</td>
<td>501 (C) 3</td>
<td>49,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HESSTON COLLEGE</td>
<td>PO BOX 3000 HESSTON, KS 67062</td>
<td>48-0894844</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HETERODOX ACADEMY</td>
<td>82 NASSAU STREET 646 NEW YORK, NY 10038</td>
<td>82-2903153</td>
<td>501 (C) 3</td>
<td>280,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HETRICK-MARTIN INSTITUTE INC</td>
<td>2 ASTOR PL # 801 NEW YORK, NY 10003</td>
<td>13-3104537</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - **Yes**
   - **No**

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2.</td>
<td>HIGHWATER CONGREGATIONAL UNITED CHURCH OF C</td>
<td>STEWARDSHIP AND FINANCE 1213 DUTCHE</td>
<td>31-1223803</td>
<td>501 (c) 3</td>
<td>6,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3.</td>
<td>HIGHWAY 82 CHURCH OF CHRIST</td>
<td>413 E LEE BLVD STARKVILLE, MS 39759</td>
<td>64-0725187</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4.</td>
<td>HIGHWAY COMMUNITY</td>
<td>201 CASTRO ST STE 1 MOUNTAIN VIEW, CA 94041</td>
<td>77-0535709</td>
<td>501 (c) 3</td>
<td>47,970.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5.</td>
<td>HI-HOPE SERVICE CENTER INC</td>
<td>882 HI HOPE RD LAWRENCEVILLE, GA 30043</td>
<td>58-1354523</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6.</td>
<td>HILARY GRACE FOUNDATION INC</td>
<td>PO BOX 553 EAST AMHERST, NY 14051</td>
<td>82-4869269</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7.</td>
<td>HILL COUNTRY BIBLE CHURCH</td>
<td>12124 RR 620 N AUSTIN, TX 78750</td>
<td>74-2389215</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>HILL COUNTRY BIBLE CHURCH OF GEORGETOWN</td>
<td>600 STADIUM DR GEORGETOWN, TX 78626</td>
<td>74-2779721</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>HILL COUNTRY DAILY BREAD</td>
<td>38 CASCADE CAVERNS RD BOERNE, TX 78015</td>
<td>30-0148195</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>HILL COUNTRY FAMILY SERVICES INC</td>
<td>118 W ADVOG ST BOERNE, TX 78015</td>
<td>74-2425029</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11.</td>
<td>HILL COUNTRY YOUTH RANCH</td>
<td>3522 JUNCTION HWY INGRAM, TX 78025</td>
<td>74-1907867</td>
<td>501 (c) 3</td>
<td>98,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>HILL SCHOOL CORPORATION OF MIDDLEBURG</td>
<td>PO BOX 65 MIDDLEBURG, VA 20118</td>
<td>54-1938041</td>
<td>501 (c) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   [ ] Yes  
   [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of non-cash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HILLBROOK SCHOOL</td>
<td>300 MARCHMONT DR LOS GATOS, CA 95032</td>
<td>94-0382325</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>388 N PLEASANT ST APT 15 AMHERST, DC 20001</td>
<td>04-3110103</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>52 MOUNT AUBURN ST CAMBRIDGE, MD 20740</td>
<td>04-2620801</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>70 COLLEGE AVE NEW BRUNSWICK, IN 47401</td>
<td>26-0177367</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>548 COLLEGE AVE ITHACA, OH 45701</td>
<td>16-6068463</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>215 S 39TH ST PHILADELPHIA, NJ 8901</td>
<td>81-3187116</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>800 8TH ST NW WASHINGTON, MA 2138</td>
<td>52-1844823</td>
<td>501 (C) 3</td>
<td>210,690.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIF</td>
<td>7612 MONATT LN COLLEGE PARK, MA 1002</td>
<td>52-0749507</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **[X] Yes [ ] No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Hillel the Foundation for Jewish Campus Lif</td>
<td>52-1758797</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) Hillel the Foundation for Jewish Campus Lif</td>
<td>20-2804389</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(3) Hillel the Foundation for Jewish Campus Lif</td>
<td>91-6067231</td>
<td>501 (C) 3</td>
<td>5,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) Hillel Torah North Suburban Day School</td>
<td>36-2436314</td>
<td>501 (C) 3</td>
<td>5,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) Hillsborough Beautification Foundation</td>
<td>91-1883931</td>
<td>501 (C) 3</td>
<td>6,700</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) Hillsborough Schools Foundation</td>
<td>94-2634550</td>
<td>501 (C) 3</td>
<td>52,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) Hillsdale College</td>
<td>38-1374230</td>
<td>501 (C) 3</td>
<td>838,450</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) Hillsdale Bible Church</td>
<td>93-0712840</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) Hillside Childrens Foundation</td>
<td>16-1493404</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) Hillside Church of Marin</td>
<td>94-1644619</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) Hillside Community Church</td>
<td>38-6169819</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) Hillside Covenant Church Walnut Creek CA</td>
<td>94-1564826</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HILLSIDE FELLOWSHIP 7055 US HIGHWAY 281 N SPRING BRANCH, TX 780</td>
<td>74-2743426</td>
<td>501 (C) 3</td>
<td>45,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLSIDE UNITED METHODIST CHURCH 4474 TOWNE LAKE PKWY WOODSTOCK, GA 30189</td>
<td>58-1547677</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLSIDES 940 AVENUE 64 PASADENA, CA 91105</td>
<td>95-1644002</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLTOWN BAPTIST CHURCH PO BOX 1 HILLTOWN, PA 18927</td>
<td>23-1501166</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILLWOOD ESTATE MUSEUM &amp; GARDENS 4155 LINNEAN AVE NW WASHINGTON, DC 20008</td>
<td>52-6080752</td>
<td>501 (C) 3</td>
<td>67,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILG BAPTIST CHURCH PO BOX 6879 HILO, HI 96720</td>
<td>99-0206307</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILTON HEAD ISLAND DEEP WELL PROJECT PO BOX 5543 HILTON HEAD ISLAND, SC 29938</td>
<td>57-0566098</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HILTON PRESBYTERIAN CHURCH 34 MAIN STREET NEWPORT NEWS, VA 23601</td>
<td>54-0718857</td>
<td>501 (C) 3</td>
<td>23,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HIMALAYAN CATARACT PROJECT INC PO BOX 55 WATERBURY, VT 06776</td>
<td>03-0362926</td>
<td>501 (C) 3</td>
<td>240,651.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HINDU AMERICAN FOUNDATION 910 17TH ST NW STE 316A WASHINGTON, DC 20001</td>
<td>68-0551525</td>
<td>501 (C) 3</td>
<td>20,505.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HINDU COMMUNITY AND CULTURAL CENTER 1231 ARROWHEAD AVE LIVERMORE, CA 94551</td>
<td>94-2427126</td>
<td>501 (C) 3</td>
<td>8,502.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HINDU SOCIETY OF BRAZOS VALLEY 23300 STATE HIGHWAY 6 S NAVASOTA, TX 77868</td>
<td>74-2613823</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HINDU SOCIETY OF MINNESOTA</td>
<td>41-1345301</td>
<td>501 (C) 3</td>
<td>12,920.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>HINDU TEMPLE AND CULTURAL CENTER</td>
<td>94-3087412</td>
<td>501 (C) 3</td>
<td>5,012.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HINDU TEMPLE OF CENTRAL INDIANA INC</td>
<td>35-2092107</td>
<td>501 (C) 3</td>
<td>13,519.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HINDU TEMPLE OF NORTH TEXAS INC</td>
<td>20-4026895</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HINDU TEMPLE OF SOUTHWEST FLORIDA INC</td>
<td>05-0536510</td>
<td>501 (C) 3</td>
<td>10,964.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>HINDU TEMPLE OF TRI-STATE INC</td>
<td>26-4265251</td>
<td>501 (C) 3</td>
<td>110,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>HINDU TEMPLE SOCIETY OF NA</td>
<td>23-7071891</td>
<td>501 (C) 3</td>
<td>5,001.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>HINDUS FOR HUMAN RIGHTS INC</td>
<td>36-4952444</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>HINGHAM CONGREGATIONAL CHURCH - HINGHAM, MA</td>
<td>04-2283093</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>HINSDALE HUMANE SOCIETY</td>
<td>36-2441177</td>
<td>501 (C) 3</td>
<td>51,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>HINSDALE JUNIOR WOMENS CLUB CHARITABLE FOUN</td>
<td>36-4295729</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>HIRSBERG FOUNDATION FOR PANCREATIC CANCER</td>
<td>95-4640311</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes []
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HIS GRACE FOUNDATION</td>
<td>20-0585227</td>
<td>501 (C) 3</td>
<td>5,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2</td>
<td>HIS HANDS ON AFRICA INC</td>
<td>81-1354444</td>
<td>501 (C) 3</td>
<td>6,015.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>HISPANIC ACCESS FOUNDATION</td>
<td>27-2589206</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>HISPANIC FEDERATION INC</td>
<td>13-3573852</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>HISPANIC HERITAGE FOUNDATION</td>
<td>52-1818255</td>
<td>501 (C) 3</td>
<td>1,003,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HISPANIC INTEREST COALITION OF ALABAMA</td>
<td>63-1225764</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>HISPANIC RESOURCE CENTER OF LARCHMONT MANHAS</td>
<td>31-1678682</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>HISPANIC SCHOLARSHIP FUND</td>
<td>52-1051044</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>HISTIOCYTOSIS ASSOCIATION INC</td>
<td>22-2827069</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>HISTORIC COLONY HOUSE INC</td>
<td>90-1011387</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>HISTORIC DEERFIELD INC</td>
<td>04-2262880</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>HISTORIC FAIR HILL INC</td>
<td>23-2724914</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

---

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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</tr>
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<tbody>
<tr>
<td>1</td>
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</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>-------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>(1) HISTORIC HIGHLFIELD INC</td>
<td>56 HIGHFIELD DR FALMOUTH, MA 2540</td>
</tr>
<tr>
<td>(2) HISTORIC MORVEN INC</td>
<td>55 STOCKTON ST PRINCETON, NJ 8540</td>
</tr>
<tr>
<td>(3) HISTORIC ORGAN RESTORATION COMMITTEE INC</td>
<td>2301 BOARDWALK ATLANTIC CITY, NJ 8401</td>
</tr>
<tr>
<td>(4) HISTORIC RUGBY INC</td>
<td>800 S GAY ST KNOXVILLE, TN 37929</td>
</tr>
<tr>
<td>(5) HISTORIC RUSSELLVILLE INC</td>
<td>PO BOX 116 RUSSELLVILLE, KY 42276</td>
</tr>
<tr>
<td>(6) HISTORICAL SOCIETY OF PENNSYLVANIA</td>
<td>1300 LOCUST ST PHILADELPHIA, PA 19107</td>
</tr>
<tr>
<td>(7) HISTORICAL SOCIETY OF THE TOWN OF HANCOCK M</td>
<td>PO BOX 212 HANCOCK, ME 4640</td>
</tr>
<tr>
<td>(8) HISTORICAL SOCIETY OF THE TOWN OF WARWICK</td>
<td>PO BOX 353 WARWICK, NY 10990</td>
</tr>
<tr>
<td>(9) HISTORICAL SOCIETY OF WESTERN VIRGINIA</td>
<td>PO BOX 1904 ROANOKE, VA 24008</td>
</tr>
<tr>
<td>(10) HITCHCOCK CENTER FOR THE ENVIRONMENT INC</td>
<td>845 WEST ST AMHERST, MA 1002</td>
</tr>
<tr>
<td>(11) HINNESSE COLLEGE INC</td>
<td>PO BOX 850 ALCOA, TN 37701</td>
</tr>
<tr>
<td>(12) HMS SCHOOL FOR CHILDREN WITH CEREBRAL PALSY</td>
<td>4400 BALTIMORE AVE PHILADELPHIA, PA 19104</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>(1) 330 Placentia Ave Newport Beach, CA 92663</td>
<td>95-3222343</td>
<td>501 (C) 3</td>
<td>150,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) 300 Pulsetney St Geneva, NY 14456</td>
<td>16-07343040</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) PO Box 511 Hobesound, FL 33455 Hobesound,</td>
<td>59-6155092</td>
<td>501 (C) 3</td>
<td>121,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) 29 Naek Rd Ste 5A Vernon Rockville, CT 6066</td>
<td>06-0864311</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) PO Box 1085 Saint Paul, MN 55110</td>
<td>41-1374955</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) 1299 4th St PH 600 San Rafael, CA 94901</td>
<td>33-0627187</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) 128 Hofstra UniversityPhillips Hall Hempstead</td>
<td>11-1630906</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) 2001 Melaws Rd Holbrook, AZ 85025</td>
<td>86-0137280</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) 9500 Sperry Rd Willoughby, OH 44094</td>
<td>34-0750346</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) 555 Long Wharf Dr New Haven, CT 6511</td>
<td>06-1157655</td>
<td>501 (C) 3</td>
<td>51,860.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) 2100 Raybrook St Se Ste 300 Grand Rapids, M</td>
<td>38-1366927</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) 6363 Spring Mill Rd Indianapolis, IN 46220</td>
<td>35-1816648</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   Yes [ ] No [x]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>HOLLINS UNIVERSITY CORPORATION PO BOX 9658 ROANOKE, VA 24020</td>
<td>54-0506314</td>
<td>501 (C) 3</td>
<td>64,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLLY Club of Sea Girt PO BOX 84 SEA GIRT, NJ 07550</td>
<td>83-3772926</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLLIS HOUSE INC PO BOX 4125 EVANSVILLE, IN 47724</td>
<td>20-4475135</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLLYWOOD FOOD COALITION 912 S LONGWOOD AVE LOS ANGELES, CA 90019</td>
<td>46-4079214</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLMES COMMUNITY COLLEGE DEVELOPMENT FOUNDATION PO BOX 527 GOODMAN, MS 39079</td>
<td>23-7419273</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLOCAUST CENTER FOR HUMANITY 2045 2ND AVE SEATTLE, WA 98121</td>
<td>91-1464233</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLOCAUST MEMORIAL CENTER 28123 ORCHARD LAKE RD FARMINGTON HILLS, MI</td>
<td>38-2402635</td>
<td>501 (C) 3</td>
<td>6,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLOCAUST MEMORIAL FOUNDATION OF ILLINOIS I 9603 WOODS DR SROKIE, IL 60077</td>
<td>36-3156154</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HOLOCAUST MUSEUM &amp; EDUCATION CENTER OF SWFL 975 IMPERIAL GOLF COURSE BLVD NAPLES, FL 34</td>
<td>59-3740883</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>HOLOENERGETIC HEALING FOUNDATION 2305 ASHLAND ST STE C # 230 ASHLAND, OR 9755</td>
<td>45-2213536</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>HOLSTON UNITED METHODIST HOME FOR CHILDREN 404 HOLSTON DR GREENEVILLE, TN 37743</td>
<td>62-051553</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Holt International Childrens Services Inc 250 COUNTRY CLUB RD EUGENE, OR 97401</td>
<td>23-7257390</td>
<td>501 (C) 3</td>
<td>116,073.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

   18674  

3. Enter total number of other organizations listed in the line 1 table:  

   1467  

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   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>(1) HOLTON-ARMS SCHOOL INC</td>
<td>7303 RIVER RD BETHESDA, MD 20817</td>
<td>53-0196507</td>
<td>501 (C) 3</td>
<td>38,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(2) HOLUALOA FOUNDATION FOR ARTS AND CULTURE</td>
<td>78-6670 MAMALAHOA HWY HOLUALOA, HI 96725</td>
<td>99-0317895</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(3) HOLY ANGELS FOUNDATION INC</td>
<td>PO BOX 710 BELMONT, NC 28012</td>
<td>56-1762654</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(4) HOLY ANGELS INC</td>
<td>6600 W WILKINSON BLVD BELMONT, NC 28012</td>
<td>51-0230406</td>
<td>501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(5) HOLY CHILD SCHOOL AT ROSEMONT</td>
<td>1344 MONTGOMERY AVE BRYN MAWR, PA 19010</td>
<td>23-1887550</td>
<td>501 (C) 3</td>
<td>480,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(6) HOLY COMPATORE CATHOLIC CHURCH</td>
<td>208 E JEFFERSON ST CHARLOTTESVILLE, VA 2290</td>
<td>54-0576301</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(7) HOLY COMPATORE EPISCOPAL CHURCH</td>
<td>737 WOODLAND AVE SE ATLANTA, GA 30316</td>
<td>58-1764268</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(8) HOLY CROSS CATHOLIC CHURCH</td>
<td>1621 UNIVERSITY AVENUE NE MINNEAPOLIS, MN 5</td>
<td>41-0711497</td>
<td>501 (C) 3</td>
<td>5,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(9) HOLY CROSS CATHOLIC SCHOOL</td>
<td>5527 N BOWDOIN ST PORTLAND, OR 97203</td>
<td>93-0386845</td>
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<td>23-1421903</td>
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<td>(11) HOLY CROSS COLLEGE INC</td>
<td>54515 STATE RD 933 NORTH NOTRE DAME, IN 465</td>
<td>35-1148835</td>
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<td>8,000.</td>
<td>FMV</td>
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<td>(12) HOLY CROSS FOREIGN MISSION SOCIETY INC</td>
<td>PO BOX 543 NOTRE DAME, IN 46556</td>
<td>52-6044212</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

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Schedule I (Form 990) 2020

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JSA
0E1288 1.000

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# Schedule I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attache Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes []
   - No []

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>HOLY CROSS GREEK ORTHODOX CHURCH</td>
<td>25225 MIDDLEBELT RD FARMINGTON HILLS, MI 48, 38-2002917</td>
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<td>2</td>
<td>HOLY CROSS HIGH SCHOOL OF BAYSIDE</td>
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<td>11-1773815</td>
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<td>39-6030677</td>
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<td>5035 ROUTE 130 DELRAN, NJ 8075</td>
<td>38-389986</td>
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<td>56-1279502</td>
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<td>59-2780310</td>
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<td>12</td>
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<td>9100 CRICKETT ROAD BRENTWOOD, OK 73505</td>
<td>62-1400461</td>
<td>7,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

---

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>HOLY FAMILY CATHOLIC CHURCH</td>
<td>1010 NORTHWEST 82ND STREET LAWTON, FL 34952</td>
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<td>7,000.</td>
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<td>HOLY FAMILY CATHOLIC CHURCH - FORT WORTH, TX</td>
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<td>6</td>
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<td>10A BISBEE COURT SANTA FE, NM 87508</td>
<td>85-0415388</td>
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<td>84-1490222</td>
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<td>8</td>
<td>HOLY FAMILY HOSPITAL OF BETHLEHEM FOUNDATION</td>
<td>2000 P ST NW STE 310 WASHINGTON, DC 20036</td>
<td>52-2050117</td>
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<td>303 TUNXIS RD WEST HARTFORD, CT 6107</td>
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<td>221 3RD AVE PHOENIXVILLE, PA 19460</td>
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<td>13240 CRAIG ST OVERLAND PARK, KS 66213</td>
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<td>36,000.</td>
<td>FMV</td>
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</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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   - **Yes**
   - **No**

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<th>Purpose of grant or assistance</th>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>HOLY SPIRIT CHURCH</td>
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<td>13,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</tbody>
</table>

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) HOLY SPIRIT CHURCH ATLANTA INC</td>
<td>58-0969299</td>
<td>501 (C) 3</td>
<td>27,100</td>
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<td>(3) HOLY SPIRIT LUTHERAN CHURCH</td>
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<td>(4) HOLY SPIRIT PARISH - Newman Hall</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(5) HOLY SPIRIT PARISH MONTGOMERY</td>
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<tr>
<td>(6) HOLY TRANSFIGURATION ORTHODOX CHURCH</td>
<td>38-2828490</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>36075 7 MILE RD LIVONIA, MI 48152</td>
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<td>(7) HOLY TRINITY ARMENIAN APOSTOLIC CHURCH OF G</td>
<td>51-0188147</td>
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<td>(8) HOLY TRINITY CATHOLIC PARISH</td>
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<td>FMV</td>
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<td>(9) HOLY TRINITY CHURCH</td>
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<tr>
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<td>(10) HOLY TRINITY CHURCH</td>
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<tr>
<td>(11) HOLY TRINITY ENGLISH EVANGELICAL LUTHERAN C</td>
<td>39-1454614</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOLY TRINITY EPISCOPAL CHURCH - MENLO PARK, 330 RAVENSWOOD AVENUE MENLO PARK, CA 94025</td>
<td>94-1219133</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>N/A</td>
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<tr>
<td>HOLY TRINITY EVANGELICAL LUTHERAN CHURCH 1218 W ADDISON ST CHICAGO, IL 60613</td>
<td>36-6008789</td>
<td>501 (C) 3</td>
<td>22,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLY TRINITY EVANGELICAL LUTHERAN CHURCH OF 150 RIVER RD RED BANK, NJ 7701</td>
<td>22-2593742</td>
<td>501 (C) 3</td>
<td>12,760.</td>
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<tr>
<td>HOLY TRINITY GEORGETOWN PIKE INC 850 BALLS HILL RD MC LEAN, VA 22101</td>
<td>27-4084592</td>
<td>501 (C) 3</td>
<td>9,000.</td>
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<tr>
<td>HOLY TRINITY GREEK ORTHODOX CHURCH 279 S 300 W SALT LAKE CITY, UT 84101</td>
<td>87-0214888</td>
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<td>9,333.</td>
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<tr>
<td>HOLY TRINITY HIGH SCHOOL 1443 W DIVISION ST CHICAGO, IL 60642</td>
<td>36-2431052</td>
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<td>6,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLY TRINITY LUTHERAN CHURCH 2551 55TH ST NE CANTON, VA 94070</td>
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<td>15,600.</td>
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<tr>
<td>HOLY TRINITY LUTHERAN CHURCH 350 E. MADISON ST LOMBARD, IL 60148</td>
<td>36-2479254</td>
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<td>HOLY TRINITY LUTHERAN CHURCH 149 MANZANITA AVE S J CARLOS, OH 44721</td>
<td>94-2565470</td>
<td>501 (C) 3</td>
<td>38,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLY TRINITY LUTHERAN CHURCH 300 E ROSEMARY ST CHAPEL HILL, NC 27514</td>
<td>56-6023381</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLY TRINITY MONTESSORI 8131 OLD HARDING PIKE NASHVILLE, TN 37221</td>
<td>26-4512017</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOLY TRINITY R C CHURCH 315 1ST ST WESTFIELD, NJ 7090</td>
<td>22-1589203</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Full name of organization: Vanguard Charitable Endowment Program

Employer identification number: 23-2888152

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
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<td>Holyrood Church</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>Home for Contemporary Theatre and Art Ltd</td>
<td>13-3449416</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Home for the Aged of the Little Sisters of</td>
<td>13-1884785</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>Home for the Aged of the Little Sisters of</td>
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<td>17,500.</td>
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<tr>
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<td>FMV</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>94-2519203</td>
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<td>15,500.</td>
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<td>61-0445834</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>Home of the Mother Inc</td>
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<td>12,000.</td>
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<td>Home School Legal Defense Association</td>
<td>52-1354365</td>
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<td>41,500.</td>
<td>FMV</td>
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<td>For Recipient's Exem</td>
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</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: **X**

3. Enter total number of other organizations listed in the line 1 table: **X**
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments</th>
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<td>1(a)</td>
<td>Name and address of organization or government</td>
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<td>1(b)</td>
<td>EIN</td>
</tr>
<tr>
<td>1(c)</td>
<td>IRC section (if applicable)</td>
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<tr>
<td>1(d)</td>
<td>Amount of cash grant</td>
</tr>
<tr>
<td>1(e)</td>
<td>Amount of non-cash assistance</td>
</tr>
<tr>
<td>1(f)</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
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<tr>
<td>1(g)</td>
<td>Description of non-cash assistance</td>
</tr>
<tr>
<td>1(h)</td>
<td>Purpose of grant or assistance</td>
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</table>

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

2. Enter total number of other organizations listed in the line 1 table.
### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**
Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOMESTRETCH INC 370 S WASHINGTON ST STE 400 FALLS CHURCH, V</td>
<td>54-1894391</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HOMETOWN FOUNDATION INC CO BERT CORDREN 275 SCHOOLHOUSE R CHESHIRE</td>
<td>20-0847683</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOMEWARD ALLIANCE INC 1305 DUFF DR STE 5 FORT COLLINS, CO 80524</td>
<td>27-4641606</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HOMEWARD BOUND INC 12805 HIGHWAY 55 STE 400 MINNEAPOLIS, MN 55</td>
<td>41-1223085</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>HOMEWARD BOUND OF MARIN 1385 N HAMILTON PKWY NOVATO, CA 94949</td>
<td>68-0011305</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>HOMEWARD PET ADOPTION CENTER PO BOX 2293 WOODINVILLE, WA 98072</td>
<td>91-1526803</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
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<td>HONDURAS HOPE MISSION 10069 GRUBBS RD WEXFORD, PA 15090</td>
<td>81-3269884</td>
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<tr>
<td>HONEST REPORTING COM INC 165 E 56TH SR NEW YORK, NY 10022</td>
<td>06-1611859</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>HONEY RUN COVERED BRIDGE ASSN INC PO BOX 5201 CHICO, CA 95927</td>
<td>23-7052465</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HONEYWELL FOUNDATION INC 275 W MARKET ST WARASH, IN 46992</td>
<td>35-0390706</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HONNOLD FOUNDATION 159 WEST 300 SOUTH 200 SALT LAKE CITY, UT 8</td>
<td>83-0833980</td>
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<td>FMV</td>
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<tr>
<td>HONOLULU JAPANESE SEVENTH-DAY- ADVENTIST CH 2655 MANOA ROAD HONOLULU, HI 96822</td>
<td>99-6005907</td>
<td>501 (C) 3</td>
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**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>PO BOX 77108 CHARLOTTE, NC 28271</td>
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<td>(2) HONOR THE EARTH</td>
<td>45-4714238</td>
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<td>16,500.</td>
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<td>607 MAIN AVE CALLAWAY, MN 56521</td>
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<td>(3) HONOR HEALTH</td>
<td>86-0181654</td>
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<td>8125 N HAYDEN RD SCOTTSDALE, AZ 85258</td>
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<td>(4) HONOR HEALTH FOUNDATION</td>
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<td>(5) HOOD COLLEGE OF FREDERICK MD</td>
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<td>(6) HOOSIER HILLS FOOD BANK INC</td>
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<td>501 (C) 3</td>
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<td>(7) HOPE 4 KIDS INTERNATIONAL</td>
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<td>(8) HOPE ACADEMY INC</td>
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<td>2300 CHICAGO AVE MINNEAPOLIS, MN 55404</td>
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<td>110,000.</td>
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<td>7655 BRUTON SMITH BLVD CONCORD, NC 28027</td>
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<td>FMV</td>
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<td>345 E BOWMAN DR KALISPELL, MT 59901</td>
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<td>4360 CENTRAL AVE FREMONT, CA 94536</td>
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<td>(12) HOPE AND A HOME-INC</td>
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<td>1236 COLUMBIA RD NW WASHINGTON, DC 20009</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
   -  
3. Enter total number of other organizations listed in the line 1 table.  
   -  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes  No

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>Name and address of organization or government</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
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<td>HOPE CANCER RESOURCES</td>
<td>5835 W SUNSET AVE SPRINGDALE, AR 72762</td>
<td>71-05955593</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE CHAPEL</td>
<td>300 E WELAKAHAO RD KIHEI, HI 96753</td>
<td>99-0199311</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>HOPE CHAPEL CHURCH</td>
<td>17417 N 63RD AVE GLENDALE, AZ 85308</td>
<td>86-0739497</td>
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<td>19,326.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE CHRISTIAN REFORMED CHURCH</td>
<td>5825 151ST ST OAK FOREST, TX 77062</td>
<td>51-0147752</td>
<td>501 (C) 3</td>
<td>33,010.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE CHRISTIAN REFORMED CHURCH</td>
<td>770 PINELOCH DR HOUSTON, IL 60452</td>
<td>31-1203975</td>
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<td>43,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE CHURCH</td>
<td>12445 PATTERSON AVE RICHMOND, VA 23238</td>
<td>54-1851419</td>
<td>501 (C) 3</td>
<td>66,360.</td>
<td>FMV</td>
<td>N/A</td>
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<td>HOPE CHURCH INC</td>
<td>77 W 11TH ST HOLLAND, MI 49423</td>
<td>38-1387880</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>HOPE CHURCH INC N.Y.C.</td>
<td>109 E 31ST ST NEW YORK, NY 10016</td>
<td>45-4091053</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>9</td>
<td>HOPE COLLEGE</td>
<td>141 E 12TH ST HOLLAND, MI 49423</td>
<td>38-1381271</td>
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<td>83,065.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE COMMUNITY CHURCH INC</td>
<td>10505 W 181ST AVE LOWELL, IN 46356</td>
<td>83-2277562</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>HOPE COMMUNITY CHURCH- WILLOW GROVE, PA</td>
<td>240 REED STREET WILLOW GROVE, PA 19090</td>
<td>23-2152045</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>HOPE COMMUNITY RESOURCES INC</td>
<td>540 W INTL AIRPORT RD ANCHORAGE, AK 99518</td>
<td>92-0036594</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
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<td>HOPE EVANGELICAL FREE CHURCH</td>
<td>31-1313622</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>HOPE FELLOWSHIP CHURCH OF JAFFREY</td>
<td>20-2569749</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>6</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
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<td>HOPE FOR NEW YORK 57 W 57TH ST FL 4 NEW YORK, NY 10019</td>
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<td>26-2869386</td>
<td>501 (C) 3</td>
<td>9,400.</td>
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<td>HOPE FOUNDATION USA 155 E 44TH ST STE 34 NEW YORK, NY 10017</td>
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<td>5</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

---

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) HOPE INTERNATIONAL MINISTRIES INC</td>
<td>11415 HOPE INTERNATIONAL DR TAMPA, FL 33625</td>
<td>62-0879012</td>
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<td>241,994.</td>
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<tr>
<td>(2) HOPE JUNIOR BENEFIT COMMITTEE</td>
<td>PO BOX 4349 OAK PARK, IL 60304</td>
<td>36-4486102</td>
<td>501 (c) 3</td>
<td>10,000.</td>
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<tr>
<td>(3) HOPE LUTHERAN CHURCH</td>
<td>3525 ROGERS RD WAKE FOREST, NC 27587</td>
<td>56-2026911</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) HOPE LUTHERAN CHURCH IN THE VILLAGES INC</td>
<td>250 AVENIDA LOS ANGELOS THE VILLAGES, FL 32</td>
<td>59-3539044</td>
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<td>(5) HOPE MEDICAL CLINIC INC</td>
<td>518 HARRIET ST YPSILANTI, MI 48197</td>
<td>38-2469007</td>
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<tr>
<td>(6) HOPE MINISTRIES</td>
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<td>42-1512992</td>
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<td>34,000.</td>
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<tr>
<td>(7) HOPE OF THE NATIONS GUATEMALA</td>
<td>PO BOX 142 GRAFEOVICH, WA 98546</td>
<td>47-3136232</td>
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<td>12,400.</td>
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<td>(8) HOPE OF THE VALLEY RESCUE MISSION</td>
<td>PO BOX 7609 MISSION HILLS, CA 91346</td>
<td>27-2053273</td>
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<td>(9) HOPE PARTNERS INTERNATIONAL</td>
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<td>(10) HOPE PARTNERSHIP FOR EDUCATION</td>
<td>PO BOX 18718 PHILADELPHIA, PA 19132</td>
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<tr>
<td>(11) HOPE PREGNANCY CENTERS INC</td>
<td>PO BOX 290611 DAVIE, FL 33329</td>
<td>65-0213258</td>
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<td>(12) HOPE PRESBYTERIAN CHURCH</td>
<td>140 DELOW RD LAWRENCE TOWNSHIP, NJ 8648</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
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<th>(h) Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
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X Yes  
No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| **1.** HORIZON COMMUNITY CHURCH  
3950 NEWTOWN RD CINCINNATI, OH 45244  
510 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 31-1613836 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **2.** HORIZON INITIATIVE  
206 E JAMES ST LANCASTER, PA 17053  
510 (C) 3  
10,500.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 20-1072627 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **3.** HORIZONS ATLANTA INC  
177 NORTH AVE NW ATLANTA, GA 30332  
510 (C) 3  
16,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 37-1747624 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **4.** HORIZONS EXPEDITIONS  
PO BOX 12342 RICHMOND, VA 23241  
510 (C) 3  
14,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 52-1399545 | 501 (C) 3 | 14,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **5.** HORIZONS FOUNDATION  
550 MONTGOMERY ST STE 700 SAN FRANCISCO, CA  
501 (C) 3  
32,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 94-2686530 | 501 (C) 3 | 32,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **6.** HORIZONS GREATER BOSTON INC  
90 SANDY VALLEY RD DEDHAM, MA 2026  
510 (C) 3  
38,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 84-3317487 | 501 (C) 3 | 38,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **7.** HORIZONS GREATER PHILADELPHIA INC  
303 W LANCASTER AVENUE 220 WAYNE, PA 19087  
501 (C) 3  
14,500.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 94-2019675 | 501 (C) 3 | 14,500. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **8.** HORIZONS GREATER WASHINGTON INC  
3000 CATHEDRAL AVE NW WASHINGTON, DC 20008  
510 (C) 3  
16,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 27-1476998 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **9.** HORIZONS NATIONAL STUDENT ENRICHMENT PROGRAM  
120 POST RD W STE 202 WESTPORT, CT 6880  
501 (C) 3  
8,750.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 06-1468129 | 501 (C) 3 | 8,750. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **10.** HORIZONS OF KENT AND QUEEN ANNES INC  
116 S LYNCHBURG ST STE B CHESTERTOWN, MD 21  
501 (C) 3  
21,500.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 46-1800850 | 501 (C) 3 | 21,500. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **11.** HORIZONS SOCIAL SERVICES OF ADAMS COUNTY IN  
224 S 8TH ST QUINCY, IL 62301  
501 (C) 3  
15,000.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 26-3734445 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT’S EXEM |
| **12.** HORSE HAVEN OF TENNESSEE INC  
PO BOX 30393 KNOXVILLE, TN 37930  
501 (C) 3  
16,500.  
FMV  
N/A  
FOR RECIPIENT’S EXEM | 62-1791407 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT’S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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</tr>
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<tbody>
<tr>
<td>HORSEHEADS FAMILY RESOURCE CENTER INC</td>
<td>1034 W BROAD ST HORSEHEADS, NY 14845</td>
<td>1034 W BROAD ST HORSEHEADS, NY 14845</td>
<td>27-3576674</td>
<td>501 (C) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HORTICULTURAL SOCIETY OF NEW YORK INC</td>
<td>148 W 37TH ST 13TH FLOOR NEW YORK, NY 10018</td>
<td>148 W 37TH ST 13TH FLOOR NEW YORK, NY 10018</td>
<td>13-0854930</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HORTON HAVEN-CHRISTIAN CAMP</td>
<td>PO BOX 276 CHAPEL HILL, TN 37034</td>
<td>PO BOX 276 CHAPEL HILL, TN 37034</td>
<td>23-7445262</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HORTONS KIDS INC</td>
<td>400 VIRGINIA AVE SW STE C130 WASHINGTON, DC</td>
<td>400 VIRGINIA AVE SW STE C130 WASHINGTON, DC</td>
<td>52-1755403</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSANNA</td>
<td>2421 AZTEC RD NE ALBUQUERQUE, NM 87107</td>
<td>2421 AZTEC RD NE ALBUQUERQUE, NM 87107</td>
<td>85-0223225</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSANNA LUTHERAN CHURCH</td>
<td>36W925 RED GATE ROAD ST CHARLES, IL 60175</td>
<td>36W925 RED GATE ROAD ST CHARLES, IL 60175</td>
<td>36-3163421</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSEA FEED THE HUNGRY AND HOMELESS INC</td>
<td>PO BOX 4672 ATLANTA, GA 30302</td>
<td>PO BOX 4672 ATLANTA, GA 30302</td>
<td>58-1340903</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSKINS PARK MINISTRIES INC</td>
<td>PO BOX 667821 CHARLOTTE, NC 28266</td>
<td>PO BOX 667821 CHARLOTTE, NC 28266</td>
<td>56-2582609</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSPICE &amp; FELLATIVE CARE CHARLOTTE REGION</td>
<td>7845 LITTLE AVE CHARLOTTE, NC 28226</td>
<td>7845 LITTLE AVE CHARLOTTE, NC 28226</td>
<td>56-1219017</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSPICE CARE PLUS INC</td>
<td>208 KIDD DR BEREA, KY 40403</td>
<td>208 KIDD DR BEREA, KY 40403</td>
<td>31-1038258</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSPICE FOUNDATION OF AMERICA INC</td>
<td>1907 L ST NW STE 220 WASHINGTON, DC 20036</td>
<td>1907 L ST NW STE 220 WASHINGTON, DC 20036</td>
<td>59-2219888</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>HOSPICE FOUNDATION OF CENTRAL NEW YORK</td>
<td>990 7TH NORTH ST LIVERPOOL, NY 13088</td>
<td>990 7TH NORTH ST LIVERPOOL, NY 13088</td>
<td>16-1438980</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>HOSPICE FOUNDATION OF THE FLORIDA SUNCOAST</td>
<td>5771 ROOSEVELT BLVD FL CLEARWATER, FL 33760</td>
<td>59-2252045</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE FOUNDATION OF WESTERN NEW YORK INC</td>
<td>225 COMO PARK BLVD BUFFALO, NY 14227</td>
<td>22-3137812</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE HAWAII INC</td>
<td>860 IWILEI RD HONOLULU, HI 96817</td>
<td>99-0203930</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF CINCINNATI INCORPORATED</td>
<td>625 EDEN PARK DR FL 7 CINCINNATI, OH 45202</td>
<td>31-0917155</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF MICHIGAN INC</td>
<td>2366 OAK VALLEY DR ANN ARBOR, MI 48103</td>
<td>38-2255529</td>
<td>501 (c) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF NORTH CENTRAL OKLAHOMA INC</td>
<td>445 FAIRVIEW AVE PONCA CITY, OK 74601</td>
<td>73-1176126</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF THE VALLEY</td>
<td>1510 E FLOWER ST PHOENIX, AZ 85014</td>
<td>86-0338886</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF THE WESTERN RESERVE INC</td>
<td>17876 SAINT CLAIR AVE CLEVELAND, OH 44110</td>
<td>34-1256377</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPICE OF TUSCARAWAS COUNTY INC</td>
<td>716 COMMERCIAL AVE SW NEW PHILADELPHIA, OH</td>
<td>34-1522329</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPITAL FOR SPECIAL SURGERY FUND INC</td>
<td>ATTN PAYROLL DEPT NEW YORK, NY 10021</td>
<td>13-6714749</td>
<td>501 (c) 3</td>
<td>146,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPITAL SISTERS OF ST FRANCIS FOUNDATION I</td>
<td>4936 LAVERNA RD SPRINGFIELD, IL 62707</td>
<td>37-1186514</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HOSPITALITY HOMES INC</td>
<td>PO BOX 15265 BOSTON, MA 2215</td>
<td>06-3204112</td>
<td>501 (c) 3</td>
<td>25,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
**(Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization: **VANGUARD CHARITABLE ENDOWMENT PROGRAM**

Employer identification number: 23-2888152

### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes
   - No

   ![Yes]

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HOSPITALITY HOUSE OF THE UPPER PENINSULA</td>
<td>1414 W FAIR AVE STE 204 MARQUETTE, MI 49855</td>
<td>38-3633276</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>HOSPITALLER BROTHERS OF ST JOHN OF GOD</td>
<td>1145 DELSEA DR WESTVILLE, NJ 8093</td>
<td>22-2053180</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>HOTCHKISS LIBRARY OF SHARON INC</td>
<td>10 UPPER MAIN ST SHARON, CT 6069</td>
<td>06-0655489</td>
<td>501 (C) 3</td>
<td>18,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>HOTCHKISS SCHOOL</td>
<td>11 INTERLAKEN RD LAKEVILLE, CT 6039</td>
<td>06-0647018</td>
<td>501 (C) 3</td>
<td>232,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>HOUGHTON COLLEGE</td>
<td>1 WILLARD AVE HOUGHTON, NY 14744</td>
<td>16-0743045</td>
<td>501 (C) 3</td>
<td>266,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>HOUR CHILDREN INC</td>
<td>36-11 A 12TH STREET LIC, NY 11106</td>
<td>13-3647012</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>HOUSATONIC VALLEY ASSOCIATION INC</td>
<td>150 KENT RD S CORNWALL BRG, CT 6754</td>
<td>06-6049295</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>HOUSE OF MERCY</td>
<td>8170 FLANNERY CT MANASSAS, VA 20109</td>
<td>20-4572642</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>HOUSE OF MERCY INC</td>
<td>285 ORMOND ST ROCHESTER, NY 14605</td>
<td>31-1754066</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>HOUSE OF NEIGHBORLY SERVICE</td>
<td>1511 E 11TH ST STE 100 LOVELAND, CO 80537</td>
<td>84-0568546</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>HOUSE OF PEACE</td>
<td>1702 W WALNUT ST MILWAUKEE, WI 53205</td>
<td>39-1636105</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>HOUSE OF RUTH</td>
<td>5 THOMAS CIRCLE NW WASHINGTON DC, DC 20005</td>
<td>52-1054102</td>
<td>501 (C) 3</td>
<td>138,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1. HOUSE OF YES INC</td>
<td>2 WYCROFF AVE BROOKLYN, NY 11237</td>
<td>90-0852610</td>
<td>501 (c) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. HOUSE RABBIT SOCIETY</td>
<td>148 BROADWAY RICHMOND, CA 94804</td>
<td>94-3061685</td>
<td>501 (c) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3. HOUSEHOLD GOODS INC</td>
<td>530 MAIN ST ACTON, MA 1720</td>
<td>04-3468139</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. HOUSING FORWARD</td>
<td>1851 S 9TH AVE MAYWOOD, IL 60153</td>
<td>36-3876660</td>
<td>501 (c) 3</td>
<td>12,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. HOUSING HOPE</td>
<td>5830 EVERGREEN WAY EVERETT, WA 98203</td>
<td>94-3060709</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6. HOUSING MATTERS</td>
<td>115 CORAL STREET SANTA CRUZ, CA 95060</td>
<td>77-0126783</td>
<td>501 (c) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7. HOUSING RESOURCES BAINBRIDGE</td>
<td>PO BOX 11391 BAINBRIDGE ISLAND, WA 98110</td>
<td>95-0068013</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8. HOUSING UNLIMITED INC</td>
<td>12125 VEIRS MILL RD SILVER SPRING, MD 20906</td>
<td>52-1760774</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9. HOUSTON AREA WOMENS CENTER INC</td>
<td>1010 WAUGH DR HOUSTON, TX 77019</td>
<td>74-2029166</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. HOUSTON BAR FOUNDATION</td>
<td>1111 BAGBY FLD 200 HOUSTON, TX 77002</td>
<td>76-0029594</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. HOUSTON CHRISTIAN BROADCASTERS INC</td>
<td>2424 SOUTH BLVD HOUSTON, TX 77098</td>
<td>74-1401846</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12. HOUSTON CIVIC EVENTS INC</td>
<td>901 BAGBY ST FL 1 HOUSTON, TX 77002</td>
<td>47-3703677</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) HOUSTON FOOD BANK</td>
<td>74-2181456</td>
<td>501 (c) 3</td>
<td>500,433.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) HOUSTON GRAND OPERA ASSOCIATION INC</td>
<td>74-6016764</td>
<td>501 (c) 3</td>
<td>169,485.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) HOUSTON HABITAT FOR HUMANITY INC</td>
<td>76-0207084</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) HOUSTON MUSEUM OF NATURAL SCIENCE</td>
<td>74-1036131</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) HOUSTON NORTHWEST BAPTIST CHURCH</td>
<td>74-1760255</td>
<td>501 (c) 3</td>
<td>52,734.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) HOUSTON PARKS BOARD</td>
<td>74-1860046</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) HOUSTON PUBLIC MEDIA FOUNDATION</td>
<td>74-1670740</td>
<td>501 (c) 3</td>
<td>74,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) HOUSTON SOCIETY FOR THE PREVENTION OF CRUEL</td>
<td>74-1287171</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) HOUSTON SYMPHONY SOCIETY</td>
<td>74-1157371</td>
<td>501 (c) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) HOUSTON HEALTH SYSTEM</td>
<td>74-1590271</td>
<td>501 (c) 3</td>
<td>9,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) HOUSTON AREA COMMUNITY CENTER</td>
<td>36-3008606</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) HOUSTON COUNTY GENERAL HOSPITAL INC</td>
<td>52-2093120</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| HOWARD JARVIS TAXPAYERS FOUNDATION  
30100 TOWN CENTER DR LAGUNA NIGUEL, CA 92677  
52-1155794  
501 (C) 3  
$11,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HOWARD L LANIER III COMMUNITY DEVELOPMENT C  
1 MARKET ST APT 538 CAMDEN, NJ 8102  
30-1022394  
501 (C) 3  
$8,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HOWARD UNIVERSITY  
2244 10th STREET ROOM 302 WASHINGTON, DC 20  
52-0204707  
501 (C) 3  
$87,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HOWARDCENTER INC  
208 FLYNN AVE STE 3J BURLINGTON, VT 5401  
03-0179433  
501 (C) 3  
$8,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HSPVA FRIENDS  
PO BOX 52910 HOUSTON, TX 77052  
74-1997921  
501 (C) 3  
$11,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUB CITY SENIOR CENTER  
PO BOX 1143 LIMON, CO 80828  
74-2552297  
501 (C) 3  
$39,996  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUBBARD HALL PROJECTS INC  
25 E MAIN ST CAMBRIDGE, NY 12816  
22-2188736  
501 (C) 3  
$15,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUCKLEBERRY YOUTH PROGRAMS INC  
3450 GEARY BLVD STE 107 SAN FRANCISCO, CA 9  
84-1687559  
501 (C) 3  
$27,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUDSON AREA LIBRARY FOUNDATION INC  
700 1ST ST HUDSON, WI 54016  
39-1688585  
501 (C) 3  
$9,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUDSON GUILD  
441 W 26TH ST NEW YORK, NY 10001  
13-5562989  
501 (C) 3  
$36,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUDSON HIGHLANDS LAND TRUST INC  
20 NAZARETH WAY GARRISON, NY 10524  
13-3528266  
501 (C) 3  
$14,000  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| HUDSON INSTITUTE INC  
1201 PENNSYLVANIA NW AVE WASHINGTON, DC 200  
13-1945157  
501 (C) 3  
$112,500  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x] No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) HUDSON LINK FOR HIGHER EDUCATION IN PRISON</td>
<td>PO BOX 862 OSSINING, NY 10562</td>
<td>13-4132348</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(2) HUDSON RIVER HOUSING</td>
<td>313 MILL ST POUGHKEEPSIE, NY 12601</td>
<td>22-2456648</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(3) HUDSON VALLEY SHAKESPEARE FESTIVAL INC</td>
<td>143 MAIN ST COLD SPRING, NY 10516</td>
<td>13-3499385</td>
<td>501 (C) 3</td>
<td>273,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(4) HUEGEL ELEMENTARY PTO INC</td>
<td>2601 PRAIRIE RD MADISON, WI 53711</td>
<td>47-4687362</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(5) HUGHESVILLE PUBLIC LIBRARY</td>
<td>146 S 5TH ST HUGHESVILLE, PA 17773</td>
<td>23-7078007</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(6) HUGUENOT MEMORIAL CHURCH</td>
<td>901 PELHAMDALE AVENUE PELHAM MANOR, NY 1080</td>
<td>13-1740276</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(7) HUI ALONA KIHOLO</td>
<td>PO BOX 1868 KAMUELA, HI 96743</td>
<td>26-1868690</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) HUMAN COALITION</td>
<td>7800 DALLAS PKWY STE 550 PLANO, TX 75024</td>
<td>26-4099950</td>
<td>501 (C) 3</td>
<td>35,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(9) HUMAN DEVELOPMENT CORPORATION</td>
<td>664 CENTRAL AVE E EDGEOATER, MD 21037</td>
<td>52-1583669</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(10) HUMAN LIFE FOUNDATION INC</td>
<td>271 MADISON AVE STE 1005 NEW YORK, NY 10016</td>
<td>23-7368926</td>
<td>501 (C) 3</td>
<td>76,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(11) HUMAN NEEDS FOOD PANTRY INC</td>
<td>9 LABEL ST MONTCLAIR, NJ 7042</td>
<td>22-3057065</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(12) HUMAN NEEDS PROJECT INC</td>
<td>36 PROFESSIONAL CENTER PKWY SAN RAFAEL, CA</td>
<td>27-4583288</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
</tbody>
</table>

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<th>(Form 990)</th>
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<td></td>
</tr>
<tr>
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</table>

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - [ ] Yes
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTR</td>
<td>32 S TRACY AVE BOISEMAN, MT 59715</td>
<td>81-0350886</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) HUMAN RIGHTS CAMPAIGN FOUNDATION</td>
<td>1640 RHODE ISLAND AVE NW WASHINGTON, DC 200</td>
<td>52-1481896</td>
<td>501 (C) 3</td>
<td>100,675.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) HUMAN RIGHTS FIRST</td>
<td>75 BROAD ST NEW YORK, NY 10004</td>
<td>12-3116646</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) HUMAN RIGHTS FOUNDATION INC</td>
<td>350 5TH AVE STE 4202 NEW YORK, NY 10118</td>
<td>20-2669700</td>
<td>501 (C) 3</td>
<td>611,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) HUMAN RIGHTS INITIATIVE OF NORTH TEXAS INC</td>
<td>2801 SWISS AVE DALLAS, TX 75204</td>
<td>75-2842602</td>
<td>501 (C) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) HUMAN RIGHTS WATCH INC</td>
<td>350 FIFTH AVENUE 34TH FL NEW YORK, NY 10118</td>
<td>13-2875808</td>
<td>501 (C) 3</td>
<td>279,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) HUMAN SERVICES CAMPUS INC</td>
<td>204 S 12TH AVE PHOENIX, AZ 85007</td>
<td>46-3333160</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) HUMAN TRAFFICKING INSTITUTE</td>
<td>2701 PROSPERITY AVE STE 405 FAIRFAX, VA 220</td>
<td>47-4573685</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) HUMAN VACCINES PROJECT INC</td>
<td>310 N INDIAN HILL BLVD # 800 CLAREMONT, CA 95-4761276</td>
<td>95-4761276</td>
<td>501 (C) 3</td>
<td>123,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) HUMANE AMERICA ANIMAL FOUNDATION</td>
<td>36 WOODLAND AVE SAN RAFAEL, CA 94901</td>
<td>68-0087989</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) HUMANE FARMING ASSOCIATION</td>
<td>24 FERRY RD NASHUA, NH 3064</td>
<td>02-0513344</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUMANE SOCIETY FOR SEATTLE-KING CO</td>
<td>13212 SE EASTGATE WAY BELLEVUE, WA 98005</td>
<td>91-0828060 501 (C) 3</td>
<td>21,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY INTERNATIONAL</td>
<td>1255 23RD ST NW STE 450 WASHINGTON, DC 20003</td>
<td>52-1769464 501 (C) 3</td>
<td>40,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>HUMANE SOCIETY OF CENTRAL OREGON SPCA</td>
<td>61170 SE 27TH ST BEND, OR 97702</td>
<td>93-0616957 501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY OF CHARLOTTE INC</td>
<td>2700 TOOMEY AVE CHARLOTTE, NC 28203</td>
<td>58-1342479 501 (C) 3</td>
<td>63,572.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY OF COLLIER COUNTY INC</td>
<td>370 AIRPORT PULLING RD N NAPLES, FL 34104</td>
<td>59-1033966 501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HUMANE SOCIETY OF GR MIAMI DADE CTY SOCIETY</td>
<td>16101 W DIXIE HWY NORTH MIAMI BEACH, FL 331</td>
<td>59-0711176 501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY OF GREATER JUPITER TEQUESTA</td>
<td>100 CAPITAL ST JUPITER, FL 33458</td>
<td>59-2111273 501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>HUMANE SOCIETY OF INDIANAPOLIS INC</td>
<td>7929 MICHIGAN RD INDIANAPOLIS, IN 46268</td>
<td>35-0876385 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HUMANE SOCIETY OF MANATEE COUNTY INC</td>
<td>2515 TAMiami TRL BRADENTON, FL 34205</td>
<td>59-1819652 501 (C) 3</td>
<td>26,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>HUMANE SOCIETY OF MARION COUNTY</td>
<td>PO BOX 1373 YELLVILLE, AR 72687</td>
<td>30-0060232 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY OF MISSOURI</td>
<td>1201 MACKLIND AVE SAINT LOUIS, MO 63110</td>
<td>43-0652638 501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HUMANE SOCIETY OF NORTHWEST LOUISIANA INC</td>
<td>2544 LINWOOD AVE SHREVEPORT, LA 71103</td>
<td>72-1396136 501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - Yes  
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>(1) HUMANE SOCIETY OF ROCHESTER AND MONROE COUNTY</td>
<td>99 VICTOR RD FAIRPORT, NY 14450</td>
<td>16-0743047 501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) HUMANE SOCIETY OF SONOMA COUNTY</td>
<td>PO BOX 1296 SANTA ROSA, CA 95402</td>
<td>94-6001315 501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) HUMANE SOCIETY OF SOUTHERN ARIZONA</td>
<td>635 W ROGER RD TUCSON, AZ 85705</td>
<td>86-012798501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) HUMANE SOCIETY OF THE PIKES PEAK REGION</td>
<td>610 ABBOT LN COLORADO SPRINGS, CO 80905</td>
<td>84-0410111 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) HUMANE SOCIETY OF THE UNITED STATES</td>
<td>700 PROFESSIONAL DR GAITHERSBURG, MD 20879</td>
<td>53-0225390 501 (C) 3</td>
<td>176,064.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) HUMANE SOCIETY OF UTAH</td>
<td>4242 S COMMERCE DR SALT LAKE CITY, UT 84107</td>
<td>97-0256350 501 (C) 3</td>
<td>12,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) HUMANE SOCIETY OF VERO BEACH FLA</td>
<td>6230 77TH ST VERO BEACH, FL 32967</td>
<td>59-0863199 501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8) HUMANE SOCIETY SILICON VALLEY</td>
<td>901 AMES AVE MILPITAS, CA 95035</td>
<td>94-1196215 501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) HUMANITARIAN CHINA</td>
<td>26720 PATRICK AVE HAYWARD, CA 94544</td>
<td>30-0413217 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(10) HUMANITY FORWARD FOUNDATION</td>
<td>PO BOX 15320 WASHINGTON, DC 20003</td>
<td>85-0890581 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) HUMBOLDT AREA FOUNDATION</td>
<td>363 INDIANOLA RD BAYSIDE, CA 95524</td>
<td>23-7310660 501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(12) HUME LAKE CHRISTIAN CAMPS INC</td>
<td>5545 E HEDGES AVE FRESNO, CA 93727</td>
<td>94-1251111 501 (C) 3</td>
<td>1,517,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✔ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tbody>
<tr>
<td>1. HUMMELSTOWN TRINITY UNITED METHODIST CHURCH</td>
<td>23-1518201</td>
<td>501 (C) 3</td>
<td>15,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. KUMOR TO FIGHT THE TUMOR INC</td>
<td>46-3143612</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. HUNAR FOUNDATION</td>
<td>45-2954245</td>
<td>501 (C) 3</td>
<td>49,480.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4. HUNGER FREE AMERICA INC</td>
<td>13-3471350</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. HUNGER FREE VERMONT</td>
<td>03-0336357</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. HUNGER TASK FORCE INC</td>
<td>39-1345847</td>
<td>501 (C) 3</td>
<td>131,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. HUNT VALLEY CHURCH</td>
<td>52-1680491</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. HUNTER COLLEGE FOUNDATION INC</td>
<td>13-3598671</td>
<td>501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. HUNTER COLLEGE HIGH SCHOOL ALUMNAE I ASSOCI</td>
<td>13-3953396</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. HUNTINGTON COUNTY COMMUNITY FOUNDATION INC</td>
<td>35-1838709</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. HUNTINGTON HOSPITAL ASSOCIATION</td>
<td>11-1630914</td>
<td>501 (C) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. HUNTINGTON MEDICAL RESEARCH INSTITUTES</td>
<td>95-1757119</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - [ ] Yes  
   - [x] No

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<tr>
<td>1.</td>
<td>HUNTINGTON THEATRE COMPANY INC</td>
<td>22-2659560</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>HUNTINGTON DISEASE SOCIETY OF AMERICA INC</td>
<td>13-3349872</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3.</td>
<td>HUNTS POINT ALLIANCE FOR CHILDREN</td>
<td>20-8503907</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>HUNTSVILLE - MADISON COUNTY PUBLIC LIBRARY</td>
<td>63-6000402</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5.</td>
<td>HUNTSVILLE SYMPHONY ORCHESTRA FOUNDATION</td>
<td>63-1247731</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6.</td>
<td>HURDLE LIFE FOUNDATION</td>
<td>38-3085047</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>1 HURLEY PLZ FLINT, MI 48503</td>
<td>61-1458639</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8.</td>
<td>HURON COUNTY COALITION AGAINST DOMESTIC ABU</td>
<td>38-1872285</td>
<td>501 (C) 3</td>
<td>21,850.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>HURON HILLS BAPTIST CHURCH</td>
<td>200 COUNTY ROAD 552 ROGERSVILLE, AL 35652</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>N/A</td>
<td>FMV</td>
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<tr>
<td>10.</td>
<td>HURRICANE CEMETERY</td>
<td>200 COUNTY ROAD 552 ROGERSVILLE, AL 35652</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>N/A</td>
<td>FMV</td>
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<tr>
<td>11.</td>
<td>HURRICANE ISLAND OUTWARD BOUND SCHOOL</td>
<td>200 COUNTY ROAD 552 ROGERSVILLE, AL 35652</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12.</td>
<td>HYDE PARK ART CENTER</td>
<td>5020 S CORNELL AVE CHICAGO, IL 60615</td>
<td>501 (C) 3</td>
<td>59,500.</td>
<td>N/A</td>
<td>FMV</td>
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<tr>
<td>1</td>
<td>HYDE PARK JAZZ FESTIVAL</td>
<td>1155 E 60TH ST # 314 CHICAGO, IL 60637</td>
<td>26-3580954</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<td>1 HAVEN FOR HOPE WAY STE 200 SAN ANTONIO, TX</td>
<td>74-2690192</td>
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<td>56-2423423</td>
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<td>20,500.</td>
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<td>I FOSTER INC</td>
<td>PO BOX 159 TRUCKEE, CA 96160</td>
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<td>I LIVE HERE I GIVE HERE</td>
<td>1310 S 1ST ST STE 210 AUSTIN, TX 78704</td>
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<td>I M SULZBAECHER CENTER FOR THE HOMELESS INC</td>
<td>611 E ADAMS ST JACKSONVILLE, FL 32202</td>
<td>59-3229898</td>
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<td>IAP NORTHWEST</td>
<td>649 STRANDER BLVD STE B TUKWILA, WA 98188</td>
<td>91-1499816</td>
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<td>IAMA THEATRE COMPANY</td>
<td>19248 CELTIC ST PORTER RANCH, CA 91326</td>
<td>47-3447666</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
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<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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| Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed. |

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>IBCS COUNCIL 2701 LIMA ST DENVER, CO 80238</td>
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JSA 0E1288 1.000

18674H 1467 V 20-7.21
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   ☑ Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

---

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(5) IGNATIAN CORPORATION SAINT IGNATIUS HIGH SC</td>
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<td>(8) IHS THE INSTITUTE FOR HUMAN SERVICES INC</td>
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Schedule I (Form 990) 2020

V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(1) IITMAANA</td>
<td>6565 WEST LOOP S BELLAIRE, TX 77401</td>
<td>76-0035493</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) IKAR</td>
<td>1737 S LA CIENEGA BLVD LOS ANGELES, CA 9003</td>
<td>20-1210098</td>
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<td></td>
<td>(3) ILIFF SCHOOL OF THEOLOGY</td>
<td>2201 S UNIVERSITY BLVD DENVER, CO 80210</td>
<td>84-0404244</td>
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<td>10,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
<td>(4) ILLINOIS CANCERCARE FOUNDATION</td>
<td>8940 N WOOD SAGE RD PERRIA, IL 61615</td>
<td>37-1409840</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) ILLINOIS COLLEGE</td>
<td>1101 W COLLEGE AVE JACKSONVILLE, IL 62650</td>
<td>37-0661211</td>
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<td>39,500.</td>
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<td>(6) ILLINOIS INSTITUTE OF TECHNOLOGY</td>
<td>3424 S STATE ST FL 4 CHICAGO, IL 60616</td>
<td>36-2170136</td>
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<td>303,500.</td>
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<td>836 W WELLINGTON AVE CHICAGO, IL 60657</td>
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<td>(8) ILLINOIS POLICY INSTITUTE</td>
<td>190 S LA SALLE ST STE 1500 CHICAGO, IL 6060</td>
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<td>184,200.</td>
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<td>(9) ILLINOIS SOUTH CONFERENCE OF THE UNITED CHU</td>
<td>1312 BROADWAY HIGHLAND, IL 62249</td>
<td>37-0866880</td>
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<td>8,000.</td>
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<td>(10) ILLINOIS STATE UNIVERSITY FOUNDATION</td>
<td>ATTN: UNIVERSITY ADVANCEMENT CAMPUS BOX 320</td>
<td>37-6025713</td>
<td>501 (C) 3</td>
<td>74,724.</td>
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<td>(11) ILLINOIS VALLEY FOOD PANTRY</td>
<td>PO BOX 184 LA SALLE, IL 61301</td>
<td>36-3203937</td>
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<td>(12) ILLINOIS WESLEYAN UNIVERSITY</td>
<td>1312 PARK ST BLOOMINGTON, IL 61701</td>
<td>37-0662594</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
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<td>71-1047686</td>
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<tr>
<td>2. ILLUMINATIONS FOUNDATION INC PO BOX 511 ALPHARETTA, GA 30009</td>
<td>83-3552306</td>
<td>501 (C) 3</td>
<td>$794,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3. ILLYRICUM MOVEMENT PO BOX 128 CENTRALIA, WA 98531</td>
<td>46-1394300</td>
<td>501 (C) 3</td>
<td>$6,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>4. IMAGINATION PRODUCTIONS INC 11110 W OAKLAND PARK BLVD STE 28 SUNRISE, FL</td>
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<td>5. IMAGINATION STAGE INC 4908 AUBURN AVE BETHESDA, MD 20814</td>
<td>52-1164889</td>
<td>501 (C) 3</td>
<td>$10,750</td>
<td>FMV</td>
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<tr>
<td>6. IMAGINE A CENTER FOR COPING WITH LOSS 1 E BROAD ST WESTFIELD, NJ 7090</td>
<td>45-3605502</td>
<td>501 (C) 3</td>
<td>$7,500</td>
<td>FMV</td>
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<td>7. IMAGINE CHILDREN'S MUSEUM 1502 WALL ST EVERETT, WA 98201</td>
<td>94-3153591</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>8. IMAGINE FOUNDRY 1225 S WILLOW AVE COOKEVILLE, TN 38506</td>
<td>83-3605375</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>9. IMAGINE GREATER CAMDEN PO BOX 61 CAMDEN, NY 13316</td>
<td>46-0817528</td>
<td>501 (C) 3</td>
<td>$15,000</td>
<td>FMV</td>
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<tr>
<td>10. IMAGINE HOUSING 10604 NE 38TH PL STE 215 KIRKLAND, WA 98033</td>
<td>94-3110312</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11. IMAGINE NORTH CAROLINA FIRST PO BOX 428 RALEIGH, NC 27602</td>
<td>46-4006055</td>
<td>501 (C) 3</td>
<td>$37,500</td>
<td>FMV</td>
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<td>12. IMAGO DEI MIDDLE SCHOOL PO BOX 3056 TUCSON, AZ 85702</td>
<td>86-1155866</td>
<td>501 (C) 3</td>
<td>$20,000</td>
<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer Identification number
23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>(1) VIMENTOR INCORPORATED 199 WATER ST FL NEW YORK, NY 10038 30-0105507 501 (C) 3 9,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) IMMACULATA UNIVERSITY 1145 KING RD IMMACULATA, PA 19345 23-1352664 501 (C) 3 23,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) IMMACULATE CONCEPTION ACADEMY 3625 24TH ST SAN FRANCISCO, CA 94110 94-1156767 501 (C) 3 17,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) IMMACULATE CONCEPTION CATHOLIC CHURCH DARDE 7701 HIGHWAY N O FALLON, MO 63368 43-0653353 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(9) IMMACULATE HEART CENTRAL SCHOOL 1316 IVES ST WATERTOWN, NY 13601 16-0926742 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) IMMACULATE HEART OF MARY CHURCH 1100 SOUTH CENTER STREET SANTA ANA, CA 9270 95-3122889 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467 V 20-7.21
## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<td>1. (1) IMMANUEL ANGELICAN CHURCH</td>
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<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. (2) IMMANUEL ANGELICAN CHURCH</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
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<td>3. (3) IMMANUEL BAPTIST CHURCH</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020

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JSA 0E1288 1.000

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>95-2153795</td>
<td>501 (C)</td>
<td>3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>(2)</td>
<td>IMMANUEL LUTHERAN CHURCH-AMHERST</td>
<td>867 NORTH PLEASANT STREET AMHERST, MA 1002</td>
<td>04-2391793</td>
<td>501 (C)</td>
<td>3</td>
<td>15,300.</td>
<td>FMV</td>
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<td>(3)</td>
<td>IMMEDIATE PRESBYTERIAN CHURCH</td>
<td>129W260 BATAVIA RD WARRENVILLE, IL 60555</td>
<td>36-3680259</td>
<td>501 (C)</td>
<td>3</td>
<td>13,200.</td>
<td>FMV</td>
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<td>(4)</td>
<td>IMMEDIATE PRESBYTERIAN CHURCH</td>
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<td>86-0466801</td>
<td>501 (C)</td>
<td>3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>(5)</td>
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<td>95-1643330</td>
<td>501 (C)</td>
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<td>12,500.</td>
<td>FMV</td>
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<td>(6)</td>
<td>IMMIGRANT DEFENDERS LAW CENTER</td>
<td>634 S SPRING ST FL 10 LOS ANGELES, CA 90014</td>
<td>47-4473312</td>
<td>501 (C)</td>
<td>3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>(7)</td>
<td>IMMIGRANT JUSTICE CORPS INC</td>
<td>17 BATTERY PL STE 1234 NEW YORK, NY 10004</td>
<td>46-4879076</td>
<td>501 (C)</td>
<td>3</td>
<td>123,500.</td>
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<td>IMMIGRANT LEGAL RESOURCE CENTER</td>
<td>1458 HOWARD ST SAN FRANCISCO, CA 94103</td>
<td>94-2939540</td>
<td>501 (C)</td>
<td>3</td>
<td>13,200.</td>
<td>FMV</td>
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<td>(9)</td>
<td>IMMIGRATION EQUALITY</td>
<td>594 DEAN ST BROOKLYN, NY 11238</td>
<td>13-380271</td>
<td>501 (C)</td>
<td>3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(10)</td>
<td>IMMIGRATION INSTITUTE OF THE BAY AREA</td>
<td>1111 MARKET ST FL 4 SAN FRANCISCO, CA 94103</td>
<td>94-1156554</td>
<td>501 (C)</td>
<td>3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11)</td>
<td>IMMIGRATION REFORM LAW INSTITUTE</td>
<td>25 MASSACHUSETTS AVE NW STE 33 WASHINGTON, DC 20001</td>
<td>52-1469956</td>
<td>501 (C)</td>
<td>3</td>
<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>(12)</td>
<td>IMPACT 100 PALM BEACH COUNTY INC</td>
<td>261 NW 13TH ST BOCA RATON, FL 33432</td>
<td>82-4558049</td>
<td>501 (C)</td>
<td>3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMPACT CHRISTIAN CHURCH 330 HOOKSTOWN GRADE RD CORAOPOLIS, PA 15108</td>
<td>25-1237104</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT COMMUNITY FOUNDATION 1536 WYNKOOP ST STE 912 DENVER, CO 80202</td>
<td>83-3901266</td>
<td>501 (C) 3</td>
<td>900,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT FRANCE INC 1100 PEACHTREE ST NE STE 200 ATLANTA, GA 30</td>
<td>20-3098434</td>
<td>501 (C) 3</td>
<td>8,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>IMPACT GRANTS CHICAGO PO BOX 578082 CHICAGO, IL 60657</td>
<td>82-1566221</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT INVESTING CHARITABLE FOUNDATION INC 8208 MELROSE DR OVERLAND PARK, KS 66214</td>
<td>47-3574130</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT JUSTICE 2930 LAKESHORE AVE OAKLAND, CA 94610</td>
<td>47-3363891</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT MINISTRIES USA PO BOX 550 DUVALL, WA 98019</td>
<td>80-0678702</td>
<td>501 (C) 3</td>
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<tr>
<td>IMPACT WATER INC PO BOX 780025 SAN ANTONIO, TX 78278</td>
<td>74-2504163</td>
<td>501 (C) 3</td>
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<td>IMPACT100 DC 4914 BALTAN RD BETHESDA, MD 20816</td>
<td>84-2317756</td>
<td>501 (C) 3</td>
<td>5,300.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPACT100 PHILADELPHIA INC PO BOX 275 WYNNEWOOD, PA 19096</td>
<td>80-0177821</td>
<td>501 (C) 3</td>
<td>16,750.</td>
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<tr>
<td>IMPACTASSETS INC 4340 EAST HWY STE 210 BETHESDA, MD 20816</td>
<td>26-2048480</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>IMPACTISRAEL INC 4340 EAST HWY STE 202 BETHESDA, MD 20816</td>
<td>22-3090463</td>
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<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  
3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMPACTPHL 4801 S BROAD ST BLDG 10 PHILADELPHIA, PA 19</td>
<td>83-1156552</td>
<td>501 (c) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPERIAL VALLEY FOOD BANK 486 W ATEN RD IMPERIAL, CA 92251</td>
<td>33-0633364</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IMPRESSION 5 SCIENCE CENTER 200 MUSEUM DR LANSING, MI 48933</td>
<td>23-7200548</td>
<td>501 (c) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>IN HIS STEPS MINISTRIES INC PO BOX 827 CANTON, MI 39046</td>
<td>64-0864053</td>
<td>501 (c) 3</td>
<td>100,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>IN OUR BACKYARDS INC 540 PRESIDENT ST FL 3 BROOKLYN, NY 11215</td>
<td>26-3283639</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>IN SHIFRAS ARMS INC PO BOX 7212 SILVER SPRING, MD 20907</td>
<td>27-0746302</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IN THE FAMILY WAY PO BOX 9055 SANTA FE, NM 87504</td>
<td>54-2153235</td>
<td>501 (c) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>IN TOUCH MINISTRIES INC 3836 DEKALB TECHNOLOGY PKWY ATLANTA, GA 303</td>
<td>58-1495310</td>
<td>501 (c) 3</td>
<td>59,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INCARNATION LUTHERAN CHURCH 4880 RODGSON RD SAINT PAUL, MN 55126</td>
<td>41-0889988</td>
<td>501 (c) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INCORPORATED VILLAGE COMMUNITY HOSPITAL FOUNDATION 880 ALDER AVE INCLINE VILLAGE, NV 89451</td>
<td>20-0752156</td>
<td>501 (c) 3</td>
<td>7,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INDEPENDENCE INSTITUTE 727 E 16TH AVE DENVER, CO 80203</td>
<td>84-0990300</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INDEPENDENCE VILLAGE INC 67N704 FRANKLIN AVE CEDARBURG, WI 53012</td>
<td>46-2603551</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | INDEPENDENCE VISITOR CENTER CORPORATION  
   1 N INDPDCN MALL W 6TH AND MAR PHILADELPHIA | 23-2952488 | 501 (C) 3 | 25,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | INDEPENDENT ARTS & MEDIA  
   PO BOX 429442 SAN FRANCISCO, CA 94142 | 94-3355076 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | INDEPENDENT CURATORS INTERNATIONAL  
   401 BROADWAY STE 1620 NEW YORK, NY 10013 | 52-1020481 | 501 (C) 3 | 25,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | INDEPENDENT GROUP HOME LIVING PROGRAM INC  
   221 N SUNRISE SERVICE RD MANORVILLE, NY 119 | 11-2458584 | 501 (C) 3 | 150,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | INDEPENDENT INSTITUTE  
   100 SWAN WAY STE 200 OAKLAND, CA 94621 | 94-3008370 | 501 (C) 3 | 7,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | INDEPENDENT PRESBYTERIAN CHURCH - SAVANNAH,  
   PO BOX 9266 SAVANNAH, GA 31412 | 58-0648684 | 501 (C) 3 | 30,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | INDEPENDENT PRODUCTION FUND INC  
   200 CENTRAL PARK S NEW YORK, NY 10019 | 13-3455677 | 501 (C) 3 | 25,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | INDEPENDENT WOMENS FORUM  
   4 WEEMS LN # 312 WINCHESTER, VA 22601 | 54-1670627 | 501 (C) 3 | 235,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | INDIANA COMMUNITY CENTER INC  
   525 LOS COCHES ST MILPITAS, CA 95035 | 52-2351119 | 501 (C) 3 | 14,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | INDIANA CULTURAL CENTER OF GREENWICH INC  
   2 DEPOT PLZ STE 403 BEDFORD HILLS, NY 10507 | 46-1158798 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | INDIANA DEVELOPMENT AND RELIEF FUND INC  
   5821 MOSSROCK DR ROCKVILLE, MD 20852 | 52-1555563 | 501 (C) 3 | 30,001 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | INDIAN AMERICAN COMMUNITY SERVICES  
   PO BOX 404 BELLEVEU, WA 98009 | 91-1268802 | 501 (C) 3 | 8,500 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Schedule I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) INDIAN AMERICAN EDUCATION FOUNDATION</td>
<td>8501 NE 110TH PL KIRKLAND, WA 98034</td>
<td>91-2047125</td>
<td>501</td>
<td>3</td>
<td>33,527</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(2) INDIAN CREEK CHRISTIAN CHURCH INC</td>
<td>6430 S FRANKLIN RD INDIANAPOLIS, IN 46259</td>
<td>35-1422969</td>
<td>501</td>
<td>3</td>
<td>28,200</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3) INDIAN HILL MUSIC INC</td>
<td>36 KING ST LITTLETON, MA 1460</td>
<td>04-2867945</td>
<td>501</td>
<td>3</td>
<td>23,280,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4) INDIAN INSTITUTE OF TECHNOLOGY KANPUR FOUND</td>
<td>3790 EL CAMINO REAL # 1038 PALO ALTO, CA 94</td>
<td>94-3370645</td>
<td>501</td>
<td>3</td>
<td>25,600</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(5) INDIAN LAKE COMMUNITY CHURCH</td>
<td>PO BOX 457 RUSSELLS POINT, OH 43348</td>
<td>34-0876096</td>
<td>501</td>
<td>3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(6) INDIAN MOUNTAIN SCHOOL INCORPORATED</td>
<td>211 INDIAN MOUNTAIN RD LAKEVILLE, CT 6039</td>
<td>06-0646681</td>
<td>501</td>
<td>3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(7) INDIAN MUSLIM RELIEF AND CHARITIES</td>
<td>849 INDEPENDENCE AVE STE A MOUNTAIN VIEW, C</td>
<td>27-0058132</td>
<td>501</td>
<td>3</td>
<td>31,100</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) INDIAN RIVER HOSPITAL FOUNDATION INC</td>
<td>1000 36TH ST VERO BEACH, FL 32960</td>
<td>59-0760215</td>
<td>501</td>
<td>3</td>
<td>177,500</td>
<td>FMV</td>
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<tr>
<td>(9) INDIAN RIVER LAND TR INC</td>
<td>80 ROYAL PALM PT STE 301 VERO BEACH, FL 329</td>
<td>65-0059649</td>
<td>501</td>
<td>3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>(10) INDIAN RIVER MEMORIAL HOSPITAL INC</td>
<td>1000 36TH ST VERO BEACH, FL 32960</td>
<td>59-2496294</td>
<td>501</td>
<td>3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11) INDIAN RIVER STATE COLLEGE FDN INC</td>
<td>3209 VIRGINIA AVE FORT PIERCE, FL 34981</td>
<td>59-1105591</td>
<td>501</td>
<td>3</td>
<td>65,500</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>(12) INDIAN TRAIL CHURCH</td>
<td>9010 N INDIAN TRAIL RD SPOKANE, WA 99208</td>
<td>91-1606678</td>
<td>501</td>
<td>3</td>
<td>16,900</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.*

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. INDIANA REPERTORY THEATRE INC</td>
<td>35-1186290</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. INDIANA STATE SYMPHONY SOCIETY INC</td>
<td>35-0998627</td>
<td>501 (C) 3</td>
<td>9,201.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. INDIANA STATE UNIVERSITY FOUNDATION INC</td>
<td>35-6045550</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. INDIANA TEEN CHALLENGE INC</td>
<td>35-1262844</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. INDIANA UNIVERSITY FOUNDATION</td>
<td>35-6018940</td>
<td>501 (C) 3</td>
<td>254,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. INDIANA WESLEYAN UNIVERSITY</td>
<td>35-0885591</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. INDIANAPOLIS HEBREW CONGREGATION INC</td>
<td>35-0871004</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. INDIANAPOLIS MUSEUM OF ART INC</td>
<td>35-0867955</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9. INDIANAPOLIS–MARION COUNTY PUBLIC LIBRARY F</td>
<td>23-7016089</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10. INDIANS FOR COLLECTIVE ACTION K K JINDAL</td>
<td>23-7027461</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
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<tr>
<td>11. INDIANASTORA</td>
<td>46-4246368</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12. INDIGENOUS COMMUNITY DEVELOPMENT INTERNATIONAL</td>
<td>27-1193182</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

Enter total number of other organizations listed in the line 1 table.  

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

Schedule I (Form 990) 2020

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**JSA**

18674H 1467  V 20–7.21
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>INDIGENOUS EDUCATION FOUNDATION OFTANZANIA</td>
<td>20-4408954</td>
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<td>2</td>
<td>INGRIDENCIE NETWORK OF TURTLE IS</td>
<td>38-3653476</td>
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<td>3</td>
<td>INDIVISIBLE CIVICS INC</td>
<td>82-2355901</td>
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<td>126,500.</td>
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<td>INDECOC INC</td>
<td>27-1975594</td>
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<td>5</td>
<td>INEQUALITY MEDIA</td>
<td>46-5544528</td>
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<td>6</td>
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<td>INFAYTH</td>
<td>23-1381400</td>
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<td>8</td>
<td>INFANT WELFARE SOCIETY OF CHICAGO</td>
<td>36-2167752</td>
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<tr>
<td>9</td>
<td>INFINITY EQUINE THERAPY INC</td>
<td>27-2463910</td>
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<td>FMV</td>
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<td>10</td>
<td>INFORMATION TECHNOLOGY AND INNOVATION FOUND</td>
<td>20-4403971</td>
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<td>13,200.</td>
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<td>11</td>
<td>INFORMATION TECHNOLOGY DISASTER RESOURCE CE</td>
<td>26-3865869</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>INFORMED CONSENT ACTION NETWORK</td>
<td>81-4540235</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>INGHAM COUNTY PARKS PO BOX 178 MASON, MI 48854</td>
<td>38-6005629</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INGLEWOOD PRESBYTERIAN CHURCH 7718 NORTHEAST 141ST STREET KIRKLAND, WA 98</td>
<td>91-6191776</td>
<td>501 (C) 3</td>
<td>7,695</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INGLES FOUNDATION 2600 BELMONT AVE PHILADELPHIA, PA 19131</td>
<td>22-3326553</td>
<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INHERITANCE CHURCH PO BOX 888676 GRAND RAPIDS, MI 49588</td>
<td>85-2895330</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INITIATIVE FOR MEDICINES ACCESS &amp; KNOWLEDGE 16192 COASTAL HWY LEWES, DE 19958</td>
<td>20-8559302</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INJUSTICE WATCH NFP 55 E JACKSON BLVD STE 640 CHICAGO, IL 60604</td>
<td>47-4537172</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>INLAND EMPIRE COMMUNITY FOUNDATION 3700 6TH ST STE 200 RIVERSIDE, CA 92501</td>
<td>33-0748536</td>
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<td>INMOTION 23905 MERCANTILE RD BEACHWOOD, OH 44122</td>
<td>46-4102770</td>
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<td>FMV</td>
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<td>INNER CITY CHRISTIAN FEDERATION 415 FRANKLIN ST SE STE 100 GRAND RAPIDS, MI 38-1903026</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INNER CITY LAW CENTER 1309 E 7TH ST LOS ANGELES, CA 90021</td>
<td>95-3697572</td>
<td>501 (C) 3</td>
<td>31,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>INNER CITY MISSION INC SPRINGFIELD ILL 726 N 7TH ST SPRINGFIELD, IL 62702</td>
<td>37-1156121</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>INNER-CITY SCHOLARSHIP FUND INC 1011 1ST AVE STE 1800 NEW YORK, NY 10022</td>
<td>51-0453629</td>
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<td>318,100</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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<th>Name of the organization</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</tbody>
</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1. INNISFREE INC</td>
<td>23-7087873</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2. INNOCENCE PROJECT INC</td>
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<td>344,593.</td>
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<td>N/A</td>
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<td>3. INNOCENCE PROJECT NEW ORLEANS</td>
<td>72-1501261</td>
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<tr>
<td>4. INNOCENCE PROJECT OF FLORIDA INC</td>
<td>20-0210812</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. INNOVATE PUBLIC SCHOOLS</td>
<td>46-2155826</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. INNOVATION AFrica</td>
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<td>501 (C) 3</td>
<td>61,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. INNOVATION LAW LAB</td>
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<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. INNOVATIONS FOR POVERTY ACTION</td>
<td>06-1660068</td>
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<td>FMV</td>
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<td>9. INOVA HEALTH SYSTEM FOUNDATION</td>
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<td>10. INQUIRING SYSTEMS INC</td>
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<td>11. INSEAD MANAGEMENT EDUCATION FOUNDATION</td>
<td>13-6209297</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>12. INSIDE THE MIDDLE EAST INC</td>
<td>82-0953061</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSIGHT FOR LIVING 5330 PARKWOOD BLVD FRISCO, TX 75034</td>
<td>95-3392299</td>
<td>501 (C) 3</td>
<td>78,450</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSIGHT MEDITATION CENTER OF THE MID-PENINS 108 BIRCH ST REDWOOD CITY, CA 94062</td>
<td>77-0450217</td>
<td>501 (C) 3</td>
<td>14,875</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSIGHT MEDITATION COMMUNITY OF CHARLOTTESVILLE PO BOX 182 CHARLOTTESVILLE, VA 22902</td>
<td>20-3244426</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>INSIGNIA FOUNDATION PO BOX 309 LOVELAND, OH 45140</td>
<td>45-3066620</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>INSPIRATION CORPORATION 4554 N BROADWAY ST CHICAGO, IL 60640</td>
<td>36-3673980</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSPIRATIONAL TRIATHLON RACING PO BOX 567 EAST HAMPTON, NY 11937</td>
<td>90-0635108</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>INSPIRE INTERNATIONAL 1200 WILMINGTON AVE RICHMOND, VA 23227</td>
<td>25-1457139</td>
<td>501 (C) 3</td>
<td>102,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSPIRE LIFE SKILLS TRAINING INC 2279 EAGLE GLENN PKWY 112-131 CORONA, CA 92</td>
<td>20-1647743</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>INSPIRICIA INC 141 FRANKLIN ST STAMFORD, CT 06901</td>
<td>06-1172535</td>
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<td>INSTITUTE FOR ADVANCED STUDY 1 EINSTEIN DR PRINCETON, NJ 8540</td>
<td>21-0634988</td>
<td>501 (C) 3</td>
<td>48,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSTITUTE FOR APPLIED TINKERING 360 9TH AVE SAN FRANCISCO, CA 94118</td>
<td>26-4299346</td>
<td>501 (C) 3</td>
<td>41,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>INSTITUTE FOR BLADDER AND PROSTATE RESEARCH</td>
<td>22-3614365</td>
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<td>INSTITUTE FOR CANCER RESEARCH</td>
<td>23-6296135</td>
<td>501 (C) 3</td>
<td>125,750</td>
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<td>INSTITUTE FOR CREATION RESEARCH</td>
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<td>N/A</td>
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<tr>
<td>INSTITUTE FOR CULTURAL EVOLUTION</td>
<td>46-2100766</td>
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<td>FMV</td>
<td>N/A</td>
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<td>INSTITUTE FOR EDUCATIONAL ACHIEVEMENT INC</td>
<td>22-3391706</td>
<td>501 (C) 3</td>
<td>26,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INSTITUTE FOR ENERGY RESEARCH</td>
<td>76-0149778</td>
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<td>13,000</td>
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<td>INSTITUTE FOR ENTREPRENEURIAL LEADERSHIP INC</td>
<td>04-3660900</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
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<td>INSTITUTE FOR EXCEPTIONAL CARE</td>
<td>85-1278444</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>INSTITUTE FOR FREE SPEECH</td>
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<td>FMV</td>
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<td>INSTITUTE FOR HUMANE STUDIES</td>
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<tr>
<td>INSTITUTE FOR INTEGRATIVE CANCER RESEARCH</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>INSTITUTE FOR JEWISH SPIRITUALITY INC</td>
<td>36-4531559</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. INSTITUTE FOR JUSTICE</td>
<td>901 N GLEBE RD STE 900 ARLINGTON, VA 22203</td>
<td>52-1744337 501 (C) 3</td>
<td>1,604,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. INSTITUTE FOR MEDIA ANALYSIS INC</td>
<td>275 COMOER ST BROOKLYN, NY 11231</td>
<td>13-3331313 501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3. INSTITUTE FOR NONPROFIT NEWS</td>
<td>714 W OLYMPIC BLVD STE 931 LOS ANGELES, CA</td>
<td>27-2614911 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>4. INSTITUTE FOR POLICY STUDIES</td>
<td>1301 CONNECTICUT AVE NW STE 600 WASHINGTON,</td>
<td>52-0788947 501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. INSTITUTE FOR QUALITY EDUCATION INC</td>
<td>101 W OHIO ST STE 700 INDIANAPOLIS, IN 4620</td>
<td>52-1836687 501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. INSTITUTE FOR SHIPBOARD EDUCATION</td>
<td>2243 CENTRE AVE STE 300 FORT COLLINS, CO 80</td>
<td>52-0757415 501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. INSTITUTE FOR SPENDING REFORM INC</td>
<td>PO BOX 1031 ALEXANDRIA, VA 22313</td>
<td>61-1701005 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. INSTITUTE FOR STRATEGIC DIALOGUE US</td>
<td>CO SCOTT AUBRY 1000 JACKSON STREK TOLEDO, OH 27-1282489</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. INSTITUTE FOR SUSTAINED ATTENTION INC</td>
<td>790 RIVERSIDE DR NEW YORK, NY 10032</td>
<td>47-2981200 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. INSTITUTE FOR THE FUTURE</td>
<td>201 HAMILTON AVE PALO ALTO, CA 94301</td>
<td>95-2540449 501 (C) 3</td>
<td>15,454.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. INSTITUTE FOR THE INTERNATIONAL EDUCATION O</td>
<td>33 W MONROE ST CHICAGO, IL 60603</td>
<td>36-2251912 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. INSTITUTE FOR THE REDESIGN OF LEARNING</td>
<td>625 FAIR OAKS AVE STE 300 SOUTH PASADENA, CA</td>
<td>95-2904053 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1  (a) Name and address of organization or government
2  (b) EIN
3  (c) IRC section (if applicable)
4  (d) Amount of cash grant
5  (e) Amount of non-cash assistance
6  (f) Method of valuation (book, FMV, appraisal, other)
7  (g) Description of noncash assistance
8  (h) Purpose of grant or assistance

(1) INSTITUTE FOR THE STUDY OF WAR INC
1400 16TH ST NW STE 515 WASHINGTON, DC 20033 26-0273675 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM

(2) INSTITUTE OF CONTEMPORARY ART MIAMI INC
61 NE 41ST ST MIAMI, FL 33137 47-1251523 501 (C) 3 674,000. FMV N/A FOR RECIPIENT'S EXEM

(3) INSTITUTE OF CONTEMPORARY PSYCHOANALYSIS LOS ANGELES
10780 SANTA MONICA BLVD STE 350 LOS ANGELES 95-4301633 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM

(4) INSTITUTE OF CULTURAL AFFAIRS
4750 N SHERIDAN RD CHICAGO, IL 60640 23-7394613 501 (C) 3 150,000. FMV N/A FOR RECIPIENT'S EXEM

(5) INSTITUTE OF INTERNATIONAL EDUCATION INC
1 WORLD TRADE CTR NEW YORK, NY 10007 13-1624046 501 (C) 3 17,000. FMV N/A FOR RECIPIENT'S EXEM

(6) INSTITUTE OF ISLAMIC EDUCATION
1280 BLUFF CITY BLVD ELGIN, IL 60120 36-3789846 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM

(7) INSTITUTE OF JEWISH SPIRITUALITY AND SOCIETY
4032 SPRUCE ST PHILADELPHIA, PA 19104 81-3097220 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM

(8) INSTITUTE OF NAUTICAL ARCHAEOLOGY
340 SPENCE ST ROOM 112 COLLEGE STATION, TX 23-7210709 501 (C) 3 40,000. FMV N/A FOR RECIPIENT'S EXEM

(9) INSTITUTE OF SOUTHERN JEWISH LIFE INC
4915 I 55 N STE 100A JACKSON, MS 35206 64-0762027 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM

(10) INSTITUTE OF THE INCARNATE WORD INC
113 E 11TH ST NEW YORK, NY 10035 04-3242480 501 (C) 3 9,600. FMV N/A FOR RECIPIENT'S EXEM

(11) INSTITUTE OF WORLD POLITICS
1152 16TH ST NW WASHINGTON, DC 20036 52-1699641 501 (C) 3 29,000. FMV N/A FOR RECIPIENT'S EXEM

(12) INSTITUTE ON AGING
3575 GEARY BLVD SAN FRANCISCO, CA 94118 94-2978977 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM

2  Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3  Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

JSA

OE1288 1.000

18674H 1467 V 20-7.21
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) INSTITUTE ON RELIGION AND PUBLIC LIFE</td>
<td>9 EAST 40TH STREET 10TH FLOOR NEW YORK, NY</td>
<td>52-1628303</td>
<td>501 (C) 3</td>
<td>35,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) INTEGRAL HEART FOUNDATION</td>
<td>1649 E BLAINE AVE SALT LAKE CITY, UT 84105</td>
<td>27-4957996</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) INTEGRATE HEALTH INC</td>
<td>12 SANFORD ST MEDWAY, MA 2053</td>
<td>13-4288670</td>
<td>501 (C) 3</td>
<td>92,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) INTEGRATED COMMUNITY MINISTRIES INC</td>
<td>4837 RATTLESNAKE ROD STEARNS, KY 42647</td>
<td>31-1710971</td>
<td>501 (C) 3</td>
<td>10,400</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) INTEGRATED REFUGEE &amp; IMMIGRANT SERVICES INC</td>
<td>235 NICOLL ST FL 2 NEW HAVEN, CT 6511</td>
<td>06-0653044</td>
<td>501 (C) 3</td>
<td>77,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) INTEGRITY FIRST FOR AMERICA</td>
<td>350 5TH AVE STE 71 NEW YORK, NY 10118</td>
<td>82-1110585</td>
<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) INTEGRITY INC</td>
<td>103 LINCOLN PARK NEWARK, NJ 7102</td>
<td>22-1894796</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) INTELLIGENCE SQUARED US FOUNDATION</td>
<td>150 EAST 52ND STREET SUITE 28003 NEW YORK</td>
<td>27-1022579</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) INTENTIONAL PARENTS INTERNATIONAL ORG</td>
<td>5175 FIRWOOD RD LAKE OSWEGO, OR 97035</td>
<td>47-3268808</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) INTER UNION FOR CONSERVATION OF NATURE &amp; NA</td>
<td>1630 CONNECTICUT AVE NW WASHINGTON, DC 2000</td>
<td>52-1443147</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) INTER-CHURCH ORGANIZATION INC</td>
<td>PO BOX 72046 NEWPORT, KY 41072</td>
<td>61-1212528</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) INTERCOLLEGIATE STUDIES INSTITUTE INC</td>
<td>3901 CENTERVILLE RD WILMINGTON, DE 19807</td>
<td>23-6050131</td>
<td>501 (C) 3</td>
<td>10,450</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTERCULTURAL JOURNEYS 701 S 50TH ST PHILADELPHIA, PA 19143</td>
<td>82-0550761</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>INTERCULTURAL MISSION CHURCH INC 57 PETERS ST NORTH ANDOVER, MA 1845</td>
<td>82-5488929</td>
<td>501 (C) 3</td>
<td>14,600.</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INTERFAITH ACTION FOR HUMAN RIGHTS 1316 GERANIUM ST NW WASHINGTON, DC 20012</td>
<td>47-2562402</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>INTERFAITH ACTION OF EVANSTON PO BOX 1414 EVANSTON, IL 60204</td>
<td>36-3169298</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INTERFAITH CHARITIES OF SOUTH LEE INC 17592 ROCKEFELLER CIR FORT MYERS, FL 33967</td>
<td>65-0362473</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>86-0520997</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>INTERFAITH COMMUNITY SERVICES INC 5400 KING HILL AVE SAINT JOSEPH, CA 92025</td>
<td>44-0545910</td>
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<td>15,000.</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>INTERFAITH COMMUNITY SERVICES INC 550 W WASHINGTON AVE ESCONDIDO, MO 64504</td>
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<td>21,000.</td>
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<tr>
<td>INTERFAITH COMMUNITY SHELTER GROUP INC PO BOX 22653 SANTA FE, NM 87502</td>
<td>27-0736366</td>
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<td>59-1224041</td>
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<td>18,500.</td>
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<td>INTERFAITH COUNCIL OF THE MANCHESTER AREA PO BOX 2644 MANCHESTER CENTER, VT 5255</td>
<td>03-0259208</td>
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<td>5,100.</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>INTERFAITH FOOD PANTRY INC 2 EXECUTIVE DR MORRIS PLAINS, NJ 7950</td>
<td>22-3618468</td>
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<td>45,000.</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [x] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) INTER-FAITH FOOD SHUTTLE</td>
<td>1001 BLAIR DR STE 120 RALEIGH, NC 27603</td>
<td>56-1753180</td>
<td>501 (C) 3</td>
<td>30,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) INTERFAITH HOSPITALITY NETWORK OF GREATER C</td>
<td>990 NASSAU ST CINCINNATI, OH 45206</td>
<td>31-1335474</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) INTERFAITH HOSPITALITY NETWORK OF THE MAINL</td>
<td>1449 DEKALB ST MORRISTOWN, PA 19401</td>
<td>23-2664739</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) INTER-FAITH HOUSING ALLIANCE</td>
<td>31 S SPRING GARDEN ST AMBLER, PA 19002</td>
<td>22-2708420</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) INTERFAITH MINISTRIES FOR GREATER HOUSTON</td>
<td>3303 MAIN ST HOUSTON, TX 77002</td>
<td>74-1488102</td>
<td>501 (C) 3</td>
<td>42,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) INTERFAITH NEIGHBORS INC</td>
<td>810 4TH AVE ASBURY PARK, NJ 7712</td>
<td>22-2896129</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) INTERFAITH NUTRITION NETWORK</td>
<td>211 FULTON AVE HEMPSTEAD, NY 11550</td>
<td>11-2676892</td>
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<td>25,000.</td>
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<td>(8) INTERFAITH OUTREACH AND COMMUNITY PARTNERS</td>
<td>1605 COUNTY ROAD 101 N MINNEAPOLIS, MN 5544</td>
<td>36-3482724</td>
<td>501 (C) 3</td>
<td>48,500.</td>
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<td>(9) INTERFAITH PARTNERSHIP FOR THE HOMELESS</td>
<td>176 SHERIDAN AVE ALBANY, NY 12210</td>
<td>14-1666321</td>
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<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) INTERFAITH SANCTUARY HOUSINGSERVICES INC</td>
<td>PO BOX 9334 BOISE, ID 83707</td>
<td>26-0510072</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) INTERFAITH SOCIAL SERVICES INC</td>
<td>776 HANCOCK ST QUINCY, MA 2170</td>
<td>04-2104853</td>
<td>501 (C) 3</td>
<td>17,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) INTERFAITH WORKS, INC.</td>
<td>114 W MONTGOMERY AVE ROCKVILLE, MD 20850</td>
<td>52-1072684</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>INTERLINK MINISTRIES INC</td>
<td>34-1700949</td>
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<td>2</td>
<td>INTERLOCHEN CENTER FOR THE ARTS</td>
<td>38-1689022</td>
<td>501 (c) 3</td>
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<td>3</td>
<td>INTERMED INTERNATIONAL INC</td>
<td>94-1518657</td>
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<td>4</td>
<td>INTERMOUNTAIN HEALTHCARE FOUNDATION INC</td>
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<td>5</td>
<td>INTERNATIONAL AFRICAN AMERICAN MUSEUM</td>
<td>20-3398254</td>
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<td>6</td>
<td>INTERNATIONAL ANTI-POACHING FOUNDATION INC</td>
<td>32-0408734</td>
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<td>7</td>
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<td>INTERNATIONAL ASSOCIATION OF WOMEN JUDGES</td>
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<td>12</td>
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<td>FMV</td>
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## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>INTERNATIONAL BAPTIST CHURCH MINISTRIES A T</td>
<td>75-2756957</td>
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<td></td>
<td>PO BOX 833276 RICHARDSON, TX 75083</td>
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<td>15,000.</td>
<td>FMV</td>
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<tr>
<td></td>
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<td>52-1081485</td>
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<td></td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td></td>
<td>79 ESSEX ST NEW YORK, NY 10002</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
<td>4201 ARDMORE AVE STE 8 BAKERSFIELD, CA 9330</td>
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<td></td>
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<td>11</td>
<td>INTERNATIONAL CONSORTIUM OF INVESTIGATIVE J</td>
<td>81-4739107</td>
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<td>11,000.</td>
<td>FMV</td>
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<tr>
<td></td>
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<tr>
<td>12</td>
<td>INTERNATIONAL CRANE FOUNDATION INC</td>
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<td>57,500.</td>
<td>FMV</td>
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<tr>
<td></td>
<td>E11376 SHADY LANE RD BARABOO, WI 53913</td>
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<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>INTERNATIONAL CRITIC STUDIES ASSOCIATION IN</td>
<td>04-2667828</td>
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<td>FMV</td>
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<td>INTERNATIONAL DEVELOPMENT ENTERPRISES</td>
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<td>FMV</td>
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<tr>
<td>INTERNATIONAL DISASTER EMERGENCY SERVICE IN</td>
<td>23-7148277</td>
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<tr>
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<tr>
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<td>46-3781676</td>
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<td>INTERNATIONAL FELLOWSHIP OF CHRISTIANS &amp; JE</td>
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<td>26-3538114</td>
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<td>INTERNATIONAL FOLK ART ALLIANCE INC</td>
<td>35-2285824</td>
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<td>INTERNATIONAL FOUNDATION FOR ENNA WOMAN'S UN</td>
<td>13-6157253</td>
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<td>200,000.</td>
<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) INTERNATIONAL FUND FOR ANIMAL WELFARE INC</td>
<td>31-1594197</td>
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<tr>
<td>(2) INTERNATIONAL GUIDING EYES INC</td>
<td>95-1586088</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(3) INTERNATIONAL HEALTH SERVICES</td>
<td>23-2815839</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
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<td>(4) INTERNATIONAL HOUSE</td>
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<td>FMV</td>
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<td>(5) INTERNATIONAL INSTITUTE FOR GLOBAL LEADERSHIP</td>
<td>56-2443621</td>
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<td>(6) INTERNATIONAL INSTITUTE OF NEW ENGLAND INC</td>
<td>04-2104325</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) INTERNATIONAL JUSTICE MISSION</td>
<td>54-1722887</td>
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<td>417,108.</td>
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<td>(8) INTERNATIONAL LIFELINE FUND</td>
<td>81-0629010</td>
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<tr>
<td>(9) INTERNATIONAL LUTHERAN LAYMEN'S LEAGUE</td>
<td>43-0653365</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(10) INTERNATIONAL MAHAVIRA JAIN MISSION</td>
<td>34-1314129</td>
<td>501 (C) 3</td>
<td>11,001.</td>
<td>FMV</td>
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<td>(11) INTERNATIONAL MEDICAL CORPS</td>
<td>95-3949646</td>
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<td>118,950.</td>
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<td>(12) INTERNATIONAL MESSENGLERS</td>
<td>41-1652782</td>
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<td>26,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table..........................................................

3. Enter total number of other organizations listed in the line 1 table..........................................................

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>INTERNATIONAL MISSION BOARD OF THE SOUTHERN 3806 MONUMENT AVE RICHMOND, VA 23230</td>
<td>54-0213930</td>
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<td>245,055.</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>INTERNATIONAL MISSIONS INC PO BOX 851377 RICHARDSON, TX 75085</td>
<td>22-1717576</td>
<td>501 (C) 3</td>
<td>7,320.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>INTERNATIONAL MOUNTAIN BICYCLING ASSOCIATION PO BOX 756 HAILEY, ID 83333</td>
<td>01-0975346</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4</td>
<td>INTERNATIONAL MYELOMA FOUNDATION 12650 RIVERSIDE DR STE 206 VALLEY VILLAGE, 91355</td>
<td>95-4296919</td>
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<td>12,000.</td>
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<tr>
<td>5</td>
<td>INTERNATIONAL OCD FOUNDATION INC 18 TREMONT ST STE 308 BOSTON, MA 2108</td>
<td>22-2894564</td>
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<td>60,250.</td>
<td>FMV</td>
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<tr>
<td>6</td>
<td>INTERNATIONAL ORTHODOX CHRISTIAN CHARITIES 110 WEST RD STE 360 TOWSON, MD 21204</td>
<td>15-4569348</td>
<td>501 (C) 3</td>
<td>20,200.</td>
<td>FMV</td>
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<td>7</td>
<td>INTERNATIONAL PARTNERS IN MISSION 3109 MAYFIELD RD STE 202 CLEVELAND, OH 4411</td>
<td>43-1487311</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>8</td>
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<td>13-1845455</td>
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<td>9</td>
<td>INTERNATIONAL PRESCHOOLS 345 E 86TH ST NEW YORK, NY 10028</td>
<td>13-198240</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>INTERNATIONAL REFUGEE ASSISTANCE PROJECT INC 1 BATTERY PARK PLZ FL 4 NEW YORK, NY 10004</td>
<td>82-2167556</td>
<td>501 (C) 3</td>
<td>131,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>11</td>
<td>INTERNATIONAL RELIEF TEAMS 4560 ALVARADO CANYON RD SAN DIEGO, CA 92120</td>
<td>33-0412751</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12</td>
<td>INTERNATIONAL RESCUE COMMITTEE INC 122 E 42ND ST FL 12 NEW YORK, NY 10168</td>
<td>13-5600870</td>
<td>501 (C) 3</td>
<td>3,855,912.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

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0E1288 1.000

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## SCHEDULE I

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee's eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of non-cash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>PO BOX 5910 PRINCETON, NJ 8543</td>
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<td>FMV</td>
<td>N/A</td>
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<td>96 MORTON ST FL 7 NEW YORK, NY 10014</td>
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<td>INTERNATIONAL SERVICE FELLOWSHIP USA</td>
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<td>4649 SUNNYSIDE AVE N #325 SEATTLE, WA 98103</td>
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<td>INTERNATIONAL SOCIETY FOR KRISHNA CONSCIOUS</td>
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<td>45,000.</td>
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<td>3736 CAREY AVE LA VERNE, CA 91750</td>
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<td>53-0214853</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12325 ORACLE BLVD STE 200 COLORADO SPRGS, CO</td>
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<td>INTERNATIONAL TENNIS HALL OF FAME INCORPORA</td>
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<td>18,500.</td>
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<td>INTERNATIONAL TRADE EDUCATION PROGRAMS INC</td>
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<td>501 (C) 3</td>
<td>16,000.</td>
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<tr>
<td>INTERNATIONAL WE SERVE FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>895 EDGEWATER DR LEXINGTON, KY 40502</td>
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<td>INTERNATIONAL WOMENS MEDIA FOUNDATION</td>
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<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1726 M ST NW STE 1002 WASHINGTON, DC 20036</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
<td>INTERNET SECURITY RESEARCH GROUP</td>
<td>46-3344200</td>
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<td>FMV</td>
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<td>3.</td>
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<td>23-7401867</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>4.</td>
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<td>94-1593216</td>
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<td>FMV</td>
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<td>5.</td>
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<td>6.</td>
<td>INTERTRIBAL FRIENDSHIP HOUSE</td>
<td>94-6042089</td>
<td>501 (C) 3</td>
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<td>7.</td>
<td>INTER-UNIVERSITY SEMINAR ON ARMED FORCES AN</td>
<td>23-7122836</td>
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<td>230,000.</td>
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<td>8.</td>
<td>INTERVARSITY CHRISTIAN FELLOWSHIP- USA</td>
<td>36-2171714</td>
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<td>9.</td>
<td>INTO ABBAS ARMS FOUNDATION</td>
<td>76-0600094</td>
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<td>10.</td>
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<td>11.</td>
<td>INTOWN COLLABORATIVE MINISTRIES</td>
<td>27-0852084</td>
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<td>12.</td>
<td>INTREPID COLLEGE PREPARATORY INCORPORATED</td>
<td>45-4616636</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

#### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>(1) INTREPID FALLEN HEROES FUND</td>
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<td>ONE INTREPID SQ-W 46TH ST 12TH A NEW YORK,</td>
<td></td>
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<td>(2) INVERSANT INC</td>
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<td>80,000.</td>
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<td>561 BOYLSTON ST STE 4 BOSTON, MA 2116</td>
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<td>(3) INVESTIGATIVE REPORTERS AND EDITORS INC</td>
<td>51-0166741</td>
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<td>141 NEFF ANNEX COLUMBIA, MO 65211</td>
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<td>(4) INVISIBLE INSTITUTE</td>
<td>47-3551981</td>
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<td>6100 S BLACKSTONE AVE CHICAGO, IL 60637</td>
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<td>(5) IONA COLLEGE</td>
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<td>715 NORTH AVE MDSFEDON HALL NEW ROCHELLE, N</td>
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<td>(6) IONA SENIOR SERVICES</td>
<td>52-1039553</td>
<td>501 (C) 3</td>
<td>44,500.</td>
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<td>4125 ALBEMARLE ST NW WASHINGTON, DC 20016</td>
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<td>(7) IOWA CONGOLESE ORGANIZATION AND CENTER FOR</td>
<td>82-4386292</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8401 DOUGLAS AVE STE 3C URBANDALE, IA 50322</td>
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<td>(8) IOWA HEALTH FOUNDATION</td>
<td>42-1467682</td>
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<td>12,000.</td>
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<td>1415 WOODLAND AVE E-200 DES MOINES, IA 50</td>
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<td>(9) IOWA NATURAL HERITAGE FOUNDATION</td>
<td>42-1127544</td>
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<td>6,000.</td>
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<tr>
<td>505 5TH AVE DES MOINES, IA 50309</td>
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<td>(10) IOWA PUBLIC RADIO INC</td>
<td>20-4227123</td>
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<td>FMV</td>
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<td>2111 GRAND AVE STE 100 DES MOINES, IA 50312</td>
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<td>(11) IOWA PUBLIC TELEVISION FOUNDATION</td>
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<td>9,700.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 6400 JOHNSTON, IA 50131</td>
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<td>(12) IOWA STATE UNIVERSITY FOUNDATION</td>
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<tr>
<td>2505 UNIVERSITY BLVD AMES, IA 50010</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>IOWA WESLEYAN UNIVERSITY</td>
<td>601 N MAIN ST MOUNT PLEASANT, IA 52641</td>
<td>42-0680332</td>
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<td>175,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>IPAS</td>
<td>300 MARKET ST STE 134 CHAPEL HILL, NC 27516</td>
<td>56-1071085</td>
<td>501 (C) 3</td>
<td>48,000.</td>
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<td>N/A</td>
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<td>IPFW FOUNDATION</td>
<td>2101 E COLISEUM BLVD FORT WAYNE, IN 46805</td>
<td>35-6033698</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>IRAN HUMAN RIGHTS DOCUMENTATION CENTER INC</td>
<td>129 CHURCH ST STE 423 NEW HAVEN, CT 6510</td>
<td>20-2744292</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>IRDELL MEMORIAL HOSPITAL INCORPORATED</td>
<td>557 BROOKDALE DR STATESVILLE, NC 28677</td>
<td>56-0591303</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>IRINGA HOPE</td>
<td>PO BOX 21055 SAINT PAUL, MN 55121</td>
<td>27-4496193</td>
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<td>57,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>IRIS GLOBAL</td>
<td>PO BOX 493995 REDDING, CA 96049</td>
<td>33-0648658</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>IRIS INC</td>
<td>2521 UNIVERSITY BLVD STE 123 AMES, IA 50010</td>
<td>42-1394408</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>IRISH REPETORY THEATRE COMPANY INC</td>
<td>132 W 22ND ST STE 2 NEW YORK, NY 10011</td>
<td>13-3531713</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>IRON ACADEMY</td>
<td>9660 FALLS OF NEUSE RD 138 263 RALEIGH, NC</td>
<td>45-3816000</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>IRON COUNTY HISTORICAL SOCIETY INC</td>
<td>303 IRON ST HURLEY, WI 54534</td>
<td>39-1251060</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>IRONWOOD THEATRE INC</td>
<td>PO BOX 187 IRONWOOD, MI 49938</td>
<td>38-2833204</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) IRVINE BARCLAY THEATRE OPERATING CO</td>
<td>33-0157868</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) IRVINE NATURAL SCIENCE CENTER INC</td>
<td>52-1231286</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(3) IRVINE ONKURI CHURCH</td>
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<td>FMV</td>
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<td>(4) IRVINE PRESBYTERIAN CHURCH</td>
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<td>(6) IRWIN A AND ROBERT D GOODMAN COMMUNITY CENT</td>
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<td>(7) ISAAC AGREE DOWNTOWN SYNAGOGUE</td>
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<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
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<td>(8) ISABELLA STEWART GARDNER MUSEUM INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) ISAIAH 117 HOUSE</td>
<td>82-0631497</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>(10) ISAMU NOGUCHI FOUNDATION AND GARDEN MUSEUM</td>
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<td>(11) ISHA FOUNDATION INC</td>
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<td>(12) ISIDORE NEWMAN SCHOOL</td>
<td>72-0408935</td>
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<td>FMV</td>
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</table>

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**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   Yes ☑️ No ❌

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISIGHT MISSIONS INC 8030 EL PASEO GRANDE LA JOLLA, CA 92037 46-3625566 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISING SILICON VALLEY 600 COLORADO AVE PALO ALTO, CA 94306 46-4918858 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAMIC ARLUL BAYT ASSOCIATION 12460 LOS INDIOS TRl AUSTIN, TX 78729 74-2819321 501 (C) 3 120,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAMIC EDUCATIONAL COUNCIL 8092 PLANTATION DR WEST CHESTER, OH 45069 31-1398745 501 (C) 3 30,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAMIC MEDICAL ASSOCIATION OF NORTH AMER 101 W 22ND ST STE 104 LOMBARD, IL 60148 36-4166125 501 (C) 3 41,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAMIC RELIEF USA 3655 WHEELER AVE ALEXANDRIA, VA 22304 95-4453134 501 (C) 3 138,184. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAMIC SOCIETY OF NORTH AMERICA INC 6555 S COUNTY ROAD 750 E PLAINFIELD, IN 461 31-1054012 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>ISLAND CONSERVATION 2100 DELAWARE AVE STE 1 SANTA CRUZ, CA 95061 91-1839907 501 (C) 3 23,150. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   - **Yes**
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>ISLAND HERITAGE TRUST INC</td>
<td>01-0426251</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ISLAND HOUSING TRUST</td>
<td>22-2993615</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ISLAND HOUSING TRUST CORPORATION</td>
<td>02-0549245</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ISLAND NURSING HOME INC</td>
<td>51-0172239</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ISLAND SAFE HARBOR ANIMAL SANCTUARY INC</td>
<td>45-2462298</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ISLAND SCHOOL</td>
<td>65-1008401</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>ISLAND WORKFORCE HOUSING</td>
<td>83-3534060</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>ISLANDWOOD</td>
<td>31-1654076</td>
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<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>ISLE OF HOPE UNITED METHODIST CHURCH</td>
<td>58-1081612</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>ISLE OF WIGHT ARTS LEAGUE</td>
<td>54-1889006</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ISLES INC</td>
<td>22-2350832</td>
<td>501 (C) 3</td>
<td>27,080.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ISLESBORO ISLANDS TRUST</td>
<td>22-6296539</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   □ Yes  □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| ISPE FOUNDATION INC  
600 N WEST SHORE BLVD STE 900 TAMPA, FL 336 | 61-1856137 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAAID US INC  
PO BOX 61227 PALO ALTO, CA 94306 | 46-2118225 | 501 (C) 3 | 84,516. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL CANCER RESEARCH FUND INC  
52 VANDERBILT AVE RM 1510 NEW YORK, NY 1001 | 51-0181215 | 501 (C) 3 | 18,800. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL CONGREGATION OF MANCHESTER  
PO BOX 1050 MANCHESTER CENTER, VT 5255 | 03-6007941 | 501 (C) 3 | 26,200. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL EMERGENCY ALLIANCE  
6505 WILSHIRE BLVD LOS ANGELES, CA 90048 | 01-0566033 | 501 (C) 3 | 296,533. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL FOOD DISTRIBUTION INC  
106 PENNINGTON AVE PASSAIC, NJ 7055 | 51-0531922 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL GUIDE DOG CENTER FOR THE BLIND  
968 EASTON RD STE H WARRINGTON, PA 18976 | 23-2519029 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL POLICY FORUM INC  
355 LEXINGTON AVE FL NEW NEW YORK, NY 10017 | 90-0653286 | 501 (C) 3 | 251,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL SCHOLARSHIP EDUCATION FOUNDATION  
520 8TH AVE FL 4 NEW YORK, NY 10018 | 13-2909403 | 501 (C) 3 | 72,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL SELECT CHAITY FUND INC  
8170 MCCORMICK BLVD STE 225 SKOKIE, IL 6007 | 84-2437761 | 501 (C) 3 | 392,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL SPECIAL KIDS FUND  
1284 HASTINGS ST TEANECK, NJ 7666 | 11-3411201 | 501 (C) 3 | 18,600. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| ISRAEL-AMERICA ACADEMIC EXCHANGE  
8383 WILSHIRE BLVD STE 400 BEVERLY HILLS, CA | 26-3402247 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) ISRAELI-AMERICAN COUNCIL</td>
<td>22-3951652</td>
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<td>17,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5900 CANOGA AVE STE 390 WOODLAND HILLS, CA</td>
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<td>(2) ISRALIGHT SOUTH FLORIDA INC</td>
<td>65-0915662</td>
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<td>47,618.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9687 PAVAROTTI TERR APT 102 BOYNTON BEACH, FL</td>
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<tr>
<td>(3) ISSACHAR CENTER</td>
<td>82-4116357</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1220 E 24TH AVE DENVER, CO 80205</td>
<td></td>
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<tr>
<td>(4) ISSAQUAH COMMUNITY SERVICES</td>
<td>91-1499522</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 669 ISSAQUAH, WA 98027</td>
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<tr>
<td>(5) ISSAQUAH FOOD &amp; CLOTHING BANK</td>
<td>91-1245499</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>179 1ST AVE SE ISSAQUAH, WA 98027</td>
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<td>(6) ISSUE ONE</td>
<td>32-0384285</td>
<td>501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1401 K ST NW STE 350 WASHINGTON, DC 20005</td>
<td></td>
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<tr>
<td>(7) IT IS WRITTEN INC</td>
<td>95-3667768</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 6 CHATTANOOGA, TN 37401</td>
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<tr>
<td>(8) IT TAKES PHILLY ENCOURAGING AND EMPOWERING</td>
<td>46-2705205</td>
<td>501 (C) 3</td>
<td>275,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>419 JOHNSON ST JENKINTOWN, PA 19046</td>
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<td>(9) ITEM CHRISTMAS APPEAL</td>
<td>04-2578709</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<tr>
<td>200 CHURCH ST CLINTON, MA 1510</td>
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<td>(10) IVORYTON PLAYHOUSE FOUNDATION INC</td>
<td>06-1020720</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 458 IVORYTON, CT 6442</td>
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<td>(11) IVOTO CIVIC EDUCATION FUND INC</td>
<td>46-2672249</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 382167 CAMBRIDGE, MA 2238</td>
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<td>(12) IVY TECH FOUNDATION INC</td>
<td>23-7073977</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>50 W FALL CREEK PARKWAY NORTH DR INDIANAPOLIS</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>57,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) IYRS SCHOOL OF TECHNOLOGY &amp; TRADES</td>
<td>449 THAMES ST UNIT 111 NEWPORT, RI 2840</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) JDAVID GLADSTONE INSTITUTES</td>
<td>1650 OWENS ST SAN FRANCISCO, CA 94158</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) JF SHEA THERAPEUTIC RIDING CENTER INC</td>
<td>26284 OSO RD SAN JUAN CAPISTRANO, CA 92675</td>
<td>501 (C) 3</td>
<td>49,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) J M PERRY INSTITUTE OF TRADES INDUSTRIES &amp;</td>
<td>2011 N WASHINGTON AVE YAKIMA, WA 98903</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) J SARGEANT REYNOLDS COMMUNITY</td>
<td>1651 E PARRAM RD STE 205 HENRICO, VA 23228</td>
<td>501 (C) 3</td>
<td>160,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) J STREET CHURCH OF CHRIST</td>
<td>714 SW J STREET GRANTS PASS, OR 97526</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) J STREET EDUCATION FUND INC</td>
<td>PO BOX 66073 WASHINGTON, DC 20035</td>
<td>501 (C) 3</td>
<td>94,360.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) JACARANDAMUSIC</td>
<td>1626 N BENTON WAY LOS ANGELES, CA 90026</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) JACK M BARRACK HEBREW ACADEMY</td>
<td>272 S BRYN MAWR AVE BRYN MAWR, PA 19010</td>
<td>501 (C) 3</td>
<td>25,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) JACKSON COUNTY COMMUNITY SERVICES CONSORTIU</td>
<td>PO BOX 1087 MEDFORD, OR 97501</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) JACKSON HEALTH FOUNDATION INC</td>
<td>1500 NW 12TH AVE STE 1117E MIAMI, FL 33136</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I (Form 990) 2020

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>JACKSON HOLE CONSERVATION ALLIANCE</td>
<td>83-0245647</td>
<td>501 (C) 3</td>
<td>10,500.</td>
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<td>2</td>
<td>JACKSON HOLE LAND TRUST</td>
<td>76-2138785</td>
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<td>11,000.</td>
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<td>N/A</td>
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<td>3</td>
<td>JACKSON HOLE THERAPEUTIC RIDING</td>
<td>83-0303555</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>JACKSON LABORATORY</td>
<td>01-0211513</td>
<td>501 (C) 3</td>
<td>17,750.</td>
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<td>N/A</td>
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<td>5</td>
<td>JACKSON PREPARATORY SCHOOL FOUNDATION</td>
<td>57-0889451</td>
<td>501 (C) 3</td>
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<td>6</td>
<td>JACKSON STREET YOUTH SHELTER INC</td>
<td>93-1269503</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>JACKSONVILLE DISTRICT COUNCIL SOCIETY OF ST</td>
<td>27-0212403</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>8</td>
<td>JACKSONVILLE HUMANE SOCIETY</td>
<td>59-0624410</td>
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<td>9</td>
<td>JACKSONVILLE JEWISH CENTER</td>
<td>59-0624411</td>
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<td>JACKSONVILLE SYMPHONY ASSOCIATION</td>
<td>59-6002520</td>
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<td>11</td>
<td>JACOBS 4 CUSHMAN SAN DIEGO FOOD BANK</td>
<td>20-4374795</td>
<td>501 (C) 3</td>
<td>202,850.</td>
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<tr>
<td>12</td>
<td>JACOBS PILLOW DANCE FESTIVAL INC</td>
<td>04-6002993</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
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<tr>
<th>Name of the organization</th>
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<th>IRC section</th>
<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>JACOBS WELL</td>
<td>39-2006345</td>
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<td>27-0612471</td>
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<td>FMV</td>
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<td>JACPCF CHILDCare FOUNdATION INC</td>
<td>65-0334267</td>
<td>501 (C) 3</td>
<td>61,400.</td>
<td>FMV</td>
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<tr>
<td>JAIN SOCIETY OF METROPOLITAN CHICAGO INC</td>
<td>51-0175101</td>
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<td>JAKES HOUSE CHURCH</td>
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<td>25,000.</td>
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<td>JAMES B MORAN CENTER FOR YOUTH ADVOCACY</td>
<td>36-3180725</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>JAMES ISLAND CHRISTIAN CHURCH</td>
<td>57-0846580</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>JAMES JENKINS LIFT US FOUNDATION</td>
<td>84-2398302</td>
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<tr>
<td>JAMES MADISON UNIVERSITY FOUNDATION INC</td>
<td>23-7156305</td>
<td>501 (C) 3</td>
<td>363,500.</td>
<td>FMV</td>
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<td>JAMES WHITCOMB RILEY MEMORIAL ASSOCIATION</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
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<th>8 (h) Purpose of grant or assistance</th>
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<td>36-3266722</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JAMESTOWN FOUNDATION INC</td>
<td>46-1416058</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JAMESTOWN REDISCOVERY FOUNDATION</td>
<td>47-2945490</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>JAMESTOWN YORKTOWN FOUNDATION INC</td>
<td>31-1618642</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JAMESTOWN SOCIETY INC</td>
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<td>FMV</td>
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<td>JANAKA FOUNDATION</td>
<td>94-3400189</td>
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<td>FMV</td>
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<td>JANE GOODALL INSTITUTE FOR WILDLIFE RESEARCH</td>
<td>94-2474731</td>
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<td>38,100.</td>
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<tr>
<td>JANNUS INC</td>
<td>81-6035382</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>JAPAN SOCIETY INC</td>
<td>13-1675082</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>JAPANESE AMERICAN CULTURAL AND COMMUNITY CENTER</td>
<td>23-7124042</td>
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<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JAPANESE GARDEN SOCIETY OF OREGON</td>
<td>93-0511171</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>JARON MINISTRIES INTERNATIONAL INC</td>
<td>77-0325269</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

### Part I  General Information on Grants and Assistance

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   Yes [X]  No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>JARRETTOWN UNITED METHODIST CHURCH 1460 LIMEKILN PIKE DRESHER, PA 19025</td>
<td>23-1702436</td>
<td>501 (C) 3</td>
<td>8,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JARVIS MEMORIAL UNITED METHODIST CHURCH NUR 510 S WASHINGTON ST GREENVILLE, NC 27858</td>
<td>56-1157877</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<tr>
<td>JAMONIO FOUNDATION INC 260 N LITTLE TOR RD NEW CITY, NY 10956</td>
<td>13-3625940</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JAZZ AT ASPEN-SNOWMASS 110 E HALLAM ST STE 104 ASPEN, CO 81611</td>
<td>84-1220222</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JAZZ AT LINCOLN CENTER INC 3 COLUMBUS CIR NEW YORK, NY 10019</td>
<td>13-3888641</td>
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<td>622,500.</td>
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<td>501 (C) 3</td>
<td>16,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>27-1728470</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>JCC OF CENTRAL NEW JERSEY 1391 MARTINE AVE SCOTCH PLAINS, NJ 07076</td>
<td>22-2667094</td>
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<td>50,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>JCC OF MID WESTCHESTER INC 999 WILMOT RD SCARSDALE, NY 10583</td>
<td>13-3617061</td>
<td>501 (C) 3</td>
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<td>JCC ROCKLAND INC 450 W NYACK RD WEST NYACK, NY 10994</td>
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<td>501 (C) 3</td>
<td>23,400.</td>
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<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JDRF INTERNATIONAL 200 VESEY STREET NEW YORK, NY 10281</td>
<td>23-1907729</td>
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<td>1,589,106.</td>
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<tr>
<td>JEANNE RUDDY AND DANCERS INC 1515 BRANDYWINE ST PHILADELPHIA, PA 19130</td>
<td>31-1668674</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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JSA

OE 1288 1.000

18674H 1467  V 20-7.21
**Part I**

**General Information on Grants and Assistance**

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**Part II**

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<td>FMV</td>
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<tr>
<td>4</td>
<td>JEFFERSON CENTER FOR NEW DEMOCRATIC PROCESS</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>5</td>
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<td>8</td>
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<td>187,500.</td>
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<td>9</td>
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<td>84-0533753</td>
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<td>11</td>
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<td>23-2726419</td>
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<td>12</td>
<td>JENKINTOWN FOOD CUPBOARD INC</td>
<td>85-070311</td>
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</table>

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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
## Part I
### General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) JENKINTOWN UNITED METHODIST CHURCH</td>
<td>23-1381423</td>
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<td>(2) JEREMIAH PROGRAM</td>
<td>41-1801834</td>
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<td>(3) JERICHO PROJECT</td>
<td>13-3213525</td>
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<td>(4) JERMI FOUNDATION INC</td>
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<td>(5) JESSE LEE MEMORIAL UNITED METHODIST CHURCH</td>
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<td>(6) JESSIE REES FOUNDATION</td>
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<td>(7) JESUIT COLLEGE PREPARATORY SCHOOL OF DALLAS</td>
<td>75-6054602</td>
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<td>(8) JESUIT COLLEGE PREPARATORY SCHOOL OF DALLAS</td>
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<td>75-2150688</td>
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<td>(12) JESUIT HIGH SCHOOL OF NEW ORLEANS</td>
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<td>FMV</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.
### Schedule I (Form 990) 2020

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN (if applicable)</th>
<th>IRC section</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>JESUIT HIGH SCHOOL OF SACRAMENTO</td>
<td>94-1525873</td>
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<td>JESUIT REFUGEE SERVICE USA</td>
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<td>FMV</td>
<td>N/A</td>
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<td>26-1819306</td>
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<td>FMV</td>
<td>N/A</td>
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<td>JESUS HOUSE OF HOPE INC</td>
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<td>JEVAIA FOUNDATION INC</td>
<td>50 TREMONT ST HARTFORD, CT 6105</td>
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<td>1845 WALNUT ST FL 7 PHILADELPHIA, PA 19103</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Form 990**

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>23-1352118</td>
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<td>48,700. FMV N/A</td>
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</tbody>
</table>

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SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

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<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
<th>(h)</th>
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<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<td>111300 ROCKVILLE PIKE STE 407 ROCKVILLE, MD</td>
<td>52-1515202</td>
<td>501 (C) 3</td>
<td>50,000.</td>
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<td>JEWISH CAMPUS ACTIVITIES BOARD</td>
<td>215 S 39TH ST PHILADELPHIA, PA 19104</td>
<td>23-1365179</td>
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<td>30,800.</td>
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<td>JEWISH CENTER FOR THE UNITED NATIONS</td>
<td>225 E 51ST ST NEW YORK, NY 10022</td>
<td>13-2542363</td>
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<td>24,354.</td>
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<td>JEWISH CENTER OF EASTERN BUCKS INC</td>
<td>1444 YARDLEY NEWTOWN RD YARDLEY, PA 19067</td>
<td>47-2872974</td>
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<td>5,940.</td>
<td>FMV</td>
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<td>858 E 29TH ST BROOKLYN, NY 11210</td>
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<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH COMMUNITY BOARD OF AKRON INC</td>
<td>750 WHITE POND DR AKRON, OH 44320</td>
<td>34-1884695</td>
<td>501 (C) 3</td>
<td>19,180.</td>
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<td>333 NARANTON ST NEWTON CENTER, MA 2459</td>
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<td>29,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH COMMUNITY CENTER OF HARRISON INC</td>
<td>130 UNION AVE HARRISON, NY 10528</td>
<td>13-1948445</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3801 E WILLOW ST LONG BEACH, CA 90815</td>
<td>95-2280871</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH COMMUNITY CENTER OF NORTH AND SOUTH</td>
<td>1001 FINNEGANS LN NORTHERN BRUNSWICK, NJ 8902</td>
<td>22-2249762</td>
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<td>9,569.</td>
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<td>JEWISH COMMUNITY CENTER OF SAN FRANCISCO</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>JEWISH COMMUNITY CENTER OF SANTA CRUZ CALIF</td>
<td>94-6139655</td>
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<tr>
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<td>350 S DAHLIA ST DENVER, CO 80226</td>
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<tr>
<td>JEWISH COMMUNITY CENTRE OF SUMMIT N J</td>
<td>22-6009059</td>
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<td>JEWISH COMMUNITY FEDERATION OF RICHMOND</td>
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<tr>
<td>RICHMOND 5403 MONUMENT AVENUE RICHMOND, VA</td>
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<tr>
<td>JEWISH COMMUNITY FEDERATION OF S F MARIN PE</td>
<td>94-1156533</td>
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<tr>
<td>121 STEUART ST SAN FRANCISCO, CA 94105</td>
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<td>JEWISH COMMUNITY FOUNDATION OF GREATER METRO</td>
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<tr>
<td>1 FEDERATION WAY STE 230 IRVINE, CA 92603</td>
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<td>50,000.</td>
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<td>1201 N SCOTTSDALE RD STE 202 SCOTTSDALE, AZ</td>
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<tr>
<td>JEWISH COMMUNITY FOUNDATION OF ORANGE COUNTY</td>
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<tr>
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<tr>
<td>JEWISH COMMUNITY LEARNING CENTER INC</td>
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<td>22,000.</td>
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<tr>
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Enter total number of other organizations listed in the line 1 table: .......................................................... [ ]

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

### Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

### Employer identification number

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
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<tr>
<td>JEWISH COMMUNITY OF LOUISVILLE INC</td>
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<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>126 HIGH ST 4TH FL BOSTON, MA 2110</td>
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<td>JEWISH COMMUNITY RELATIONS COUNCIL OF NEW YORK</td>
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<td>JEWISH COUNCIL FOR THE AGING OF GREATER WAS</td>
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<td>12320 PARKLAWN DR ROCKVILLE, MD 20852</td>
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<td>JEWISH DISCOVERY CENTER</td>
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<td>15,000.</td>
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<td>JEWISH EDUCATIONAL CENTER</td>
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<tr>
<td>330 ELMORA AVE ELIZABETH, NJ 7208</td>
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<td>JEWISH ENRICHMENT CENTER</td>
<td>13-3959885</td>
<td>501 (C) 3</td>
<td>21,675.</td>
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<td>38 W 13TH ST NEW YORK, NY 10011</td>
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<tr>
<td>JEWISH FAMILY &amp; CHILDMEN'S SERVICE OF GREAT</td>
<td>21-0634563</td>
<td>501 (C) 3</td>
<td>68,700.</td>
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<td>707 ALEXANDER RD PRINCETON, NJ 8540</td>
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<td>JEWISH FAMILY &amp; CHILDREN SERVICES</td>
<td>94-1156528</td>
<td>501 (C) 3</td>
<td>126,640.</td>
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<td>14,800.</td>
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<td>20,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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</table>

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

Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467  V 20-7.21
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>7. (g) Description of noncash assistance</th>
<th>8. (h) Purpose of grant or assistance</th>
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<tr>
<td>JEWISH FAMILY AND CHILDREN'S SERVICE OF GREATER PHILADELPHIA, PA 19103</td>
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<tr>
<td>JEWISH FAMILY AND COMMUNITY SERVICES EAST BAY, BERKELEY, CA 94704</td>
<td>94-3250304</td>
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<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE, 495 E 4500 S STE 100 SALT LAKE CITY, UT 84109</td>
<td>87-0227089</td>
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<td>77,000.</td>
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<tr>
<td>JEWISH FAMILY SERVICE &amp; CHILDREN'S CENTER OF NEW JERSEY, PASSaic, NJ 7055</td>
<td>20-5928151</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE OF COLORADO INC, 3201 S TAMARAC DR DENVER, CO 80231</td>
<td>84-0402701</td>
<td>501 (C) 3</td>
<td>19,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE OF DALLAS INCORPORATED, 5402 ARAPAHO RD DALLAS, TX 75235</td>
<td>75-1992728</td>
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<td>25,600.</td>
<td>FMV</td>
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<td>JEWISH FAMILY SERVICE OF GREATER NEW HAVEN, 1440 WALDEN AVE NEW HAVEN, CT 6511</td>
<td>06-0646692</td>
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<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE OF LOS ANGELES, 330 N FAIRFAX AVE LOS ANGELES, CA 90036</td>
<td>95-1691013</td>
<td>501 (C) 3</td>
<td>824,350.</td>
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<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE OF METROWEST NJ A NEW JERSEY, 256 COLUMBIA TPKE STE 105 FLORHAM PARK, NJ 07932</td>
<td>22-1687995</td>
<td>501 (C) 3</td>
<td>15,200.</td>
<td>FMV</td>
<td>N/A</td>
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<td>JEWISH FAMILY SERVICE OF SAN DIEGO, 8804 BALBOA AVE SAN DIEGO, CA 92123</td>
<td>95-1644024</td>
<td>501 (C) 3</td>
<td>48,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEMPT</td>
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<tr>
<td>JEWISH FAMILY SERVICE OF SANTA CLARITA, 14885 SANTA CLARITA RD STE 202 LAGUNA HILLS, CA 92653</td>
<td>94-2536452</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEMPT</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

.vertx

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

**Department of the Treasury**
Internal Revenue Service

**Name of the organization**
VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**
23-2888152

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ............................................................ Yes ☑ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2</td>
<td>JEWISH FAMILY SERVICES</td>
<td>44-0545829</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>3</td>
<td>JEWISH FAMILY SERVICES OF WASHTENAW COUNTY</td>
<td>41-2147486</td>
<td>501 (C) 3</td>
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<td>JEWISH FEDERATION OF GREATER NAPLES INC</td>
<td>59-2151725</td>
<td>501 (C) 3</td>
<td>33,600.</td>
<td>FMV</td>
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<td>JEWISH FEDERATION COUNCIL OF GREATER LOS AN</td>
<td>95-1643388</td>
<td>501 (C) 3</td>
<td>71,236.</td>
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<td>23-7300057</td>
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<td>31-0537174</td>
<td>501 (C) 3</td>
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<td>9</td>
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<td>10</td>
<td>JEWISH FEDERATION OF EASTERN CONNECTICUT INC</td>
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<td>JEWISH FEDERATION OF EL PASO</td>
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<td>12</td>
<td>JEWISH FEDERATION OF GREATER ANN ARBOR</td>
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<td>FMV</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ............................................................

Enter total number of other organizations listed in the line 1 table: ............................................................

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>JEWISH FEDERATION OF GREATER ATLANTA INC</td>
<td>1440 SPRING ST NW ATLANTA, GA 30309</td>
<td>58-1021791 501 (C) 3</td>
<td>45,500.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER DALLAS</td>
<td>7800 NORTHAVEN RD DALLAS, TX 75230</td>
<td>75-0800654 501 (C) 3</td>
<td>15,950.</td>
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<td>JEWISH FEDERATION OF GREATER HARTFORD</td>
<td>333 BLOOMFIELD AVE STE C WEST HARTFORD, CT</td>
<td>06-0655482 501 (C) 3</td>
<td>13,400.</td>
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<td>JEWISH FEDERATION OF GREATER INDIANAPOLIS I</td>
<td>6705 HOOVER RD INDIANAPOLIS, IN 46260</td>
<td>35-0888017 501 (C) 3</td>
<td>40,500.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER LONG BEACH AND</td>
<td>3801 E WILLOW ST LONG BEACH, CA 90815</td>
<td>95-1647830 501 (C) 3</td>
<td>25,000.</td>
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<td>JEWISH FEDERATION OF GREATER MANCHESTER</td>
<td>273 S RIVER RD STE 5 BEDFORD, NH 3110</td>
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<td>6,000.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER METROWEST NJ</td>
<td>901 STATE ROUTE 10 WHIPPANY, NJ 7981</td>
<td>22-1487222 501 (C) 3</td>
<td>267,480.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER PHILADELPHIA</td>
<td>2100 ARCH ST 8TH FL PHILADELPHIA, PA 19103</td>
<td>23-1500085 501 (C) 3</td>
<td>646,117.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER PITTSBURGH</td>
<td>2000 TECHNOLOGY DR FL 1 PITTSBURG, PA 1521</td>
<td>25-1017602 501 (C) 3</td>
<td>54,900.</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER PORTLAND</td>
<td>9900 SW GREENBURG RD STE 220 PORTLAND, OR 9</td>
<td>93-0386825 501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<tr>
<td>JEWISH FEDERATION OF GREATER SEATTLE</td>
<td>2033 6TH AVE STE 810 SEATTLE, WA 98121</td>
<td>91-0575950 501 (C) 3</td>
<td>76,500.</td>
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<td>JEWISH FEDERATION OF GREATER ST PAUL</td>
<td>790 CLEVELAND AVE S STE 227 SAINT PAUL, MN</td>
<td>41-0693887 501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

**Note:**
- For Paperwork Reduction Act Notice, see the Instructions for Form 990.
- Schedule I (Form 990) 2020

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

---

**Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

**Enter total number of other organizations listed in the line 1 table.**
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>JEWISH FEDERATION OF GREATER TOLEDO</td>
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<td>8505 SAN JOSE BLVD JACKSONVILLE, FL 32217</td>
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<td>6434 ENTERPRISE LN MADISON, WI 53719</td>
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<td>30 S WELLS ST # 4049 CHICAGO, IL 60606</td>
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<td>50 EISENHOWER DR PARAMUS, NJ 7652</td>
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<td>JEWISH FEDERATION OF PALM BEACH COUNTY INC</td>
<td>59-0948696</td>
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<td>1 HARVARD CIR WEST PALM BEACH, FL 33409</td>
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<td>69710 HIGHWAY 111 RANCHO MIRAGE, CA 92270</td>
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<td>59-0697685</td>
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<td>JEWISH FEDERATION OF SAN ANTONIO</td>
<td>74-1109662</td>
<td>501 (C) 3</td>
<td>17,700</td>
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<tr>
<td>12500 NW MILITARY HWY STE 200 SAN ANTONIO</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ✔ Yes  ❌ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>JEWISH FEDERATION OF SILICON VALLEY</td>
<td>14855 OAK RD LOS GATOS, CA 95032</td>
<td>94-1167405</td>
<td>501 (C) 3</td>
<td>5,100.</td>
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<td>JEWISH FEDERATION OF SOUTH PALM BEACH COUNTRY</td>
<td>9901 DONNA KLEIN BLVD BOCA RATON, FL 33428</td>
<td>59-1945109</td>
<td>501 (C) 3</td>
<td>92,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH FEDERATION OF SOUTHERN ARIZONA</td>
<td>3718 E RIVER ROAD SUITE 100 TUCSON, AZ 8571</td>
<td>86-0096705</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
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<td>JEWISH FEDERATION OF SOUTHERN NEW JERSEY</td>
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<td>21-0634489</td>
<td>501 (C) 3</td>
<td>21,420.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JEWISH FEDERATION OF ST JOSEPH VALLEY INC</td>
<td>3202 SHALOM WAY SOUTH BEND, IN 46615</td>
<td>35-0941124</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>JEWISH FEDERATION OF ST LOUIS</td>
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<td>43-0652643</td>
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<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH FEDERATION OF THE LEHIGH VALLEY</td>
<td>702 N 22ND ST ALLENTOWN, PA 18104</td>
<td>23-6396949</td>
<td>501 (C) 3</td>
<td>23,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JEWISH FEDERATION OF VOLUSIA &amp; FLAGLER COUNCIL</td>
<td>470 ANDALUSIA AVE ORMOND BEACH, FL 32174</td>
<td>59-1774958</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>JEWISH FOUNDATION FOR GROUP HOMES</td>
<td>1500 E JEFFERSON ST ROCKVILLE, MD 20852</td>
<td>52-1263608</td>
<td>501 (C) 3</td>
<td>21,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JEWISH FREE LOAN ASSOCIATION</td>
<td>6505 WILSHIRE BLVD STE 715 LOS ANGELES, CA</td>
<td>95-1691014</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JEWISH FUNDERS NETWORK</td>
<td>150 W 30TH ST RM 900 NEW YORK, NY 10001</td>
<td>23-2742282</td>
<td>501 (C) 3</td>
<td>11,850.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JEWISH GRADUATE STUDENT INITIATIVE INC</td>
<td>1445 S BEVERLY DR LOS ANGELES, CA 90035</td>
<td>80-0716359</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**
2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td><strong>(1)</strong> JEWISH HERITAGE PROGRAMS</td>
<td></td>
<td>501 (C) 3</td>
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<td>4037 PINE ST PHILADELPHIA, PA 19104</td>
<td>13-3780385</td>
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<tr>
<td><strong>(2)</strong> JEWISH HOME FOUNDATION OF NORTH JERSEY INC</td>
<td>52-1720580</td>
<td>501 (C) 3</td>
<td>9,290.</td>
<td>FMV</td>
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<tr>
<td>10 LINK DR ROCKLEIGH, NJ 7647</td>
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<td><strong>(3)</strong> JEWISH HOME LIFECARE MANHATTAN</td>
<td>13-1624033</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<tr>
<td>120 W 106TH ST NEW YORK, NY 10025</td>
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<td><strong>(4)</strong> JEWISH INSTITUTE OF QUEENS</td>
<td>54-2068797</td>
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<td>6005 WOODHAVEN BLVD ELMHURST, NY 11373</td>
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<td><strong>(5)</strong> JEWISH LATIN YOUTH CENTER INC</td>
<td>83-2834778</td>
<td>501 (C) 3</td>
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<td><strong>(6)</strong> JEWISH LEARNING EXPERIENCE INC</td>
<td>47-3992426</td>
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<td>725 MONTGOMERY ST BROOKLY, NY 11213</td>
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<td><strong>(7)</strong> JEWISH LEARNING FOUNDATION</td>
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<td><strong>(8)</strong> JEWISH MUSEUM</td>
<td>13-6146854</td>
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<td><strong>(9)</strong> JEWISH NATIONAL FUND - KEREN KAYEMETH LEISRA</td>
<td>13-1653627</td>
<td>501 (C) 3</td>
<td>541,200.</td>
<td>FMV</td>
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<td>78 RANDALL AVE ROCKVILLE CTR, NY 11570</td>
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<td><strong>(10)</strong> JEWISH NATIONAL FUND-USA INC</td>
<td>13-2880252</td>
<td>501 (C) 3</td>
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<td>42 E 69TH ST NEW YORK, NY 10021</td>
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<td><strong>(11)</strong> JEWISH NEWS SERVICE INC</td>
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<td>40 NONANTUM ST NEWTON, MA 2458</td>
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<td><strong>(12)</strong> JEWISH RECONSTRUCTIONIST CAMPING CORPORATI</td>
<td>36-4478803</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1 JEWISH RELIEF AGENCY</td>
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<tr>
<td>2 JEWISH RESIDENTIAL SERVICES INC</td>
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<td>FMV</td>
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<td>3 JEWISH RESOURCE CENTER CHABAD OF</td>
<td>22-3787211</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 JEWISH SERVICE FOR THE DEVELOPMENT- ALLY DI</td>
<td>22-3479872</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<td>5 JEWISH SOCIAL SERVICE AGENCY</td>
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<td>6 JEWISH SOCIAL SERVICES OF MADISON INC</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7 JEWISH STUDENT ENRICHMENT CENTER INC</td>
<td>26-1753729</td>
<td>501 (C) 3</td>
<td>72,000.</td>
<td>FMV</td>
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<td>8 JEWISH STUDIO PROJECT</td>
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<td>10,000.</td>
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<td>9 JEWISH THEOLOGICAL SEMINARY OF AMERICA</td>
<td>13-0887640</td>
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<td>28,200.</td>
<td>FMV</td>
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<tr>
<td>10 JEWISH UNITED FUND OF METROPOLITIC CHICAGO</td>
<td>36-2167034</td>
<td>501 (C) 3</td>
<td>350,526.</td>
<td>FMV</td>
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<td>11 JEWISH VOCATIONAL SERVICE INC</td>
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<td>FMV</td>
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<td>12 JEWISH WISDOM FOUNDATION</td>
<td>47-4315104</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table. .......................................................... ..........................
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<tr>
<td>1</td>
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<td>21,000. FMV</td>
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<td>2</td>
<td>JENS FOR JESUS</td>
<td>94-2222464</td>
<td>501 (c) 3</td>
<td>45,800. FMV</td>
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<td>JENS FOR JUDAISM INTERNATIONAL INC</td>
<td>95-4040781</td>
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<td>20,000. FMV</td>
<td>N/A</td>
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<td>4</td>
<td>JENS FOR RACIAL AND ECONOMIC JUSTICE</td>
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<td>6,040. FMV</td>
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<td>JOAN LOS ANGELES</td>
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</table>

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>JOE ANDRIZZI FOUNDATION INC 49 PLAIN ST FL 1 NORTH ATTLEBORO, MA 2760</td>
<td>26-2017043</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOE DIMAGGIO CHILDRENS HOSPITAL FOUNDATION 3329 JOHNSON ST HOLLYWOOD, FL 33021</td>
<td>65-0492343</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>JOE HAND BOXING GYM 213 W STREET RD FEASTERVILLE TREVOSE, PA 19</td>
<td>23-2838121</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
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<td>JOEY D DONNELL FOUNDATION TRUST 55 CAMBRIDGE PKWY STE 200 CAMBRIDGE, MA 214</td>
<td>04-2943314</td>
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<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>JOHN AUSTIN CHELEY FOUNDATION 1420 N OGDEN ST STE 102 DENVER, CO 80218</td>
<td>48-1077337</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>JOHN BARTRAM ASSOCIATION 54TH LINDBERGH BLVD PHILADELPHIA, PA 19143</td>
<td>23-7393771</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>JOHN BROWN UNIVERSITY 2000 W UNIVERSITY ST SILOAM SPRGS, AR 72761</td>
<td>71-0239576</td>
<td>501 (C) 3</td>
<td>78,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOHN BURROUGHS SCHOOL 755 S PRICE RD SAINT LOUIS, MO 63124</td>
<td>43-0652619</td>
<td>501 (C) 3</td>
<td>61,659.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>JOHN C BOGLE CENTER FOR FINANCIAL LITERACY 3408 S ATLANTIC AVE STE 123 DAYTONA BEACH,</td>
<td>27-4067736</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>JOHN F KENNEDY CENTER FOR THE PERFORMING AR 2700 F ST NW WASHINGTON, DC 20566</td>
<td>53-0245017</td>
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<td>486,600.</td>
<td>FMV</td>
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<td>JOHN GEORGE HOME INC 1501 E GANSON ST JACKSON, MI 49202</td>
<td>38-1347563</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>JOHN H ENDERS FIRE CO INC 9 S BUCKMARSH ST BERRYVILLE, VA 22611</td>
<td>56-6041675</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..............................

3. Enter total number of other organizations listed in the line 1 table: ..............................

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN HART HUNTER EDUCATIONAL FNDN INC</td>
<td>22-2991883</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>DOUG STIVES 114 AUGUSTA DRIVE LINCOLN, NJ</td>
<td>23-1417540</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>JOHN K MACIVER INSTITUTE FOR PUBLIC POLICY</td>
<td>26-2639114</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>JOHN LOCKE FOUNDATION INC</td>
<td>56-1656943</td>
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<td>8,500.</td>
<td>FMV</td>
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<td>JOHN MICHAEL KOHLER ARTS CENTER INC</td>
<td>39-1085180</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>JOHN MUIR LAND TRUST</td>
<td>68-0194652</td>
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<td>JOHN PAUL II HIGH SCHOOL</td>
<td>75-2679651</td>
<td>501 (C) 3</td>
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<td>20-5239366</td>
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<tr>
<td>JOHN T FONTAINE JR CHARITY INC</td>
<td>81-2839933</td>
<td>501 (C) 3</td>
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<td>JOHN TRESSEEN CHILDRENS FOUNDATION</td>
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<td>JOHN THOMAS DYE SCHOOL</td>
<td>95-1722221</td>
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<td>JOHN TRACY CLINIC</td>
<td>95-1642393</td>
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<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Schedule I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>JOHN WESLEY FREE METHODIST CHURCH 5900 W 46TH ST INDIANAPOLIS, IN 46254</td>
<td>35-1560500</td>
<td>501 (C) 3</td>
<td>33,515</td>
<td>FMV</td>
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<tr>
<td>JOHN WESLEY UNITED METHODIST CHURCH 1689 OLD SAINT AUGUSTINE RD TALLAHASSEE, FL</td>
<td>59-6140993</td>
<td>501 (C) 3</td>
<td>21,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOHN WESLEY UNITED METHODIST CHURCH 1927 WEST KEMPER ROAD CINCINNATI, OH 32301</td>
<td>31-0816365</td>
<td>501 (C) 3</td>
<td>33,500</td>
<td>FMV</td>
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<tr>
<td>JOHN WESLEY UNITED METHODIST CHURCH 5830 BERMUDA DUNES DR HOUSTON, TX 77069</td>
<td>74-1985922</td>
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<tr>
<td>JOHNNY MAC SOLDIERS FUND INC 63 SOUTH ST STE 300 HOPKINTON, MA 1748</td>
<td>46-5368055</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>JOHNS HOPKINS ALL CHILDREN'S HOSPITAL INC 3910 KESWICK RD BLDG 4100 BALTIMORE, MD 212</td>
<td>59-0683252</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>JOHNS HOPKINS UNIVERSITY 3910 KESWICK RD STE N4327 BALTIMORE, MD 21</td>
<td>52-0595110</td>
<td>501 (C) 3</td>
<td>2,662,350</td>
<td>FMV</td>
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<td>JOHNS ISLAND COMMUNITY SERVICE LEAGUE DBA TAMBOURINE RESALE SHOP 1619 10 VERO BEACH</td>
<td>59-1978180</td>
<td>501 (C) 3</td>
<td>17,300</td>
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<tr>
<td>JOHNS ISLAND FOUNDATION INC 6001 HIGHWAY A1A PMB 8323 VERO BEACH, FL 32</td>
<td>65-0916419</td>
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<td>19,500</td>
<td>FMV</td>
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<tr>
<td>JOHNSON &amp; WALES UNIVERSITY 8 ABBOTT PARK PL PROVIDENCE, RI 2903</td>
<td>05-0306204</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>JOHNSON CREEK WATERSHED ASSOCIATION 4033 SE WOODSTOCK BLVD SUITE B PORTLAND, OR</td>
<td>93-1311608</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOHNSON FERRY BAPTIST CHURCH 955 JOHNSON FERRY RD MARIETTA, GA 30068</td>
<td>58-1450748</td>
<td>501 (C) 3</td>
<td>444,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
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<td>1. JOHNSTON COMMUNITY COLLEGE FOUNDATION INC</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 2350 SMITHFIELD, NC 27577</td>
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<td>2. JOHNSTON MEMORIAL HOSPITAL FOUNDATION</td>
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<td>FMV</td>
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<td>PO BOX 1376 SMITHFIELD, NC 27577</td>
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<td>3. JOIN</td>
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<td>FMV</td>
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<td>1435 NE 81ST AVE STE 100 PORTLAND, OR 97213</td>
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<td>4. JOLIET JUNIOR COLLEGE FOUNDATION</td>
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<td>1215 HOUBL RD JOLIET, IL 60431</td>
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<td>5. JOLT INITIATIVE</td>
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<td>PO BOX 4185 AUSTIN, TX 78765</td>
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<td>6. JONAS PHILANTHROPIES INC</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 705 NEW YORK, NY 10032</td>
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<td>7. JONES CENTER FOR FAMILIES INC</td>
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<tr>
<td>922 E EMMA AVE SPRINGDALE, AR 72764</td>
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<td>8. JONES MEMORIAL UNITED METHODIST CHURCH</td>
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<td>FMV</td>
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<tr>
<td>55 LANDING RD KINGSTON, MA 2364</td>
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<tr>
<td>PO BOX 3333 AGOUNA HILLS, CA 91376</td>
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<td>12. JONSSON CANCER CENTER FOUNDATION- UCLA</td>
<td>95-2242757</td>
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<td>1,006,700.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 951780 LOS ANGELES, CA 90095</td>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. JORGE M PEREZ ART MUSEUM OF MIAMI DADE COUN</td>
<td>59-2048869</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2. JOSEPH KUSNER HEBREW ACADEMY</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3. JOSEPHINUM ACADEMY</td>
<td>36-2167764</td>
<td>501 (C) 3</td>
<td>46,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4. JOSEPHS HOUSE OF CAMDEN</td>
<td>27-4417979</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5. JOSH ANDERSON FOUNDATION</td>
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<td>FMV</td>
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<td>6. JOSHUA FUND</td>
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<td>20-5350994</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. JOSHUA GLYNN MEMORIAL FOUNDATION INC</td>
<td>83-2420087</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. JOSHUA M FREEMAN FOUNDATION</td>
<td>8015 AMERICANA PKWY SELBYVILLE, DE 19975</td>
<td>20-8592383</td>
<td>55,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9. JOSHUA P WILLIAMS GOLF TOURNAMENT</td>
<td>42-1593012</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10. JOSIAH VENTURE NFP</td>
<td>36-4469008</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11. JOSLIN DIABETES CENTER INC</td>
<td>04-2203836</td>
<td>501 (C) 3</td>
<td>27,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12. JOTHM INC</td>
<td>2048 S BYRNE RD TOLEDO, OH 43614</td>
<td>20-3160046</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ▢ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOURNEY BIBLE CHURCH INC</td>
<td>13700 W 151ST ST OLAHE, KS 66062</td>
<td>48-0928553</td>
<td>501 (c) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JOURNEY CENTER FOR SAFETY AND HEALING</td>
<td>PO BOX 5386 CLEVELAND, OH 44101</td>
<td>84-3398528</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JOURNEY CHURCH FRANKLIN</td>
<td>1600 WILSON PIKE BRENTWOOD, TN 37027</td>
<td>20-8136750</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JOURNEY OF A JOYFUL LIFE FOUNDATION</td>
<td>PO BOX 131143 SPRING, TX 77393</td>
<td>46-0682168</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOURNEY OF FAITH</td>
<td>1243 ARTESIA BLVD MANHATTAN BEACH, CA 90266</td>
<td>95-1693539</td>
<td>501 (c) 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOURNEYCARE INC</td>
<td>2050 CLAIRE CT GLENVIEW, IL 60025</td>
<td>36-3305643</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOURNEYMAN INTERNATIONAL</td>
<td>3471 N MAIN ST PRINEVILLE, OR 97754</td>
<td>21-0478912</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JOURNEYS WITHIN OUR COMMUNITY</td>
<td>11260 DONNER PASS RD PMB 256 TRUCKEE, CA 96</td>
<td>47-0953817</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOYCE MEYER MINISTRIES INC</td>
<td>700 GRACE PKWY FENTON, MO 63026</td>
<td>43-1382734</td>
<td>501 (c) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOYCE THEATER FOUNDATION INC</td>
<td>175 8TH AVENUE NEW YORK, NY 10011</td>
<td>13-3038262</td>
<td>501 (c) 3</td>
<td>32,925.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOYFUL HEART FOUNDATION</td>
<td>320 7TH Ave # 161 BROOKLYN, NY 11215</td>
<td>72-1519557</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JOYFUL MUSIC THERAPY FOUNDATION INC</td>
<td>719 LEE RD ORLANDO, FL 32810</td>
<td>81-5224569</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1)</td>
<td>J-SEI-INC</td>
<td>94-2496799</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>(2)</td>
<td>JUBILEE ASSOCIATION INC</td>
<td>25-1394229</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3)</td>
<td>JUBILEE FAMILY DEVELOPMENT CENTER INC</td>
<td>54-1881948</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>JUBILEE HOUSING INC</td>
<td>52-0986261</td>
<td>501 (C) 3</td>
<td>12,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>JUBILEE JUSTICE INC</td>
<td>84-3932961</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>JUBILEE PRESBYTERIAN CHURCH</td>
<td>23-2960552</td>
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<td>5,300.</td>
<td>FMV</td>
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<td>(7)</td>
<td>JUBILEE REACH</td>
<td>20-4074712</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(8)</td>
<td>JUBILEE SCHOOL INC</td>
<td>82-2498390</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(9)</td>
<td>JUDAISM ALIVE</td>
<td>26-3766713</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(10)</td>
<td>JUDAISM YOUR WAY</td>
<td>46-0517841</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(11)</td>
<td>JUDEA REFORM CONGREGATION</td>
<td>56-1337018</td>
<td>501 (C) 3</td>
<td>15,702.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>JUDGE BAKER CHILDRENS CENTER</td>
<td>04-2103860</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.

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## Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>JUDGE DAVID L BAZELON CENTER FOR MENTAL HEA</td>
<td>1090 VERMONT AVE NW WASHINGTON, DC 20005</td>
<td>23-7268143</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>JUDGE MEMORIAL CATHOLIC HIGH SCHOOL</td>
<td>650 S 1100 E SALT LAKE CITY, UT 84102</td>
<td>87-6000473</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>JUDGES AND LAWYERS BREAST CANCER ALERT INC</td>
<td>100 CROSBY ST RM 303 NEW YORK, NY 10012</td>
<td>13-3679981</td>
<td>501 (C) 3</td>
<td>80,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>JUDICIAL WATCH INC</td>
<td>425 3RD ST SW STE 800 WASHINGTON, DC 20024</td>
<td>52-1885088</td>
<td>501 (C) 3</td>
<td>610,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>JUDITH CREED HORIZONS FOR ACHIEVING INDEP</td>
<td>FEDERATION HALL - 274 SOUTH BRYN MA BRYN MA</td>
<td>23-2493728</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>JUDSON FOUNDATION</td>
<td>2181 AMBLESIDE DR CLEVELAND, OH 44106</td>
<td>32-0048863</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>JUEGA COMO CAMPION</td>
<td>2000 SALZEDO ST CORAL GABLES, FL 33134</td>
<td>83-2516699</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>JULIARIAD SCHOOL</td>
<td>60 LINCOLN CENTER PLZ NEW YORK, NY 10023</td>
<td>13-1624067</td>
<td>501 (C) 3</td>
<td>545,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>JULIAN CENTER INC</td>
<td>2011 N MERIDIAN ST INDIANAPOLIS, IN 46202</td>
<td>35-1346514</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>JULIES HEARTCRY INCORPORATED</td>
<td>4425B EASTWICK CT LYNCHBURG, VA 22033</td>
<td>82-1067631</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>JUMPSTART FOR YOUNG CHILDREN INC</td>
<td>308 CONGRESS ST 6TH FL BOSTON, MA 2210</td>
<td>04-3262046</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>JUNEAU COOPERATIVE CHRISTIAN MINISTRY</td>
<td>247 S FRANKLIN ST JUNEAU, AK 99801</td>
<td>92-0085663</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Schedule I (Form 990) 2020

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**SCHEDULE I**  
*(Form 990)*

Department of the Treasury  
Internal Revenue Service  
OMB No. 1545-0047  
2020  
Open to Public Inspection  
20-7.21
**General Information on Grants and Assistance**

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>JUNIATA COLLEGE</td>
<td>1700 MOORE ST HUNTINGDON, PA 16652</td>
<td>23-1352652</td>
<td>501 (C) 3</td>
<td>65,187.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUNIOR ACHIEVEMENT OF CHICAGO</td>
<td>651 W WASHINGTON BLVD STE 404 CHICAGO, IL 6</td>
<td>36-2170141</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JUNIOR ACHIEVEMENT OF DELAWARE INC</td>
<td>522 S WALNUT ST WILMINGTON, DE 19801</td>
<td>51-0078199</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>JUNIOR ACHIEVEMENT OF GEORGIA INC</td>
<td>275 NORTHSIDE DR NW ATLANTA, GA 30314</td>
<td>58-0598050</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUNIOR ACHIEVEMENT OF NEW YORK</td>
<td>420 LEXINGTON AVE RM 205 NEW YORK, NY 10170</td>
<td>13-3031828</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUNIOR ACHIEVEMENT OF NORTHERN INDIANA</td>
<td>550 E WALLEN RD FORT WAYNE, IN 46825</td>
<td>35-0922731</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JUNIOR ACHIEVEMENT OF NORTHERN NEW ENGLAND</td>
<td>209 BURLINGTON RD STE 211 BEDFORD, MA 1730</td>
<td>04-2127020</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUNIOR ACHIEVEMENT OF SOUTH CENTRAL PENNSYL</td>
<td>610 S GEORGE ST YORK, PA 17401</td>
<td>23-1598129</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JUNIOR ACHIEVEMENT OF SOUTHEAST TEXAS INC</td>
<td>2115 E GOVERNORS CIR HOUSTON, TX 77092</td>
<td>74-1153957</td>
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<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JUNIOR ACHIEVEMENT OF SOUTHERN CA</td>
<td>6250 FOREST LAWN DR LOS ANGELES, CA 90068</td>
<td>95-1799192</td>
<td>501 (C) 3</td>
<td>83,000</td>
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<td>JUNIOR ACHIEVEMENT OF SOUTHWEST NEW ENGLAND</td>
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<td>6,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>JUNIOR ACHIEVEMENT OF THE MICHIGAN GREAT LA</td>
<td>741 KENMORE AVE SE STE C GRAND RAPIDS, MI 4</td>
<td>38-1557861</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>JUNIOR ACHIEVEMENT OF THE MICHIGAN GREAT LA</td>
<td>741 KENMORE AVE SE STE C GRAND RAPIDS, MI 4</td>
<td>38-1557861</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### Table

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| JUNIOR ACHIEVEMENT OF WASHINGTON  
1610 PERIMETER RD AUBURN, WA 98001  
91-0604913  
501 (C) 3 | 12,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR ACHIEVEMENT OF WISCONSIN INC  
1111 W LIBERTY DR MILWAUKEE, WI 53224  
39-0826295  
501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR ACHIEVEMENT USA  
1 EDUCATION WAY COLORADO SPRINGS, CO 80906  
84-1267604  
501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR LEAGUE OF ATLANTA INC  
3154 NORTHSIDE PKE NW ATLANTA, GA 30327  
58-0600947  
501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR LEAGUE OF ST LOUIS INC  
106 N KIRKWOOD RD SAINT LOUIS, MO 63122  
43-0666754  
501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR LEAGUE OF SUMMIT INC  
37Deforest Ave Summit, NJ 7901  
22-1508586  
501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIOR STATE OF AMERICA FOUNDATION  
70 WASHINGTON ST STE 320 OAKLAND, CA 94607  
94-6050452  
501 (C) 3 | 6,776. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIPEP FOUNDATION  
5515 SIERRA RD SAN JOSE, CA 95132  
94-3086584  
501 (C) 3 | 112,500. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUNIPEP  
600 WASHINGTON AVE PHILADELPHIA, PA 19147  
01-0769538  
501 (C) 3 | 29,540. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUPITER ISLAND MEDICAL CLINIC INC  
100 ESTRADA SQ Hobe Sound, FL 33455  
20-4659155  
501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUPITER MEDICAL CENTER FOUNDATION INC  
1210 S OLD DIXIE HWY JUPITER, FL 33458  
65-0132406  
501 (C) 3 | 117,600. | FMV | N/A | FOR RECIPIENT'S EXEM | 
| JUPITER MEDICAL CENTER INC  
1210 S OLD DIXIE HWY JUPITER, FL 33458  
59-1462039  
501 (C) 3 | 5,200. | FMV | N/A | FOR RECIPIENT'S EXEM | 

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑️ No

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>JUST CAPITAL FOUNDATION INC</td>
<td>44 E 30TH ST FL 11 NEW YORK, NY 10016</td>
<td>36-4764467</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>JUST FACTS INC</td>
<td>641 SHUNPIPE RD 286 CHATHAM TOWNSHIP, NJ 79</td>
<td>20-8725168</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUST FOOD OF DOUGLAS COUNTY INC</td>
<td>1000 E 11TH ST LAWRENCE, KS 66046</td>
<td>45-5069131</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUST FOR KIDS INC</td>
<td>129 MAIN ST STE 406 BECKLEY, WV 25801</td>
<td>20-0642303</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUST FRIENDS INC</td>
<td>900 LINDSEY ST COLUMBUS, IN 47201</td>
<td>31-1138552</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUST IN TIME FOR FOSTER YOUTH</td>
<td>4560 ALVARADO CANYON RD STE 2G SAN DIEGO, CA</td>
<td>20-5448416</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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</tr>
<tr>
<td>JUST ONE MORE MINISTRY INC</td>
<td>4180 N LYDELL AVE MILWAUKEE, WI 53212</td>
<td>46-1176899</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUST PEOPLE INC</td>
<td>1412 OAKBROOK DR STE 180 NORCROSS, GA 30093</td>
<td>54-2207476</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>JUSTFIX INC</td>
<td>8 CATHERINE ST NEW YORK, NY 10038</td>
<td>81-3080695</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>JUSTHOPE INC</td>
<td>2093 PHILADELPHIA PKW CLAYMONT, DE 19703</td>
<td>36-4978320</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
**Part I**

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>JUSTICE DEFENSE FUND</td>
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<td>FMV</td>
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<td>JUSTICE FORWARD</td>
<td>20-2760137</td>
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<td>JUSTICE RAPID RESPONSE USA</td>
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<td>501 (C) 3</td>
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<tr>
<td>JUSTICE RESOURCE INSTITUTE INC</td>
<td>04-2526357</td>
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<td>JUSTINE PETERSEN HOUSING AND REINVESTMENT C</td>
<td>43-1769074</td>
<td>501 (C) 3</td>
<td>40,000</td>
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<td>23-1976386</td>
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<td>JVS SOCAL</td>
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<td>501 (C) 3</td>
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<td>K A M ISAIAH ISRAEL CONGREGATION</td>
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<td>11,000</td>
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<td>KAHALA SENIOR LIVING COMMUNITY INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 20

Enter total number of other organizations listed in the line 1 table: 20
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

## Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

## Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. KAILASH SATYARTHI CHILDREN'S FOUNDATION OF AMERICA</td>
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<td>FMV</td>
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<tr>
<td>2. KAILUA UNITED METHODIST CHURCH</td>
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<tr>
<td>3. KAIROSPDX</td>
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<td>5. KAKOO OIWI</td>
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<tr>
<td>6. KALAMAZOO CHRISTIAN SCHOOL ASSOCIATION</td>
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<td>7. KALAMAZOO COLLEGE</td>
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<td>8. KALAMAZOO COMMUNITY FOUNDATION</td>
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<tr>
<td>9. KALAMAZOO COUNTY HUMAN SOCIETY</td>
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<td>50,000.</td>
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<tr>
<td>10. KALAMAZOO GOSPEL MISSION</td>
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<tr>
<td>12. KALAMAZOO LOAVES &amp; FISHES</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...
3. Enter total number of other organizations listed in the line 1 table...
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td></td>
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<td></td>
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<tr>
<td>KALEIDOSCOPE YOUTH CENTER INC</td>
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<td>KALEO</td>
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<td>FMV</td>
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<td>KANAWHA STATE FOREST FOUNDATION INC</td>
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<td>KANDU INDUSTRIES INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>KANSAS CITY CATHOLIC NETWORK</td>
<td>32-0081587</td>
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<tr>
<td>KANSAS CITY SYMPHONY</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>KANSAS FOOD BANK WAREHOUSE INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6,000.</td>
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<td>FMV</td>
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<tr>
<td>KANSAS POLICY INSTITUTE</td>
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<td>100,000.</td>
<td></td>
<td>FMV</td>
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<tr>
<td>KANSAS STATE UNIVERSITY FOUNDATION</td>
<td>48-0667209</td>
<td>501 (C) 3</td>
<td>359,409.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes ☑️
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>KANSAS UNIVERSITY ENDOWMENT ASSOC</td>
<td>48-0547734</td>
<td>501 (C) 3</td>
<td>176,453.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>KANUGA CONFERENCES INCORPORATED</td>
<td>56-0599223</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>KAPPA KAPPA GAMMA FOUNDATION</td>
<td>31-6049792</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>KAPPA PSI PHARMACEUTICAL FDT INC COLLEGE D</td>
<td>72-1439122</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5</td>
<td>KAPPA SIGMA ENDOWMENT FUND</td>
<td>36-6018518</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>KARA</td>
<td>94-2431483</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>KARDO INTERNATIONAL MINISTRIES</td>
<td>76-071498</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8</td>
<td>KARIS INC</td>
<td>26-4600743</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>KASINADUNI DURGAMBA BUTCHIAN INC</td>
<td>75-3084362</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>KATAL CENTER FOR EQUITY HEALTH AND JUSTICE</td>
<td>81-1323278</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>KATALLASSO INC</td>
<td>45-3170905</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>KATHERINE DELMAR BURKE SCHOOL</td>
<td>94-1156256</td>
<td>501 (C) 3</td>
<td>69,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | KATHYS HOUSE INC  
9101 W DOYNE AVE MILWAUKEE, WI 53226 | 39-2022115 | 501 (C) 3 | 27,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 2 | KATONAH MUSEUM OF ART INC | 134 JAY ST KATONAH, NY 10536 | 13-6161548 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 3 | KATZ HILLEL DAY SCHOOL OF BOCA RATON INC | 21011 95TH AVE S BOCA RATON, FL 33428 | 65-0489297 | 501 (C) 3 | 14,400. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 4 | KAUA'I COMMUNITY HEALTH ALLIANCE | 2460 OKA ST STE 101A KILAUEA, HI 96754 | 87-0813060 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 5 | KAUA'I FERALS | PO BOX 143 KEKAHA, HI 96752 | 26-4305704 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 6 | KAUA'I FOOD BANK INC | 3285 WAAPA RD STE A LIHUE, HI 96766 | 99-0317431 | 501 (C) 3 | 39,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 7 | KAUA'I NORTH SHORE COMMUNITY FOUNDATION | PO BOX 223381 PRINCEVILLE, HI 96722 | 46-0709000 | 501 (C) 3 | 52,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 8 | KAUA'I NORTH SHORE FOOD PANTRY | PO BOX 1172 KILAUEA, HI 96754 | 81-4748610 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 9 | KAVOD | 225 S KRAMERIA ST DENVER, CO 80224 | 47-5495289 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 10 | KAYAS KIDS INC | 6408 W 65TH TER MISSION, KS 66202 | 41-2271507 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 11 | KCW FOUNDATION INC | 1900 PICO BLVD SANTA MONICA, CA 90405 | 95-3750631 | 501 (C) 3 | 17,750. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| 12 | KEAN UNIVERSITY FOUNDATION INC | 1000 MORRIS AVE UNION, NJ 7083 | 22-2849480 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |

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### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>KEENE UNITARIAN UNIVERSALIST CHURCH</td>
<td>02-027599</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>KEENE VALLEY NEIGHBORHOOD SERVICES INC</td>
<td>14-1364555</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>3</td>
<td>KEEP SCOTTSDALE BEAUTIFUL INC</td>
<td>45-505658</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>KEERSHA WARRIOR PRINCESS</td>
<td>83-3774469</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>KEBILA KADOSHA ADATH ISRAEL CONGREGATION</td>
<td>31-0537489</td>
<td>501 (C) 3</td>
<td>5,436.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>KEHILLAH JEWISH HIGH SCHOOL</td>
<td>52-2203956</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>7</td>
<td>KEHILLAH ISRAEL RECONSTRUCTIONIST CONGREGATION</td>
<td>16019 W SUNSET BLVD PACIFIC PALISADES, CA 95664</td>
<td>501 (C) 3</td>
<td>23,893.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>KEITRA GRACE FOUNDATION FOR CHILDRENS CANCER</td>
<td>03-0572822</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>KELLMAN BROWN ACADEMY &amp; NEW JERSEY CORPOT</td>
<td>58-2674116</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>KEMACH USA INC</td>
<td>46-2191120</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>KEMP MILL SYNAGOGUE INC</td>
<td>52-1664121</td>
<td>501 (C) 3</td>
<td>15,230.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>KEMPER AND LEILA WILLIAMS FOUNDATION</td>
<td>23-7336090</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

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<th>General Information on Grants and Assistance</th>
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</tr>
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</tr>
</tbody>
</table>

Part II

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</thead>
<tbody>
<tr>
<td>KEMPTON NEW CHURCH PO BOX 140 KEMPTON, PA 19529</td>
<td>23-2138965</td>
<td>501 (C) 3</td>
<td>292,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENAN-FLAGLER BUSINESS SCHOOL FOUNDATION 205 KENAN CENTER CB 3490 CHAPEL HILL, NC 27</td>
<td>56-0771850</td>
<td>501 (C) 3</td>
<td>46,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEN-CREST SERVICES 560A HARVEST DR BLUE BELL, PA 19422</td>
<td>25-1439925</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENILWORTH PRESBYTERIAN CHURCH 123 KENILWORTH ROAD ASHEVILLE, NC 28803</td>
<td>56-0693194</td>
<td>501 (C) 3</td>
<td>10,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENILWORTH UNION CHURCH 211 KENILWORTH AVE KENILWORTH, IL 60043</td>
<td>36-2182058</td>
<td>501 (C) 3</td>
<td>167,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENNEBUNKPORT CONSERVATION TRUST PO BOX 7004 CAPE PORPOISE, ME 04104</td>
<td>23-7271573</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENNEDY CHILDREN'S CENTER 2212 3RD AVE NEW YORK, NY 10035</td>
<td>13-5671639</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENNEDY KRIEGER FOUNDATION INC 707 N BROADWAY BALTIMORE, MD 21205</td>
<td>52-1734695</td>
<td>501 (C) 3</td>
<td>19,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>KENNEDY-DOMOVAN CENTER INC 1 COMMERCIAL ST FOXBORO, MA 02035</td>
<td>04-2513028</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENNETH BUTLER MEMORIAL SOUP KITCHEN INC 202 E MAIN ST GREENFIELD, IN 46140</td>
<td>80-0321185</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KENNETT AREA COMMUNITY SERVICE 136 W CEDAR ST KENNETT SQ, PA 19348</td>
<td>23-2215441</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>KENNETT CONSOLIDATED SCHOOL DISTRICT 300 EAST SOUTH STREET KENNETT SQUARE, PA 19 23-1668287</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
</tbody>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1</td>
<td>KENNEDY LIBRARY</td>
<td>23-1547585</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>KENSINGTON COMMUNITY CHURCH</td>
<td>38-2938448</td>
<td>501 (C) 3</td>
<td>88,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>3</td>
<td>KENT ATTAINABLE HOUSING INC</td>
<td>83-4613498</td>
<td>501 (C) 3</td>
<td>60,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>4</td>
<td>KENT DENVER COUNTRY DAY SCHOOL</td>
<td>84-0242810</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>KENT PLACE SCHOOL</td>
<td>22-1487233</td>
<td>501 (C) 3</td>
<td>68,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>KENT SCHOOL CORPORATION</td>
<td>06-0646687</td>
<td>501 (C) 3</td>
<td>45,701.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>KENT STATE UNIVERSITY FOUNDATION</td>
<td>34-6576307</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>KENTUCKY CHRISTIAN UNIVERSITY INC</td>
<td>61-0510937</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>KENTUCKY COALITION TO ABOLISH THE DEATH PEN</td>
<td>61-1169551</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>KENTUCKY HORSE PARK FOUNDATION INC</td>
<td>62-1257717</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>KENTUCKY MOUNTAIN MISSION OF EASTERN KENTUC</td>
<td>23-7431572</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>KENTUCKY PUBLIC RADIO INC</td>
<td>23-1547585</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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</tr>
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</tr>
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<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
</tr>
<tr>
<td>(1) KENTUCKY RELIGIOUS COALITION FOR REPRODUCT</td>
<td>PO BOX 4065 LOUISVILLE, KY 40204</td>
</tr>
<tr>
<td>(2) KENYA CHILDREN'S FUND INC</td>
<td>PO BOX 4159 HOPKINS, MN 55343</td>
</tr>
<tr>
<td>(3) KENYA HELP</td>
<td>PO BOX 516 MENLO PARK, CA 94026</td>
</tr>
<tr>
<td>(4) KENYA MERCY MINISTRIES</td>
<td>PO BOX 3130 MANASSAS, VA 20108</td>
</tr>
<tr>
<td>(5) KENYON COLLEGE</td>
<td>209 CHASE AVE GAMBIER, OH 43022</td>
</tr>
<tr>
<td>(6) KENYON REVIEW</td>
<td>EATON CENTER KENYON COLLEGE GAMBIER, OH 43022</td>
</tr>
<tr>
<td>(7) KEOUK COMMUNITY SCHOOL FOUNDATION</td>
<td>PO BOX 431 KEOKUK, IA 52632</td>
</tr>
<tr>
<td>(8) KEREN HASHVIIS INC</td>
<td>16A CARNATION DR LAKEWOOD, NJ 8701</td>
</tr>
<tr>
<td>(9) KEREN YEHOSHUA V YISROEL INC</td>
<td>125 CAREY ST LAKEWOOD, NJ 8701</td>
</tr>
<tr>
<td>(10) KEREN-OR INC</td>
<td>350 7TH AVE RM 1004 NEW YORK, NY 10001</td>
</tr>
<tr>
<td>(11) KERRVILLE GENEALOGICAL SOCIETY</td>
<td>125 LEHMANN DR STE 102 KERRVILLE, TX 78028</td>
</tr>
<tr>
<td>(12) KESED SEMINARS</td>
<td>4121 STANLEY BLVD PLEASANTON, CA 94566</td>
</tr>
</tbody>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tr>
<td>1. KESHER ISRAEL CONGREGATION</td>
<td>23-6397748</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. KESHET</td>
<td>36-3441392</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. KESHET INC</td>
<td>48-1278664</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. KESSLER FOUNDATION INC</td>
<td>31-1562134</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. KESTREL LAND TR</td>
<td>04-6243236</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. KETCHUM - SUN VALLEY VOLUNTEER ASSOCIATES I</td>
<td>82-0448357</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. KETER TORAH</td>
<td>22-2917436</td>
<td>501 (C) 3</td>
<td>9,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. KETTLE MORAINA COMMUNITY CHURCH</td>
<td>39-1811742</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. KEMEMAN COUNTY HISTORICAL SOCIETY</td>
<td>81-1444661</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. KEY BISCAYNE COMMUNITY FOUNDATION INC</td>
<td>38-2405842</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. KEY SCHOOL INC</td>
<td>30-0239421</td>
<td>501 (C) 3</td>
<td>250,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. KEY BISCAYNE COMMUNITY FOUNDATION INC</td>
<td>52-0701774</td>
<td>501 (C) 3</td>
<td>64,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEY WEST ART &amp; HISTORICAL SOCIETY INC 281 FRONT ST KEY WEST, FL 33040 59-0660461 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEY WEST FILM SOCIETY INC 416 EATON ST KEY WEST, FL 33040 65-0903672 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEY WEST LITERARY SEMINAR INC 717 LOVE LN KEY WEST, FL 33040 59-2807058 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYS FAMILY DAY SCHOOL INC 2890 MIDDLEFIELD RD PALO ALTO, CA 94306 94-2240127 501 (C) 3 19,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE CHURCH 849 S ANKENY BLVD ANKENY, IA 50023 82-1081545 501 (C) 3 15,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE COLLEGE 1 COLLEGE GRN LA PLUME, PA 18440 24-0795441 501 (C) 3 26,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE COMMUNITY CHURCH INC 1825 W 37TH ST LOVELAND, CO 80538 82-1256505 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE KIDSSPACE 37 N QUEEN ST YORK, PA 17403 30-0829212 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>KEYSTONE RESEARCH CENTER INC 412 N 3RD ST HARRISBURG, PA 17101 25-1776998 501 (C) 3 226,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE SCIENCE SCHOOL INC 1053 SODA RIDGE RD DILLON, CO 80435 46-1735364 501 (C) 3 52,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KEYSTONE UNITED METHODIST CHURCH 406 WEST 74TH STREET KANSAS CITY, MO 64114 44-0598576 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KGWALE LE MOLLO US 4366 WESTLAWN AVE LOS ANGELES, CA 90066 20-5905619 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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   - No  

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<tr>
<td>KHAL CHASEDEI LELOV 1693 49TH ST BROOKLYN, NY 11204</td>
<td>01-0623188</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>KHAL CHASIDEI VIZNITZ 51 E 8TH ST LAKEWOOD, NJ 8701</td>
<td>22-3838959</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>KHAN ACADEMY INC PO BOX 1630 MOUNTAIN VIEW, CA 94042</td>
<td>26-1544963</td>
<td>501 (C) 3</td>
<td>159,001.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>KIAMAR CARES FOUNDATION 23 BEACHWALKER DR JOHNS ISLAND, SC 29455</td>
<td>46-5144577</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>KICKSTART-INTERNATIONAL INC 459 FULTON ST STE 207 SAN FRANCISCO, CA 94111</td>
<td>06-1613235</td>
<td>501 (C) 3</td>
<td>447,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDNEY FOUNDATION OF OHIO INC 2831 PROSPECT AVE E CLEVELAND, OH 44115</td>
<td>34-0827748</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDRON BETHRO RETIREMENT SERVICES INC 3001 IVY DR NORTH NEWTON, KS 67117</td>
<td>48-0968434</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDS ACROSS AMERICA 2036 TIMBERLAKE RD BRANSON, MO 65616</td>
<td>83-1966879</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDS ACROSS AMERICA FOUNDATION PO BOX 930 BRANSON, MO 65615</td>
<td>43-1348373</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDS ALIVE INTERNATIONAL INC 2507 CUMBERLAND DR VALPARAISO, IN 46383</td>
<td>31-1140515</td>
<td>501 (C) 3</td>
<td>58,800.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>KIDS ARK-USA PO BOX 291 PETERBOROUGH, NH 3458</td>
<td>26-3401617</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>KIDS AROUND THE WORLD INC 5245 28TH AVE ROCKFORD, IL 61109</td>
<td>36-4007250</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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SCHEDULE I
( Form 990 )

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tr>
<td>KIDS ENJOY EXERCISE NOW 601 S FIGUEROA ST LOS ANGELES, CA 90017</td>
<td>65-1262462</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FIRST LAW CENTER 420 6TH ST SE STE 160 CEDAR RAPIDS, IA 5240</td>
<td>20-2199649</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FOOD BASKET 1300 PLYMOUTH AVE NE GRAND RAPIDS, MI 49505</td>
<td>04-3760991</td>
<td>501 (C) 3</td>
<td>14,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FROM WISCONSIN LTD 640 S 84TH ST MILWAUKEE, WI 53214</td>
<td>39-1425288</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>KIDS IN CRISIS INC 1 SALEM ST COS COB, CT 6807</td>
<td>06-1027885</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS INTERVENTION &amp; DIAGNOSTIC SERVICE CENT 1375 NW KINGSTON AVE BEND, OR 97703</td>
<td>94-3169200</td>
<td>501 (C) 3</td>
<td>68,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS MAKING IT INC 617 CASTLE ST WILMING, NC 28401</td>
<td>26-1606084</td>
<td>501 (C) 3</td>
<td>12,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>KIDS MEALS INC 330 GARDEN OAKS BLVD HOUSTON, TX 77018</td>
<td>76-0330447</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>KIDS NEEDS–GREATER ENGLEWOOD FL INC PO BOX 3203 PLACIDA, FL 33946</td>
<td>35-2361844</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>KIDS ON POINT INC PO BOX 22731 CHARLESTON, SC 29413</td>
<td>27-0771548</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDSAVE INTERNATIONAL INC 100 CORPORATE POINTE STE 380 CULVER CITY, C 91-1887623</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDZ KONNECT 4 JESUS INC 2650 FM 407 E STE 145 # 116 ARGYLE, TX 7622</td>
<td>46-1372884</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

Vanguard Charitable Endowment Program

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

Part I  General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>KIDS ENJOY EXERCISE NOW 601 S FIGUEROA ST LOS ANGELES, CA 90017</td>
<td>65-1262462</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FIRST LAW CENTER 420 6TH ST SE STE 160 CEDAR RAPIDS, IA 5240</td>
<td>20-2199649</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FOOD BASKET 1300 PLYMOUTH AVE NE GRAND RAPIDS, MI 49505</td>
<td>04-3760991</td>
<td>501 (C) 3</td>
<td>14,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIDS FROM WISCONSIN LTD 640 S 84TH ST MILWAUKEE, WI 53214</td>
<td>39-1425288</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### SCHEDULE I

#### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

---

**Name of the organization**

**Employer identification number**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>Kieve-Wavus Education Inc PO Box 169 Nobleboro, ME 04555 23-7352599 501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kijana Educational Empowerment Initiative 516 Gulf Rd North Palm Beach, FL 33408 33-1023377 501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kilung Foundation PO Box 622 Langley, WA 98260 91-1987533 501 (c) 3</td>
<td>52,000.</td>
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<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kimberly Home Inc 1189 NE Cleveland St Clearwater, FL 33755 59-2077208 501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kimberton Farms School Inc 410 W Seven Stars Rd Kimberton, PA 19442 23-1494797 501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>Kimmel Center Inc 1500 Walnut St Fl 17 Philadelphia, PA 19102 23-2865855 501 (c) 3</td>
<td>207,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kind Foundation Inc 1372 Broadway New York, NY 10018 81-0856748 501 (c) 3</td>
<td>11,000,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kind Inc 1201 L St NW Fl 2 Washington, DC 20005 26-2763038 501 (c) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kindraven Inc PO Box 2097 Sandpoint, ID 83864 82-0491527 501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>Kinderhook Memorial Library 18 Hudson St Kinderhook, NY 12106 14-1405453 501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kindling Foundation Inc 1051 Annerley Rd Piedmont, CA 94610 05-0553029 501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kineo Center Inc 165 Ave Ponce De Leon Ste 201 San Juan, PR 85-2128382 501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

---

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>KINETIC KIDS INC</td>
<td>74-3080076</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>KING BAUDOUIN FOUNDATION UNITED STATES INC</td>
<td>58-2277856</td>
<td>501 (C) 3</td>
<td>43,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>KING EDWARD MEDICAL COLLEGE ALUMNI ASSOCIATION</td>
<td>72-1254660</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>KING OF GLORY LUTHERAN CHURCH - DALLAS TX</td>
<td>75-1155908</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>KING OF GLORY LUTHERAN CHURCH LCMS</td>
<td>54-1544804</td>
<td>501 (C) 3</td>
<td>238,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>KING OF KINGS LUTHERAN CHURCH</td>
<td>41-1489671</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>KING SCHOOL INCORPORATED</td>
<td>06-1229222</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>KINGDOM BUILDING MINISTRIES INCORPORATED</td>
<td>31-1191922</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>KINGDOM HOUSE</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10</td>
<td>KINGDOM LIFE WORSHIP CENTER</td>
<td>82-5288075</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>KINGDOM RAIN INC</td>
<td>33-1010592</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>KINGS BAY YM-YWHA INC</td>
<td>11-3068515</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>JUNGLE SUNNYSIDE</td>
<td>20-753</td>
<td>501 (c) 3</td>
<td>13,000</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>SUNDANCE</td>
<td>00-753</td>
<td>501 (c) 3</td>
<td>3,000</td>
<td>N/A</td>
<td>FMV</td>
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<tr>
<td>3</td>
<td>CHEROKEE</td>
<td>02-753</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>BOMBAY</td>
<td>04-753</td>
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<td>06-753</td>
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<td>HEATHER</td>
<td>08-753</td>
<td>501 (c) 3</td>
<td>20,000</td>
<td>N/A</td>
<td>FMV</td>
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<td>KELLY</td>
<td>10-753</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>N/A</td>
<td>FMV</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>KIMBERLY</td>
<td>12-753</td>
<td>501 (c) 3</td>
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<td>N/A</td>
<td>FMV</td>
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<td>JULIET</td>
<td>14-753</td>
<td>501 (c) 3</td>
<td>35,000</td>
<td>N/A</td>
<td>FMV</td>
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<tr>
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<td>20-2799123</td>
<td>501 (C) 3</td>
<td>135,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIPP NEW JERSEY A NJ NONPROFIT CORPORATION</td>
<td>20-2792701</td>
<td>501 (C) 3</td>
<td>108,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIPP NEW YORK INC</td>
<td>20-3971209</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>KIPP LOCAL PUBLIC SCHOOLS</td>
<td>26-1607268</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>KIPP ST LOUIS</td>
<td>01-0916759</td>
<td>501 (C) 3</td>
<td>17,300.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>KIPP TEXAS INC</td>
<td>01-0639602</td>
<td>501 (C) 3</td>
<td>765,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>KIRK IN THE HILLS</td>
<td>38-1367089</td>
<td>501 (C) 3</td>
<td>31,500.</td>
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<td>KIRK OF KILDAIRE PRESBYTERIAN CHURCH</td>
<td>56-1255455</td>
<td>501 (C) 3</td>
<td>44,100.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>KIRK OF THE HILLS PRESBYTERIAN CHURCH</td>
<td>43-0909345</td>
<td>501 (C) 3</td>
<td>47,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIRKLAND &amp; ELLIS FOUNDATION</td>
<td>36-3160355</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KIRKLAND PERFORMANCE CENTER</td>
<td>94-3129859</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>KIRKWOOD UNITED METHODIST CHURCH</td>
<td>43-0669088</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

3. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:

   18674H 1467 V 20-7.21
# Schedule I
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

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

### Part I
#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>KISS THE GROUND</td>
<td>46-4507696</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
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<td>KITCHEN ANGELS INC</td>
<td>85-0423492</td>
<td>501 (C) 3</td>
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<td>KITCHEN OF GRACE INC</td>
<td>81-2312101</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>KITSAP COMMUNITY RESOURCES</td>
<td>91-0791411</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>N/A</td>
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<tr>
<td>KIVA MICROFUNDS</td>
<td>71-0992446</td>
<td>501 (C) 3</td>
<td>403,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KLAMATH SISKIYU WILDLANDS CENTER</td>
<td>93-1246139</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>KLCC PUBLIC RADIO FOUNDATION</td>
<td>81-3487391</td>
<td>501 (C) 3</td>
<td>327,500.</td>
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<tr>
<td>KLEIN UNITED METHODIST CHURCH</td>
<td>74-1964336</td>
<td>501 (C) 3</td>
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<td>KLEIN LEVIN SYNDROME FOUNDATION INC</td>
<td>31-1685893</td>
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<td>13,000.</td>
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<td>N/A</td>
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<td>KLEINWOOD CHURCH OF CHRIST HOUSTON TEXAS</td>
<td>74-1971118</td>
<td>501 (C) 3</td>
<td>28,200.</td>
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<tr>
<td>K-LIFE MINISTRIES</td>
<td>20-2605251</td>
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<td>148,000.</td>
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<td>K-LIFE MINISTRIES</td>
<td>71-0721101</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.  

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For Paperwork Reduction Act Notice, see the instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] No __  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>KLINGBERG FAMILY CENTERS INC</td>
<td>06-1487342</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>K-LOVE &amp; AIR1 FOUNDATION</td>
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<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KNESSETH BAIS YAakov</td>
<td>11-3130295</td>
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<td>34,550.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>KNIGHTS OF COLUMBUS CHARTIES INC</td>
<td>23-7227608</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>KNOLLWOOD BAPTIST CHURCH</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>KNOX AREA RESCUE MINISTRIES</td>
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<td>KNOX COLLEGE</td>
<td>37-0673513</td>
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<td>27,867.</td>
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<td>FMV</td>
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<td>KNOXVILLE EPISCOPAL SCHOOL PROJECT INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>KNOXVILLE JAZZ ORCHESTRA</td>
<td>62-1827891</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>KNOXVILLE JEWISH ALLIANCE INC</td>
<td>62-0452960</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) KOCE-TV FOUNDATION 3080 BRISTOL ST STE 100 COSTA MESA, CA 9262 95-3220724 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(2) KODAI FRIENDS INTERNATIONAL INC 7608 FLORA AVE SAINT LOUIS, MO 63143 20-3848565 501 (C) 3 5,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(3) KOINS FOR KENYA INC 351 OAK LN RAYSVILLE, UT 84037 20-5053322 501 (C) 3 44,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) KOKOMO RESCUE MISSION 321 W MULBERRY ST KOKOMO, IN 46901 35-1104430 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) KOKUA CHRISTIAN MINISTRIES PO BOX 231 KAMUELA, HI 96743 27-2957146 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) KOL EDUCATION FOUNDATION 1770 TUOLUMNE ST VALLEJO, CA 94589 81-1615346 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) KOL HADASH HUMANISTIC CONGREGATION 2100 HALF DAY RD DEERFIELD, IL 60015 36-4454948 501 (C) 3 5,950. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) KOL ISRAEL FOUNDATION INC PO BOX 22234 BEACHWOOD, OH 44122 34-1439802 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) KOL TZEDEK SYNAGOGUE 707 S 50TH ST PHILADELPHIA, PA 19143 20-2857448 501 (C) 3 12,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) KOLLEL INTERNATIONAL INC 212 CENTRAL AVE LAKEWOOD, NJ 8701 22-3511752 501 (C) 3 18,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) KOLLEL TIFERES YISRAEL - CHICAGO INC 2939 W FARNELL AVE CHICAGO, IL 60645 84-2141656 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) KOMO LEARNING CENTER 15345 N SCOTTSDALE RD UNIT 1044 SCOTTSDALE, AZ 85254 26-3993914 501 (C) 3 5,473. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Schedule I**

(Form 990)

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
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<td>Korea Society</td>
<td></td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>350 Madison Ave New York, NY 10017</td>
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<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3301 Creek Dr Ann Arbor, MI 48108</td>
<td>23-7009238</td>
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<td>Korean Numa Church</td>
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<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5221 Del Este Cir La Palma, CA 90623</td>
<td>45-3680220</td>
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<tr>
<td>Korean Presbyterian Church in Ventura</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>737 W 6th St Oxnard, CA 93030</td>
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<td>Korean Sarang Church of Knoxville</td>
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<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9132 Kingston Pike Knoxville, TN 37923</td>
<td>45-3842381</td>
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<tr>
<td>Korean United Methodist Church of Greater W</td>
<td></td>
<td>501 (C) 3</td>
<td>41,421.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1219 Swinks Mill Rd Mclean, VA 22102</td>
<td>54-1240307</td>
<td></td>
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<tr>
<td>Korean-American Community Foundation INC</td>
<td></td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>135 E 64th St New York, NY 10065</td>
<td>16-1643114</td>
<td></td>
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<tr>
<td>Korean-American Society of Connecticut</td>
<td></td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2073 State St Hamden, CT 6517</td>
<td>51-0201369</td>
<td></td>
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<tr>
<td>Rosciusko Foundation INC</td>
<td></td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15 E 65th St New York, NY 10065</td>
<td>13-1628179</td>
<td></td>
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<tr>
<td>KPMG U S Foundation INC</td>
<td></td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 Chestnut Ridge Rd Montvale, NJ 7645</td>
<td>22-3263347</td>
<td></td>
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<tr>
<td>KPSNA Charitable Foundation INC</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6049 Oxfordshire Rd Wauxham, NC 28173</td>
<td>56-2098199</td>
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<td>KQED INC</td>
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<td>501 (C) 3</td>
<td>646,891.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2601 Mariposa St San Francisco, CA 94110</td>
<td>94-1241309</td>
<td></td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kripalu Center for Yoga &amp; Health Inc</td>
<td>23-1718197</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kucetekela Foundation</td>
<td>20-4982719</td>
<td>501 (c) 3</td>
<td>22,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kulanu Yacmac</td>
<td>22-2927623</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kulshan Community Land Trust</td>
<td>91-1995485</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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</tr>
<tr>
<td>Kumulanl Chapel</td>
<td>99-0213013</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kuow-Puget Sound Public Radio</td>
<td>91-2079402</td>
<td>501 (c) 3</td>
<td>84,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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</tr>
<tr>
<td>Kupas Yom ToV Inc</td>
<td>82-4097972</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kupath Ezrah of Rockland County Inc</td>
<td>23-7259447</td>
<td>501 (c) 3</td>
<td>8,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>Kvie Inc</td>
<td>94-1421463</td>
<td>501 (c) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>L J F E Inc</td>
<td>23-7404890</td>
<td>501 (c) 3</td>
<td>5,943.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>L S B Leakey Foundation Fr Resrch To Mans C</td>
<td>95-2536475</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>L S U Foundation</td>
<td>72-6002969</td>
<td>501 (c) 3</td>
<td>29,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. LA CANADA FLINTRIDGE EDUCATIONAL FOUNDATION</td>
<td>501 (C)</td>
<td>3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. LA CANADA PRESBYTERIAN CHURCH</td>
<td>501 (C)</td>
<td>3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. LA CASA DE AMISTAD INC</td>
<td>501 (C)</td>
<td>3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. LA CASA DE CRISTO LUTHERAN CHURCH</td>
<td>501 (C)</td>
<td>3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. LA CASA DE LAS MADRES</td>
<td>501 (C)</td>
<td>3</td>
<td>7,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. LA CASA FRIENDS INC</td>
<td>501 (C)</td>
<td>3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>7. LA CASA NORTE</td>
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<td>3</td>
<td>20,525.</td>
<td>FMV</td>
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<tr>
<td>8. LA COLABORATIVA INC</td>
<td>501 (C)</td>
<td>3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9. LA CROSSE PUBLIC EDUCATION FOUNDATION INC</td>
<td>501 (C)</td>
<td>3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. LA ESCUELTITA INC</td>
<td>501 (C)</td>
<td>3</td>
<td>33,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. LA FAMILIA MEDICAL CENTER</td>
<td>501 (C)</td>
<td>3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12. LA GRANDE FOURSQUARE CHURCH</td>
<td>501 (C)</td>
<td>3</td>
<td>9,964.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - [ ] Yes
   - [ ] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. LA GRANGE FIRST FREE WILL BAPTIST CHURCH</td>
<td>56-1552265</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. LA ISLA FOUNDATION INC</td>
<td>26-2384892</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. LA JOLLA COUNTRY DAY SCHOOL</td>
<td>95-1875978</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. LA PORTE COUNTY HISTORICAL STEAM SOCIETY IN</td>
<td>35-1152351</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. LA PORTE COUNTY RIGHT TO LIFEDUCATION FUND</td>
<td>20-3988878</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. LA PORTE SYMPHONY ORCHESTRA INC</td>
<td>23-7378110</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. LA RAZA SERVICES INC</td>
<td>84-0625478</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. LA SALLE ACADEMY</td>
<td>04-3733010</td>
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<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9. LA SALLE UNIVERSITY</td>
<td>23-1352654</td>
<td>501 (C) 3</td>
<td>243,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. LA UNIDAD LATINA FOUNDATION</td>
<td>52-2268103</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. LA UNION DEL PUEBLO ENTERO</td>
<td>93-1029197</td>
<td>501 (C) 3</td>
<td>128,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. LA VETA VILLAGE INC</td>
<td>47-5345956</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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   - No ☐

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>LAB RESCUE OF LRCP INCORPORATED</td>
<td>52-1880024</td>
<td>501 (C) 3</td>
<td>60,739.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1814 ANNANDALE, VA 22003</td>
<td>52-1880024</td>
<td>501 (C) 3</td>
<td>60,739.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7435 MICHIGAN AVE DETROIT, MI 48210</td>
<td>38-2206621</td>
<td>501 (C) 3</td>
<td>13,111.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1365 CORPORATE CENTER CURV SAINT PAUL, MN 5</td>
<td>41-2001751</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LACASA OF GOSHEN INC</td>
<td>35-1554538</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>202 N COTTAGE AVE GOSHEN, IN 46528</td>
<td>35-1554538</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2023 CAESAR PL BRONX, NY 10473</td>
<td>83-2249413</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LAFAYETTE COLLEGE</td>
<td>730 HIGH STREET EASTON, PA 18042</td>
<td>501 (C) 3</td>
<td>163,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LAFAYETTE LIBRARY AND LEARNINCENTER FOUNDATION</td>
<td>3491 MT DIABLO BLVD STE 214 LAFAYETTE, CA 9</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>49 KNOX DR LAFAYETTE, CA 94549</td>
<td>94-1275252</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAFAYETTE PARTNERS IN EDUCATION</td>
<td>94-2699518</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LAFAYETTE PREPARATORY ACADEMY INC</td>
<td>1900 LAFAYETTE AVE SAINT LOUIS, MO 63104</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LAFAYETTE URBAN MINISTRY INC</td>
<td>420 N 4TH ST LAFAYETTE, IN 47901</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAFAYETTE-ORINDA PRESBYTERIAN CHURCH</td>
<td>49 KNOX DR LAFAYETTE, CA 94549</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. LAGRANGE ACADEMY INCORPORATED  
   1501 VERNON RD LAGRANGE, GA 30240  
   58-1087459  
   501 (C) 3  
   12,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 2. LAGRANGE COLLEGE  
   601 BROAD ST LAGRANGE, GA 30240  
   58-0566199  
   501 (C) 3  
   21,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 3. LAGRAVE AVE CHRISTIAN REFORMED CHURCH  
   107 LA GRAVE AVE SE GRAND RAPIDS, MI 49503  
   38-1374234  
   501 (C) 3  
   9,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 4. LAGUNA BEACH COMMUNITY CLINIC INC  
   362 3RD ST LAGUNA BEACH, CA 92651  
   95-2637633  
   501 (C) 3  
   11,050. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 5. LAGUNA BLANCA SCHOOL  
   4125 PALOMA DR SANTA BARBARA, CA 93110  
   95-1641448  
   501 (C) 3  
   7,500. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 6. LAGUNA HILLS KOREAN UNITED METHODIST CHURCH  
   24442 MOULTON PKWY LAGUNA WOODS, CA 92637  
   71-0900605  
   501 (C) 3  
   25,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 7. LAHEY CLINIC FOUNDATION INC  
   41 MALL RD BURLINGTON, MA 1805  
   04-2323457  
   501 (C) 3  
   10,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 8. LAHEY CLINIC HOSPITAL INC  
   41 MALL RD BURLINGTON, MA 1805  
   04-2704686  
   501 (C) 3  
   51,500. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 9. LAIOPUA 2020  
   PO BOX 1764 KAILUA KONA, HI 96745  
   56-2638917  
   501 (C) 3  
   20,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 10. LAKE AVENUE CONGREGATIONAL CHURCH OF PASADE  
   393 N LAKE AVE PASADENA, CA 91101  
   95-1660848  
   501 (C) 3  
   19,296. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 11. LAKE COUNTRY SCHOOL MONTESSORI LEARNING ENV  
   3755 PLEASANT AVE MINNEAPOLIS, MN 55409  
   41-1278205  
   501 (C) 3  
   8,000. FMV  
   N/A FOR RECIPIENT'S EXEM |
| 12. LAKE COUNTRY SPICA  
   PO BOX 14 CLARKSVILLE, VA 23927  
   27-0056013  
   501 (C) 3  
   16,000. FMV  
   N/A FOR RECIPIENT'S EXEM |

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Schedule I (Form 990) 2020
### SCHEDULE I
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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**Part I**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - [ ] Yes  [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) LAKE DILLON FOUNDATION FOR THE PERFORMING ARTS</td>
<td>84-1234015</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) LAKE ERIE COLLEGE</td>
<td>36-0733165</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) LAKE FOREST CHURCH</td>
<td>56-2194433</td>
<td>501 (C) 3</td>
<td>32,843.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) LAKE FOREST COLLEGE</td>
<td>36-2167770</td>
<td>501 (C) 3</td>
<td>34,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) LAKE HILLS PRESBYTERIAN CHURCH - KNOXVILLE, TENNESSEE</td>
<td>62-0763380</td>
<td>501 (C) 3</td>
<td>12,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) LAKE MICHIGAN CATHOLIC SCHOOLS</td>
<td>38-1889005</td>
<td>501 (C) 3</td>
<td>102,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) LAKE MILLS AREA COMMUNITY FOUNDATION INC</td>
<td>39-1858882</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) LAKE PARK EVANGELICAL LUTHERAN CHURCH OF MILWAUKEE</td>
<td>39-0906447</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) LAKE POINTE BAPTIST CHURCH</td>
<td>75-1656065</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) LAKE STREET CHURCH</td>
<td>36-2171159</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(11) LAKE STREET UNITED METHODIST CHURCH</td>
<td>33-0889959</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) LAKE SUNAPEE PROTECTIVE ASSOCIATION</td>
<td>02-0011969</td>
<td>501 (C) 3</td>
<td>69,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>(g) Description of noncash assistance</td>
<td>(h) Purpose of grant or assistance</td>
</tr>
<tr>
<td>(1) LAKE SUPERIOR COLLEGE FOUNDATION INC</td>
<td>2101 TRINITY RD DULUTH, MN 55811</td>
<td>36-3257072</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) LAKE TAHOE CONSERVATION FUND</td>
<td>PO BOX 7124 TAHOE CITY, CA 96145</td>
<td>01-0974628</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) LAKE TAHOE SCHOOL</td>
<td>995 TAHOE BLVD INCLINE VILLAGE, NV 89451</td>
<td>86-0868862</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) LAKE TAHOE SHAKESPEARE FESTIVAL</td>
<td>948 INCLINE WAY INCLINE VILLAGE, NV 89451</td>
<td>88-0358637</td>
<td>501 (C) 3</td>
<td>11,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) LAKE TRAVIS UNITED METHODIST CHURCH</td>
<td>1502 RANCH ROAD 620 N LAKEWAY, TX 78734</td>
<td>74-2537618</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) LAKE WAPOGASSET LUTHERAN BIBLE CAMP ASSOC</td>
<td>738 HICKORY POINT LN AMERY, WI 54001</td>
<td>39-0973783</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) LAKE WYLIE &amp; CLOVER MAYDAY PROJECT</td>
<td>4100 CHARLOTTE HWY CLOVER, SC 29710</td>
<td>45-4146999</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) LAKELAND FOUNDATION</td>
<td>7700 CLOCKTOWER DR WILLOUGHBY, OH 44094</td>
<td>34-1369714</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) LAKELAND PRESBYTERIAN CHURCH</td>
<td>5212 HIGHWAY 25 FLOWOOD, MS 36321</td>
<td>64-0784075</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) LAKES REGION CONSERVATION TRUST</td>
<td>156 DANE RD CENTER HARBOR, NH 3226</td>
<td>02-0347918</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) LAKESIDE BAPTIST CHURCH</td>
<td>500 W BLUEBONNET DR GRANBURY, TX 76048</td>
<td>75-2029409</td>
<td>501 (C) 3</td>
<td>5,173.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) LAKESIDE CHAUTAUQUA FOUNDATION</td>
<td>236 WALNUT AVE LAKESIDE MARBLEHEAD, OH 43444</td>
<td>20-4072755</td>
<td>501 (C) 3</td>
<td>19,724.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>LAKESIDE CHRISTIAN CHURCH INC</td>
<td>61-0700713</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>LAKESIDE CHRISTIAN FELLOWSHIP</td>
<td>90-0507302</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>LAKESIDE CHURCH OF CHICAGO</td>
<td>36-2487114</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>LAKESIDE HOUSTON UNITED METHODIST CHURCH</td>
<td>14303 W LAKE HOUSTON FWY HOUSTON, TX 77044</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>LAKESIDE SCHOOL</td>
<td>14050 1ST AVE NE SEATTLE, WA 98125</td>
<td>501 (C) 3</td>
<td>31,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>LAKEVIEW COVENANT CHURCH DULUTH MN</td>
<td>1001 JEAN DULUTH RD DULUTH, MN 55804</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>LAKEVIEW PANTRY</td>
<td>3945 N SHERIDAN RD CHICAGO, IL 60613</td>
<td>501 (C) 3</td>
<td>36,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>LAKEVILLE UNITED METHODIST CHURCH</td>
<td>ATTN: BUSINESS OFFICE PO BOX 24 LAKEVILLE,</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>LAKEWOOD BAPTIST CHURCH - FOWDERLY, TX</td>
<td>10194 US HIGHWAY 271 NORTH FOWDERLY, TX 754</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>LAKEWOOD CEDAR SCHOOL</td>
<td>725 VASSAR AVE LAKEWOOD, NJ 8701</td>
<td>501 (C) 3</td>
<td>10,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>LAKEWOOD CHURCH</td>
<td>3700 SOUTHWEST FWY HOUSTON, TX 77027</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>LAKEWOOD EVANGELICAL FREE CHURCH</td>
<td>6284 FAIRVIEW RD BAXTER, MN 56425</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAKOTA CHRISTIAN CHURCH</td>
<td>5962 HAMILTON MASON RD LIBERTY TWP, OH 4501</td>
<td>31-1206952</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LALIMYE MINISTRIES</td>
<td>170 HUNTINGTON DR ROSSVILLE, TN 38066</td>
<td>47-4043586</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMAR UNIVERSITY FOUNDATION INC</td>
<td>PO BOX 11550 BEAUMONT, TX 77710</td>
<td>23-7298265</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMB OF GOD LUTHERAN CHURCH</td>
<td>57210 ALLEN RD SLIDELL, LA 70461</td>
<td>72-1394293</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMDA LEGAL DEFENSE AND EDUCATION FUND INC</td>
<td>120 WALL ST FL O NEW YORK, NY 10005</td>
<td>23-7395681</td>
<td>501 (C) 3</td>
<td>210,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMBS PLAYERS THEATRE</td>
<td>PO BOX 182229 CORONADO, CA 92178</td>
<td>33-0592567</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>LAMDEINU INC</td>
<td>315 JOHNSON AVE TEANECK, NJ 7666</td>
<td>46-5767571</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>LAMOILLE COMMUNITY FOOD SHARE INC</td>
<td>PO BOX 173 MORRISVILLE, VT 5661</td>
<td>01-0760865</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMOILLE COMMUNITY HOUSE INC</td>
<td>103 WEST MAIN STREET HYDE PARK, VT 5655</td>
<td>84-2586480</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAMOILLE FAMILY CENTER INC</td>
<td>480 CADYS FALLS RD MORRISVILLE, VT 5661</td>
<td>03-0277640</td>
<td>501 (C) 3</td>
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<td>LAMOILLE FAMILY CENTER INC</td>
<td>469 BRYANT ST SAN FRANCISCO, CA 94107</td>
<td>94-6109095</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
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<td>LAMOILLE FAMILY CENTER INC</td>
<td>901 EDEAN RD LANCASTER, PA 17601</td>
<td>23-1484178</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<td>(1) LANCAS...</td>
<td>23-6266937</td>
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<td>(3) LANCAS...</td>
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<td>(7) LANCAS...</td>
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<td>(8) LAND CON...</td>
<td>01-0531683</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>(9) LAND INS...</td>
<td>48-0842156</td>
<td>501 (C) 3</td>
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<td>(10) LAND STE...</td>
<td>41-1466054</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(11) LAND TRUS...</td>
<td>04-2751357</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>(12) LAND TRUS...</td>
<td>56-1601471</td>
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<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Part I**

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>LANDMARK CHRISTIAN SCHOOL</td>
<td>50 SE BROAD ST FAIRBURN, GA 30213 58-1842292 501 (C) 3 18,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDMARK CHURCH OF CHRIST</td>
<td>1800 HALCYON BLVD MONTGOMERY, AL 36117 63-0680006 501 (C) 3 20,700. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDMARK COLLEGE INC</td>
<td>19 RIVER RD S PUTNEY, VT 5346 22-2586208 501 (C) 3 42,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LANDMARK LEGAL FOUNDATION</td>
<td>3100 BROADWAY BLVD STE 1210 KANSAS CITY, MO 51-0203802 501 (C) 3 40,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDMARK ON MAIN STREET INC</td>
<td>232 MAIN ST PORT WASHINGTON, NY 11050 11-2444833 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LANDMARK SCHOOL INC</td>
<td>429 HALE STREET PRIDES PRIDES CROSSING, MA 04-2429311 501 (C) 3 45,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDMARKS PRESERVATION COUNCIL</td>
<td>30 N MICHIGAN AVE STE 2020 CHICAGO, IL 6060 36-2879987 501 (C) 3 51,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDON SCHOOL CORPORATION</td>
<td>6101 WILSON LN BETHESDA, MD 20817 52-0635092 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANDPATHS</td>
<td>618 4TH ST STE 200 SANTA ROSA, CA 95404 68-0328590 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANE THOMAS FOUNDATION</td>
<td>21463 WALNUT ST ELKHORN, NE 68022 81-4544601 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANGE FOUNDATION</td>
<td>27567 OAK SPRING CANYON RD CANYON COUNTRY, 95-4407687 501 (C) 3 107,514. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LANGHAM PARTNERSHIP USA INC NFP</td>
<td>PO BOX 189 CAVE CREEK, AZ 85327 23-7417198 501 (C) 3 19,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

**Part II**

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<tbody>
<tr>
<td>LANGLADE COUNTY HUMANE SOCIETY INC</td>
<td>2204 CLEMMONT ST ANTIQUE, WI 54409</td>
<td>39-1375237</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LANGKIAU MEDICAL CENTER FOUNDATION</td>
<td>100 E LANCASTER AVE WINNEWOOD, PA 19096</td>
<td>23-2176723</td>
<td>501 (C) 3</td>
<td>44,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LANSING SYMPHONY ASSOCIATION INC</td>
<td>104 S WASHINGTON SQ SUITE 300 LANSING, MI 48804</td>
<td>38-6072025</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LANTERN THEATER COMPANY</td>
<td>PO BOX 53428 PHILADELPHIA, PA 19105</td>
<td>23-2798692</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAFUENTE HOME INCORPORATED</td>
<td>911 STATE AVE ALAMOSA, CO 81101</td>
<td>74-2224631</td>
<td>501 (C) 3</td>
<td>36,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LARC SCHOOL INC</td>
<td>1089 CREEK RD BELLMAWR, NJ 08031</td>
<td>22-1978787</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LARCHMONT AVENUE CHURCH</td>
<td>60 FOREST PARK AVENUE LARCHMONT, NY 10538</td>
<td>13-1740281</td>
<td>501 (C) 3</td>
<td>31,250</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LARCHMONT-MAMARONECK HUNGER TASK FORCE INC</td>
<td>PO BOX 112 LARCHMONT, NY 10538</td>
<td>13-3691252</td>
<td>501 (C) 3</td>
<td>14,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LARK THEATRE COMPANY INC</td>
<td>311 W 43RD ST STE 406 NEW YORK, NY 10036</td>
<td>13-3779197</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LARK STREET YOUTH SERVICES</td>
<td>134 GOLDEN GATE AVE SAN FRANCISCO, CA 94102</td>
<td>94-2917999</td>
<td>501 (C) 3</td>
<td>510,150</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>LARKSPUR LIBRARY AND COMMUNITY CENTER FOUNDATION</td>
<td>PO BOX 846 LARKSPUR, CA 94977</td>
<td>47-4561272</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LAS AMERICAS IMMIGRANT ADVOCACY CENTER</td>
<td>1500 E YANDELL DR EL PASO, TX 79902</td>
<td>74-2472774</td>
<td>501 (C) 3</td>
<td>92,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | LAS COLINAS SYMPHONY ORCHESTRA INC  
PO BOX 141446 IRVING, TX 75014 | 75-2389400 | 501 (C) 3 | 125,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | LAS VEGAS PINBALL COLLECTORS CLUB  
2620 S MARYLAND PKWY # 241 LAS VEGAS, NV 89109 | 26-0060884 | 501 (C) 3 | 50,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | LAS VEGAS RESCUE MISSION  
480 W BONANZA RD LAS VEGAS, NV 89106 | 23-7222330 | 501 (C) 3 | 51,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | LASALLE ACADEMY  
612 ACADEMY AVE PROVIDENCE, RI 2908 | 05-0258897 | 501 (C) 3 | 7,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | LASALLE CATHOLIC COLLEGE PREPARATORY INC  
11999 SE FULLER RD PORTLAND, OR 97222 | 93-0553268 | 501 (C) 3 | 5,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | LASALLE COLLEGE HIGH SCHOOL  
8605 CHELTENHAM AVE GLENDALE, PA 19038 | 23-1731340 | 501 (C) 3 | 104,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | LASALLE-PERU TOWNSHIP HIGH SCHOOL FOUNDATION  
PO BOX 1325 LA SALLE, IL 61301 | 36-3922475 | 501 (C) 3 | 6,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | LASALLIAN EDUCATION FUND  
SUITE 386 MILL VALLEY, CA 94941 | 68-0420745 | 501 (C) 3 | 100,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | LAST CHANCE FOR ANIMALS  
8949 W SUNSET BLVD PH WEST HOLLYWOOD, CA 90069 | 95-4013155 | 501 (C) 3 | 23,183 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | LATIN AMERICAN ASSOCIATION INC  
2750 BUFORD HWY NE ATLANTA, GA 30324 | 58-1237316 | 501 (C) 3 | 7,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | LATIN AMERICAN EDUCATIONAL FOUNDATION  
1035 OSAGE ST DENVER, CO 80204 | 84-6010415 | 501 (C) 3 | 14,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | LATIN AMERICAN MISSIONS BOARD INC  
2342 AIRLINE RD MOUNT PLEASANT, WI 53406 | 35-2111415 | 501 (C) 3 | 9,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Attach to Form 990.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>LATIN SCHOOL OF CHICAGO</td>
<td>59 W NORTH BLVD CHICAGO, IL 60610</td>
<td>501 (C) 3</td>
<td>128,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>LATIN WOMENS INITIATIVE</td>
<td>112 W 4TH ST HOUSTON, TX 77007</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>LATINO COMMUNITY FOUNDATION</td>
<td>235 MONTGOMERY ST STE 1160 SAN FRANCISCO, CA</td>
<td>81-0564400</td>
<td>501 (C) 3</td>
<td>22,000.</td>
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<td>4</td>
<td>LATTER-DAY SAINT CHARITIES</td>
<td>50 E NORTH TEMPLE SALT LAKE CITY, UT 84150</td>
<td>501 (C) 3</td>
<td>90,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>LAUNCH GLOBAL</td>
<td>PO BOX 830650 RICHARDSON, TX 75083</td>
<td>501 (C) 3</td>
<td>12,040.</td>
<td>FMV</td>
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<tr>
<td>6</td>
<td>LAUREL ADVOCACY AND REFERRAL SERVICES INC</td>
<td>311 LAUREL AVE LAUREL, MD 20707</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>LAUREL HILL BAPTIST CHURCH</td>
<td>3595 GRAND FORKS BLVD CHARLOTTESVILLE, VA 2</td>
<td>54-1210835</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>LAUREL HOUSE</td>
<td>PO BOX 764 NORRISTOWN, PA 19404</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>LAUREL HOUSE INC</td>
<td>1616 WASHINGTON BLVD STAMFORD, CT 6902</td>
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<td>10</td>
<td>LAUREL SCHOOL</td>
<td>1 LYMAN CIR BEACHWOOD, OH 44122</td>
<td>501 (C) 3</td>
<td>80,000.</td>
<td>FMV</td>
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<td>11</td>
<td>LAUREL SCHOOL PARENT TEACHER ORGANIZATION</td>
<td>95 EDGE RD ATHERTON, CA 94027</td>
<td>501 (C) 3</td>
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<td>12</td>
<td>LAUREL GLEN BIBLE CHURCH</td>
<td>2801 ASHE RD BAKERSFIELD, CA 93309</td>
<td>95-3284979</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table...
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>LAVON DRIVE BAPTIST CHURCH</td>
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<td>3</td>
<td>LAW FOUNDATION OF SILICON VALLEY</td>
<td>52-1014754</td>
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<td>5</td>
<td>LAWRENCE CATHOLIC ACADEMY OF LAWRENCE MASSA</td>
<td>101 PARKER ST LAWRENCE, MA 1843</td>
<td>27-2281636</td>
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<td>10,000.</td>
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<td>6</td>
<td>LAWRENCE COMMUNITY WORKS INC</td>
<td>168 NEWBURY ST LAWRENCE, MA 1841</td>
<td>04-2982308</td>
<td>501 (C) 3</td>
<td>290,000.</td>
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<td>7</td>
<td>LAWRENCE PUBLIC LIBRARY FOUNDATION</td>
<td>1100 LOUISIANA ST HOUSTON, TX 77002</td>
<td>48-1179872</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>8</td>
<td>LAWRENCE SCHOOL</td>
<td>1551 E WALLINGS RD BROADVIEW HEIGHTS, OH 44</td>
<td>34-1137455</td>
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<td>10,500.</td>
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<td>9</td>
<td>LAWRENCE UNIVERSITY OF WISCONSIN</td>
<td>711 E BOLDT WAY APPLETON, WI 54911</td>
<td>39-0806297</td>
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<td>101,400.</td>
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<td>10</td>
<td>LAWYERS COMMITTEE FOR 911 INQUIRY INCORPORA</td>
<td>81-2563999</td>
<td>501 (C) 3</td>
<td>26,000.</td>
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<td>N/A</td>
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<td>11</td>
<td>LAWYERS COMMITTEE FOR CIVIL RIGHTS UNDER LA</td>
<td>52-0799246</td>
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<td>12</td>
<td>LAWYERS FOR CHILDREN INC</td>
<td>110 LAFAYETTE ST NEW YORK, NY 10013</td>
<td>13-3202043</td>
<td>501 (C) 3</td>
<td>12,800.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>PO BOX 408 LAWRENCE, MA 1842</td>
<td>04-2755382</td>
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<td>(3) LCC INTERNATIONAL FUND INC</td>
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<td>501 (C) 3</td>
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<td>(4) LE BONHEUR CHILDRENS HOSPITAL FOUNDATION</td>
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<td>850 POPLAR AVE # 2 MEMPHIS, TN 38105</td>
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<td>1436 42ND ST BROOKLYN, NY 11219</td>
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<td>(6) LEAD PUBLIC SCHOOLS INC</td>
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<td>2835 BRICK CHURCH PIKE NASHVILLE, TN 37207</td>
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<td>(7) LEADERS OF FAITH FOUNDATION</td>
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<td>PO BOX 3119 BETHLEHEM, PA 18017</td>
<td>82-1368312</td>
<td>501 (C) 3</td>
<td>6,250</td>
<td>FMV</td>
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<td>(8) LEADERSHIP CONFERENCE EDUCATION FUND INC</td>
<td>23-7026895</td>
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<tr>
<td>1620 L ST NW STE 1100 WASHINGTON, DC 20036</td>
<td>23-7026895</td>
<td>501 (C) 3</td>
<td>208,000</td>
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<td>(9) LEADERSHIP EDGE INC</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 51657 DURHAM, NC 27717</td>
<td>75-2493687</td>
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<td>FMV</td>
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<td>(10) LEADERSHIP EDUCATION AND ATHLETICS IN PARTN</td>
<td>33-1071771</td>
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<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>31 JEFFERSON ST NEW HAVEN, CT 6511</td>
<td>33-1071771</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11) LEADERSHIP ENTERPRISE FOR A DIVERSE AMERICA</td>
<td>36-3293207</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
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<td>205 W WACKER DR STE 1400 CHICAGO, IL 60606</td>
<td>36-3293207</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>LEADERSHIP INSTITUTE 1101 N HIGHLAND ST ARLINGTON, VA 22201</td>
<td>51-0235174</td>
<td>501 (c) 3</td>
<td>281,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>LEADERSHIP INVESTMENT INTENSIVES INC PO BOX 323 ROGERSVILLE, MO 65742</td>
<td>45-3327354</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>LEADERSHIP RESOURCES INTERNATIONAL 12575 S RIDGELAND AVE PALOS HEIGHTS, IL 604</td>
<td>36-2972097</td>
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<td>17,600.</td>
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<td>01-0779814</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>LEADING THE WAY WITH DR MICHAEL YOUSSEF INC 3585 NORTHSIDE PKWY NW ATLANTA, GA 30327</td>
<td>58-1816773</td>
<td>501 (c) 3</td>
<td>36,000.</td>
<td>FMV</td>
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<td>6</td>
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<td>52-1379661</td>
<td>501 (c) 3</td>
<td>578,000.</td>
<td>FMV</td>
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<td>38-2418387</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>LEAGUE OF WOMEN VOTERS EDUCATION FUND 1233 20TH ST NW STE 500 WASHINGTON, DC 2003</td>
<td>53-0239013</td>
<td>501 (c) 3</td>
<td>44,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>LEAGUE OF WOMEN VOTERS OF DANE COUNTY INC 720 HILL ST MADISON, WI 53705</td>
<td>39-0892881</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>LEAGUE OF WOMEN VOTERS OF MAINE EDUCATION F PO BOX 18187 PORTLAND, ME 4112</td>
<td>04-3386477</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>LEAGUE OF WOMEN VOTERS OF OHIO EDUCATION F 17 SOUTH HIGH STREET COLUMBUS, OH 43215</td>
<td>31-1050638</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>LEAGUE OF WOMEN VOTERS OF WISCONSIN INC 612 W MAIN ST STE 200 MADISON, WI 53703</td>
<td>39-1609121</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
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<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>LEAGUE TO SAVE LAKE TAHOE 2608 LAKE TAHOE BLVD SOUTH LAKE TAHOE, CA 9</td>
<td>94-6128680</td>
<td>501 (C) 3</td>
<td>62,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEAH DEMAREE DOUGLAS IMAGINATION FOUNDATION 215 W 5TH ST CLIFTON, TX 76634</td>
<td>45-3950922</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEAP LEARNING CENTER 1221 MASS ST TUSTIN, CA 92780</td>
<td>26-1320187</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEAPS OF IMAGINATION INC PO BOX 843 ROCKPORT, ME 4856</td>
<td>82-5192741</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEARNING PROJECT INC 107 MARLBOROUGH ST BOSTON, MA 2116</td>
<td>04-2525467</td>
<td>501 (C) 3</td>
<td>101,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEARNING TREE 1721 15TH AVE SEATTLE, WA 98122</td>
<td>91-1072804</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEARNSENSE INTERNATIONAL PO BOX 6203 WASHINGTON, DC 20015</td>
<td>80-0208444</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>LEAST OF THESE GASTON INC 4100 E FRANKLIN BLVD GASTONIA, NC 28056</td>
<td>46-2326191</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
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<td>LEAST OF THESE MINISTRIES INC 1725 KEYSVILLE BRUCEVILLE RD KEYMAR, MD 217</td>
<td>52-2220216</td>
<td>501 (C) 3</td>
<td>10,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEAVEN INC 1475 OPPORTUNITY WAY MENASHA, WI 54952</td>
<td>39-1572168</td>
<td>501 (C) 3</td>
<td>5,550.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>LEBANESE INFORMATION CENTER INC 4406 CINNAMON RIDGE TRL SAINT PAUL, MN 5512</td>
<td>26-3705493</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LEBANON EDUCATIONAL FOUNDATION INC 1005 HENDRICKS DR LEBANON, IN 46052</td>
<td>35-1804498</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1</td>
<td>LEBANON UNITED METHODIST CHURCH</td>
<td>02-6037039</td>
<td>501 (C) 3</td>
<td>21,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>LEBANON VALLEY COLLEGE</td>
<td>23-1352354</td>
<td>501 (C) 3</td>
<td>37,250.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>LEE CHURCH CONGREGATIONAL, INC.</td>
<td>02-0279663</td>
<td>501 (C) 3</td>
<td>15,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>LEE INITIATIVE INC</td>
<td>82-3884798</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>LEE MEMORIAL HEALTH SYSTEM FOUNDATION INC</td>
<td>65-0645343</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>LEE PARK BAPTIST CHURCH</td>
<td>56-1372065</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>LEE UNIVERSITY</td>
<td>62-0502739</td>
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<td>N/A</td>
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<td>8</td>
<td>LEEDS EPISCOPAL CHURCH IN MARKHAM, VIRGINIA</td>
<td>54-0994495</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>LEELANAU COMMUNITY CULTURAL CENTER</td>
<td>38-3052356</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>LEELANAU CONSERVANCY</td>
<td>38-2710855</td>
<td>501 (C) 3</td>
<td>103,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>LEELANAU HISTORICAL SOCIETY</td>
<td>38-2710855</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>LEELANAU SCHOOL FOR EDUCATION</td>
<td>38-2710855</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
*Form 990*

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<tr>
<td>LEGACY COMMUNITY HEALTH ENDOWMENT INC</td>
<td>66308</td>
<td>701 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 66308 HOUSTON, TX 77266</td>
<td>76-0248082</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LEGACY FOUNDATION INC</td>
<td>370 E 84TH DR STE 100 MERRILLVILLE, IN 4641</td>
<td>501 (C) 3</td>
<td>35,174.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LEGACY HOUSING FOUNDATION</td>
<td>900 S GAY ST STE 2000 KNOXVILLE, TN 37902</td>
<td>501 (C) 3</td>
<td>135,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LEGACY LAND CONSERVANCY</td>
<td>6276 JACKSON RD STE G ANN ARBOR, MI 48103</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LEGACY MINDED MEN INC</td>
<td>2160 58TH AVENUE PMB 209 VERO BEACH, FL 329</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LEGACY SENIOR COMMUNITIES INC</td>
<td>8260 MANDERVILLE LN STE 300 DALLAS, TX 7523</td>
<td>501 (C) 3</td>
<td>53,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL ACTION CHICAGO LLC</td>
<td>120 S LA SALLE ST CHICAGO, IL 60603</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL AID AT WORK</td>
<td>180 MONTGOMERY ST STE 600 SAN FRANCISCO, CA</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL AID JUSTICE CENTER</td>
<td>1000 PRESTON AVE CHARLOTTESVILLE, VA 22903</td>
<td>501 (C) 3</td>
<td>10,006,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL AID SERVICE OF BROWARD COUNTY INC</td>
<td>491 N STATE ROAD 7 PLANTATION, FL 33317</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL AID SOCIETY</td>
<td>199 WATER STREET NEW YORK, NY 10038</td>
<td>501 (C) 3</td>
<td>120,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LEGAL AID SOCIETY OF CLEVELAND</td>
<td>1223 W 6TH ST CLEVELAND, OH 44113</td>
<td>501 (C) 3</td>
<td>32,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**General Information on Grants and Assistance**

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   - Yes [ ]  
   - No [ ]  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1</td>
<td>LEGAL AID SOCIETY OF THE DISTRICT OF COLUMB</td>
<td>1331 H ST NW STE 350 WASHINGTON, DC 20005</td>
<td>53-0196600</td>
<td>301 (C)</td>
<td>3</td>
<td>69,410.</td>
<td>FMV</td>
<td>N/A</td>
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<td>LEGAL AID SOUTHEASTERN PENNSYLVANIA INC</td>
<td>625 SWEEDE ST NORRISTOWN, PA 19401</td>
<td>23-190114</td>
<td>301 (C)</td>
<td>3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>3</td>
<td>LEGAL ASSISTANCE CENTER</td>
<td>180 OTTAWA AVE NW GRAND RAPIDS, MI 49503</td>
<td>37-1492605</td>
<td>301 (C)</td>
<td>3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>LEGAL INFORMATION FOR FAMILIES TODAY</td>
<td>32 COURT ST STE 1208 BROOKLYN, NY 11201</td>
<td>13-3910567</td>
<td>301 (C)</td>
<td>3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td>LEGAL INSURRECTION FOUNDATION</td>
<td>18 MAPLE AVENUE 280 BARRINGTON, RI 2806</td>
<td>82-2279600</td>
<td>301 (C)</td>
<td>3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
<td>LEGAL RESOURCE CENTER ON VIOLENCE AGAINST W</td>
<td>6930 CARROLL AVE STE 400S TAKOMA PARK, MD 2</td>
<td>52-2403785</td>
<td>301 (C)</td>
<td>3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>7</td>
<td>LEGAL SERVICES FOR CHILDREN INC</td>
<td>1254 MARKET ST 3RD FLR SAN FRANCISCO, CA 94</td>
<td>51-0169463</td>
<td>301 (C)</td>
<td>3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td>LEGAL SERVICES OF GREATER MIAMI INC</td>
<td>4343 W FLAGLER ST STE 180 CORAL GABLES, FL</td>
<td>59-1227481</td>
<td>301 (C)</td>
<td>3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>LEGAL SERVICES OF NEW JERSEY INC</td>
<td>PO BOX 1357 EDISON, NJ 8818</td>
<td>22-2059399</td>
<td>301 (C)</td>
<td>3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>LEGAL SERVICES OF THE HUDSON VALLEY</td>
<td>90 MAPLE AVE WHITE PLAINS, NY 10601</td>
<td>13-6265606</td>
<td>301 (C)</td>
<td>3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>11</td>
<td>LEGAL VOICE</td>
<td>907 PINE ST STE 500 SEATTLE, WA 98101</td>
<td>91-1047900</td>
<td>301 (C)</td>
<td>3</td>
<td>16,000.</td>
<td>FMV</td>
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<tr>
<td>12</td>
<td>LEGION OF CHRIST INC</td>
<td>30 MANSELL CT ROSWELL, GA 30076</td>
<td>06-0923895</td>
<td>301 (C)</td>
<td>3</td>
<td>75,000.</td>
<td>FMV</td>
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</tr>
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<tbody>
<tr>
<td>1. LEHIGH UNIVERSITY</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2. LEHIGH VALLEY ATHLETIC CLUB</td>
<td>23-3019288</td>
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<td>N/A</td>
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<td>3. LEIGH YAWKEY WOODSON ART MUSEUM INC</td>
<td>22-7281913</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>4. LEILANI FARM SANCTUARY</td>
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<tr>
<td>5. LEMHI COUNTY HISTORICAL SOCIETY INC</td>
<td>82-0257581</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>6. LEMHI REGIONAL LAND TRUST</td>
<td>20-2753508</td>
<td>501 (C) 3</td>
<td>11,000.</td>
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<td>7. LEMON SPONGE CAKE CONTEMPORARY BALLET</td>
<td>52-2444709</td>
<td>501 (C) 3</td>
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<td>8. LEMOYNE COMMUNITY CENTER</td>
<td>25-1215468</td>
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<td>N/A</td>
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<tr>
<td>9. LENBROOK SQUARE FOUNDATION INC</td>
<td>58-1416841</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>10. LEHENA BAPTIST CHURCH</td>
<td>48-1088165</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>11. LEHN FOUNDATION</td>
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<td>12. LENOIR PRESBYTERIAN CHURCH</td>
<td>56-0532305</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes ☑️ No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>2</td>
<td>LENOIR-RHYNE UNIVERSITY</td>
<td>56-0556753</td>
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<td>3</td>
<td>LEO HIGH SCHOOL</td>
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<td>4</td>
<td>LEO HIGH SCHOOL BURLINGTON HIGH SCHOOL ATHLETICS HALL OF FAME</td>
<td>46-5352099</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>5</td>
<td>LEROY CUUSD 2</td>
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<td>6</td>
<td>LES TURNER AMYOTROPHIC LATERAL SCLEROSIS PO</td>
<td>36-2916466</td>
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<td>FMV</td>
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<td>7</td>
<td>LESBIAN AND GAY COMMUNITY SERVICES CENTER I</td>
<td>13-3217805</td>
<td>501 (C) 3</td>
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<td>8</td>
<td>LESEA GLOBAL FEED THE HUNGRY INC</td>
<td>32-0053249</td>
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<td>LET S BE BETTER HUMANS</td>
<td>82-0818881</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>LET S GET READY INC</td>
<td>31-1698832</td>
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<td>12</td>
<td>LETTER OF THE LAW INC</td>
<td>81-2789183</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>LEUKEMIA &amp; LYMPHOMA SOCIETY INC</td>
<td>13-5644916</td>
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<td>617,057.</td>
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<td>LEV HEREL INC</td>
<td>45-4551767</td>
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<tr>
<td>LEV CHESED CHARITY FUND INC</td>
<td>35-2227353</td>
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<td>LEV FORD FOUNDATION INC</td>
<td>47-4633578</td>
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<td>LENA WILDLIFE CONSERVANCY USA</td>
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<td>LEWIS AND CLARK COLLEGE</td>
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<td>LEWIS AND CLARK DISTRICT COUNCIL OF ST VINC</td>
<td>93-0386858</td>
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<td>LEWIS CLARK CHRISTIAN SCHOOL INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>LEWIS CLARK CHRISTIAN SCHOOL INC</td>
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<td>LEWIS-CLARK STATE COLLEGE FOUNDATION INC</td>
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<td>FMV</td>
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<tr>
<td>LEWISVILLE CHURCH OF CHRIST INC</td>
<td>75-2718602</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  .................................................................  X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>(1)</td>
<td>LEWY BODY DEMENTIA ASSOCIATION INC</td>
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<td>(2)</td>
<td>LEXINGTON CHRISTIAN ACADEMY</td>
<td>06-2134815</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>(3)</td>
<td>LFA INTERNATIONAL INC</td>
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<td>(5)</td>
<td>LIBERTY CHAPEL UNITED METHODIST CHURCH</td>
<td>54-0634982</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(6)</td>
<td>LIBERTY COUNSEL INC</td>
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<td>(7)</td>
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<td>59-2986294</td>
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<td>(8)</td>
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   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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<th>8 (h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>FMV</td>
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<td>LIFE BUILDERS MINISTRIES INTERNATIONAL</td>
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<td>LIFE CENTERS INC</td>
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<td>FMV</td>
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<td>LIFE CHOICES INC</td>
<td>22-3703602</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table. 

---

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIFE COVENANT CHURCH INC 4600 E 2ND ST EDMOND, OK 73034</td>
<td>73-1486708</td>
<td>501 (c) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LIFE EXTENSION ADVOCACY FOUNDATION INC 3805 ESTELLA ST SEAFORD, NY 11783</td>
<td>46-5328762</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LIFE FELLOWSHIP ASSEMBLY OF GOD 6400 HENNEAN WAY MICHIGAN MICHIGAN</td>
<td>20-2721374</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LIFE FELLOWSHIP CHURCH 20010 CHARTOWN DR CORNELIUS, NC 28031</td>
<td>22-3877161</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LIFE FOCUS COMMUNICATIONS NFF 201 W LAKE ST CHICAGO, IL 60606</td>
<td>45-0587608</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LIFE GIVING NETWORK 4778 S GOLF COURSE DRIVE BLAINE, WA 98230</td>
<td>47-1387239</td>
<td>501 (c) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFE INTER FAITH TEAM ON UNEMPLOYMENT AND P</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>LIFE LEGAL DEFENSE FOUNDATION PO BOX 1928 RIFLE, CO 81650</td>
<td>84-0896081</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFE LINE OF HOPE A NON-PROFIT 135 KELLY RD KALISPELL, MT 59901</td>
<td>81-0530827</td>
<td>501 (c) 3</td>
<td>13,616.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFE LINE PREGNANCY CENTER</td>
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</tr>
<tr>
<td>LIFE NETWORK INC 4524 FOUNTAIN DR WILMINGTON, NC 28403</td>
<td>58-1634141</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFE OUTREACH INTERNATIONAL ASSOCIATION OF PO BOX 882000 NORTH RICHLAND HILLS, TX 7618</td>
<td>75-2684727</td>
<td>501 (c) 3</td>
<td>21,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LIFE GIVING NETWORK 4778 S GOLF COURSE DRIVE BLAINE, WA 98230</td>
<td>47-1387239</td>
<td>501 (c) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>LIFE INTER FAITH TEAM ON UNEMPLOYMENT AND P</td>
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<td></td>
<td></td>
<td></td>
</tr>
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<td>LIFE LEGAL DEFENSE FOUNDATION PO BOX 1928 RIFLE, CO 81650</td>
<td>84-0896081</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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<td>LIFE LINE OF HOPE A NON-PROFIT 135 KELLY RD KALISPELL, MT 59901</td>
<td>81-0530827</td>
<td>501 (c) 3</td>
<td>13,616.</td>
<td>FMV</td>
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<td>FMV</td>
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<td>LIFE OUTREACH INTERNATIONAL ASSOCIATION OF PO BOX 882000 NORTH RICHLAND HILLS, TX 7618</td>
<td>75-2684727</td>
<td>501 (c) 3</td>
<td>21,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. | LIFE READY INC  
   PO BOX 436825 LOUISVILLE, KY 40253 | 82-2998509 | 501 (C) 3 | 20,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2. | LIFE RELAUNCH  
   24600 S TAMIAI TRL PL # 172 BONITA SPRINGS | 81-4317042 | 501 (C) 3 | 12,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3. | LIFE SCIENCE CARES INC  
   PO BOX 425486 CAMBRIDGE, MA 2142 | 81-2435939 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4. | LIFE SPRING NETWORK  
   2189 W BOWLER ST, CHICAGO, IL 60612 | 20-4307197 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5. | LIFE TEEN INC  
   6105 BLUE STONE RD STE B ATLANTA, GA 30328 | 86-0602592 | 501 (C) 3 | 55,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6. | LIFE YOU CAN SAVE  
   975 WARD RD SEQUIM, WA 98382 | 46-2100400 | 501 (C) 3 | 70,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7. | LIFEBOX FOUNDATION INC  
   195 MONTAGUE ST BROOKLYN, NY 11201 | 46-2266526 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8. | LIFEBRIDGE ADVENTIST CHURCH  
   4425 HARBOR COUNTRY DR APT 153 GIG HARBOR, WA | 85-1228801 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9. | LIFECARE ALLIANCE  
   1699 W MOUND ST COLUMBUS, OH 43223 | 31-4379494 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10. | LIFEHOUSE OF HOUSTON INC  
   2010 NORTH LOOP W HOUSTON, TX 77018 | 76-0226503 | 501 (C) 3 | 22,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11. | LIFELINE ANIMAL PROJECT INC  
   3180 PRESIDENTIAL DR ATLANTA, GA 30340 | 01-0599278 | 501 (C) 3 | 24,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12. | LIFELINE CHILDREN SERVICES INC  
   100 MISSIONARY RDG BIRMINGHAM, AL 35242 | 83-0896978 | 501 (C) 3 | 10,800. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIFELINE CHRISTIAN MISSION 18940 BASE CAMP RD MONUMENT, CO 80132 31-0999791 501 (C) 3 50,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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</tr>
<tr>
<td>LIFELINE PRODUCTIONS INC 6912 N GLENWOOD AVE CHICAGO, IL 60626 36-3206582 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFELONG-HEALTH FOR ALL 210 S LUCILE ST SEATTLE, WA 98108 91-1215715 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LIFE MOVES 181 CONSTITUTION DR MENLO PARK, CA 94025 77-0160469 501 (C) 3 148,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LIFENET INC A NEW JERSEY NON-PROFIT CORPORATION PO BOX 1800 MONTCLAIR, NJ 7042 22-3292521 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>LIFENET INTERNATIONAL 1440 G ST NW WASHINGTON, DC 20005 27-0904821 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFENETS INTERNATIONAL INC 8435 CROWN POINT RD INDIANAPOLIS, IN 46278 35-2083120 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td>LIFE POINT CHURCH 1915 ROSSVIEW RD CLARKSVILLE, TN 37043 32-0136581 501 (C) 3 14,900. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>LIFEPOINTE CHRISTIAN CHURCH PO BOX 400 TOANO, CA 95624 20-3945385 501 (C) 3 8,960. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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</tr>
<tr>
<td>LIFEPOINTE CHRISTIAN CHURCH 9500 DURANT RD RALEIGH, NC 27614 20-0236718 501 (C) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>LIFEPOINTE CHURCH 10291 E STOCKTON BLVD ELK GROVE, CA 23168 71-0941337 501 (C) 3 60,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LIFESAVERS INC 35700 SAND CANYON RD CALIENTE, CA 93518 95-4631906 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. LIFESITENEWS COM INC</td>
<td>51-0634787</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. LIFESONG FOR ORPHANS INC</td>
<td>35-1902841</td>
<td>501 (C) 3</td>
<td>746,816.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. LIFETIME WELLS INTERNATIONAL</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. LIFEWATER INC</td>
<td>95-3987142</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. LIFEWAY NETWORK INC</td>
<td>20-8645579</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. LIFEWIRE</td>
<td>91-1190193</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. LIFT INC</td>
<td>52-2168409</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. LIFT TO RISE</td>
<td>82-5258187</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. LIFT UP THE VULNERABLE INC</td>
<td>83-1980124</td>
<td>501 (C) 3</td>
<td>14,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10. LIFTING HANDS INTERNATIONAL</td>
<td>81-1708977</td>
<td>501 (C) 3</td>
<td>117,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11. LIFTING UP WESTCHESTER INC</td>
<td>13-3121606</td>
<td>501 (C) 3</td>
<td>56,443.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. LIGHT AND LEADERSHIP INITIATIVE</td>
<td>26-2342814</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>LIGHT FOR ORPHANS CORP 2 MAPLE DR PORT WASHINGTON, NY 11050</td>
<td>26-0892390</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>2.</td>
<td>LIGHT OF AFRICA 5 TARTAN CT CONROE, TX 77301</td>
<td>46-0508764</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>LIGHT OF BERGITSANA PO BOX 124 ASHLAND, OR 97520</td>
<td>33-0860198</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>LIGHT OF LIFE MINISTRIES INC 913 WESTERN AVE PITTSBURGH, PA 15233</td>
<td>25-1056389</td>
<td>501 (C) 3</td>
<td>11,718.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>LIGHT OF THE VILLAGE A NON-PROFIT CORPORATI PO BOX 1641 BAY MINETTE, AL 36507</td>
<td>72-1548667</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<tr>
<td>6.</td>
<td>LIGHT OF THE WORLD CHARITIES INC 1300 SE 10TH ST STE B STUART, FL 34996</td>
<td>65-0920003</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>LIGHTHOUSE CHRISTIAN CHURCH 15530 LAKE HILLS BLVD # 201 BELLEVUE, WA 98</td>
<td>91-2073902</td>
<td>501 (C) 3</td>
<td>56,000.</td>
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<td>8.</td>
<td>LIGHTHOUSE CHRISTIAN MINISTRIES 410 S COLUMBIA ST WENATCHEE, WA 98801</td>
<td>36-4661570</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>9.</td>
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<td>42-1044729</td>
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<td>5,500.</td>
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<td>10.</td>
<td>LIGHTHOUSE COMMUNITY CHURCH OF SOUTH BAY 501 VANESS AVE TORRANCE, CA 90501</td>
<td>20-1568832</td>
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<td>11.</td>
<td>LIGHTHOUSE FAMILY RETREAT INC 2555 NORTHWINDS PKWY STE 800 ALPHARETTA, GA 30009</td>
<td>58-2509728</td>
<td>501 (C) 3</td>
<td>21,300.</td>
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<td>12.</td>
<td>LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAI 1155 MARKET ST FL 10 SAN FRANCISCO, CA 9411</td>
<td>94-1415317</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
OE1288 1.000

18674H 1467 V 20-7.21
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
<td>LIGHTHOUSE GUILD INTERNATIONAL INC</td>
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<td>3.</td>
<td>LIGHTHOUSE MISSION MINISTRIES</td>
<td>23-2888152</td>
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<td>13,200.</td>
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<td>LIGHTHOUSE MISSIONARY CHURCH</td>
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<td>LIGHTHOUSE PROMISE INC</td>
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<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>LIGHTHOUSE YOUTH MINISTRIES INC</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
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<td>LIGHTHOUSE YOUTH SERVICES INC</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8.</td>
<td>LIGHTHOUSE YOUTH THEATRE &amp; EDUCATION INC</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>LIGHTNING AND LOVE FOUNDATION</td>
<td>23-2888152</td>
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<td>17,250.</td>
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<td>10.</td>
<td>LIGHTSTREET UNITED METHODIST CHURCH</td>
<td>23-2888152</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11.</td>
<td>LIGONIER ACADEMY OF BIBLICAL AND THEOLOGICA</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12.</td>
<td>LIGONIER MINISTRIES INC</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>5,173,420.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>LIHUE UNITED METHODIST CHURCH</td>
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<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 1247 LIHUE, HI 96766</td>
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<tr>
<td>LILAC SERVICES FOR THE BLIND</td>
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<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>1212 N HOWARD ST SPOKANE, WA 99201</td>
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<td>LILLIAN &amp; ALBERT SMALL CAPITAL JEWISH MUSEUM</td>
<td>52-6066459</td>
<td>501 (C) 3</td>
<td>33,600.</td>
<td>FMV</td>
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<td>1319 F ST NW STE 810 WASHINGTON, DC 20004</td>
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<td>LILYS LEGACY SENIOR DOG SANCTUARY</td>
<td>26-4273729</td>
<td>501 (C) 3</td>
<td>11,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PO BOX 751002 PETALUMA, CA 94975</td>
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<td>LIMEN HOUSE INC</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>600 W 10TH ST WILMINGTON, DE 19801</td>
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<td>LIMESTONE PROJECT EMPLOYEES FUND INC</td>
<td>74-2309541</td>
<td>501 (C) 3</td>
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<td>3964 FM 39 JEWETT, TX 75846</td>
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<td>LIMON AREA FIRE PROTECTION DISTRICT</td>
<td>26-1467195</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>PO BOX 3 130 C AVENUE LIMON, CO 80828</td>
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<td>LIMON EDUCATION FOUNDATION</td>
<td>20-4726961</td>
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<td>PO BOX 297 LIMON, CO 80828</td>
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<td>LIMON TRAIN RIDE &amp; HERITAGE SOCIETY</td>
<td>84-1226575</td>
<td>501 (C) 3</td>
<td>266,371.</td>
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<td>PO BOX 341 LIMON, CO 80828</td>
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<td>LINCOLN CENTER FOR THE PERFORMING ARTS INC</td>
<td>13-1847137</td>
<td>501 (C) 3</td>
<td>1,172,500.</td>
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<tr>
<td>70 LINCOLN CENTER PLZ NEW YORK, NY 10023</td>
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<td>LINCOLN COMMUNITY FOUNDATION INC</td>
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<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>215 CENTENNIAL MALL S STE 100 LINCOLN, NE 6</td>
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<td>LINCOLN NETWORK INC</td>
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<td>FMV</td>
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<td>310 S HARRINGTON ST RALEIGH, NC 27603</td>
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</tbody>
</table>

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   - Yes ☑  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
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<td>36-2512404</td>
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<td>88,525.</td>
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<td>(4)</td>
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<td>20-0379279</td>
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<td>01-0153960</td>
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<td>25,777.</td>
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<td>94-6104179</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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<th>Amount of cash grant</th>
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<th>Purpose of grant or assistance</th>
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<tr>
<td>1.</td>
<td>LINSKY SCHOOL INCORPORATED</td>
<td>55-0357035</td>
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<td>LIONS TIGERS &amp; BEARS</td>
<td>33-0938499</td>
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<td>4.</td>
<td>LIPSCOMB UNIVERSITY</td>
<td>62-0485733</td>
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<td>5.</td>
<td>LISTEN LEBANON IN SERVICE TO EACH NEIGHBOR</td>
<td>23-7225952</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>6.</td>
<td>LITCHFIELD HISTORICAL SOCIETY</td>
<td>06-6000486</td>
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<td>FMV</td>
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<td>7.</td>
<td>LITCHFIELD PERFORMING ARTS INC</td>
<td>06-1083202</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>8.</td>
<td>LITERACY ACTION INC</td>
<td>58-1053728</td>
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<tr>
<td>9.</td>
<td>LITERACY COUNCIL OF MONTGOMERY COUNTY MARYL</td>
<td>52-0852549</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10.</td>
<td>LITERACY COUNCIL OF SOUTHWESTERN PA</td>
<td>25-1620790</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11.</td>
<td>LITERACY INC</td>
<td>13-3911311</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>12.</td>
<td>LITERACY MINNESOTA</td>
<td>23-7217182</td>
<td>501 (C) 3</td>
<td>14,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>LITERACY NETWORK INC 701 DANE ST MADISON, WI 53713</td>
<td>51-0180488</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>2</td>
<td>LITERACY PARTNERS INC 75 MAIDEN LN FL 1102 NEW YORK, NY 10038</td>
<td>51-0180665</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>3</td>
<td>LITERACY SERVICES OF WISCONSIN INC 555 N PLANKINTON AVE MILWAUIKEE, WI 53203</td>
<td>39-1091203</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>4</td>
<td>LITERACY VOLUNTEERS OF WASHINGTON COUNTY INC PO BOX 245 MESTERLY, RI 02891</td>
<td>05-0438937</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5</td>
<td>LITERARY CLASSICS OF THE UNITED STATES INC 14 E 60TH ST NEW YORK, NY 10022</td>
<td>13-2986916</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>LITHUANIAN HERITAGE SOCIETY OF ROCHESTER INC 31 E MAIN ST ROCHESTER, NY 14614</td>
<td>20-5828860</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
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<tr>
<td>7</td>
<td>LITTLE ANGELS SERVICE TEAM 6904 WALEY BRIDGE LN AUSTIN, TX 78739</td>
<td>82-1846317</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>8</td>
<td>LITTLE BABY FACE FOUNDATION 135 E 74TH ST NEW YORK, NY 10021</td>
<td>32-0024143</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>9</td>
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<td>20-0126713</td>
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<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>LITTLE BIT THERAPEUTIC RIDING CENTER 18675 NE 106TH ST REDMOND, WA 98052</td>
<td>91-1012131</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>11</td>
<td>LITTLE CHILDREN OF THE WORLD INC PO BOX 37 BARNESVILLE, GA 30204</td>
<td>58-1760970</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>12</td>
<td>LITTLE CITY FOUNDATION 1760 W ALGONQUIN RD PALATINE, IL 60067</td>
<td>36-2434562</td>
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<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [ ] No [x]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>Line</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>LITTLE COMPTON HISTORICAL SOCIETY INC</td>
<td>05-6010240</td>
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<td>2</td>
<td>LITTLE FLOWER CHILDREN AND FAMILY SERVICES</td>
<td>11-1633572</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>3</td>
<td>LITTLE MILL FOUNDATION FOR THE REHABILITATION</td>
<td>22-1656055</td>
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<td>FMV</td>
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<td>4</td>
<td>LITTLE LEAGUE BASEBALL INC</td>
<td>23-2579415</td>
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<td>5</td>
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<td>7</td>
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<td>95-4775729</td>
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<td>9</td>
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<td>20-5581665</td>
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<td>10</td>
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<td>13-2867881</td>
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<td>11</td>
<td>LITTLE SISTERS OF THE POOR CHICAGO INC</td>
<td>36-2482272</td>
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<td>19,493.</td>
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<td>12</td>
<td>LITTLE SISTERS OF THE POOR INC</td>
<td>51-0095986</td>
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<td>23,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ............................................................

3. Enter total number of other organizations listed in the line 1 table: ............................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) LITTLE SISTERS OF THE POOR OF CINCINNATI</td>
<td>31-0621920</td>
<td>501 (C) 3</td>
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<td>(2) LITTLE SISTERS OF THE POOR OF THE CITY AND</td>
<td>23-1552179</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) LITTLE SISTERS OF THE POOR OF THE STATE OF</td>
<td>25-0974310</td>
<td>501 (C) 3</td>
<td>31,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) LITTLE SISTERS OF THE POOR ST JOSEPH'S HOME</td>
<td>53-0227542</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) LITTLE SISTERS OF THE POOR ST JOSEPH'S HOME</td>
<td>22-2098022</td>
<td>501 (C) 3</td>
<td>61,000.</td>
<td>FMV</td>
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<td>(6) LITTLE SISTERS OF THE POOR ST JOSEPH'S HOME</td>
<td>36-2443793</td>
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<td>26,586.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) LITTLE TRAVERSE BAY HUMANE SOCIETY</td>
<td>38-1384441</td>
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<td>(8) LITTLE TRAVERSE CONSERVANCY INC</td>
<td>23-7267810</td>
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<td>(9) LITTLE WINGS OF HOPE</td>
<td>45-3971580</td>
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<td>FMV</td>
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<td>(10) LITTLE WISHES</td>
<td>52-2386886</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>(11) LITTLETON CHURCH OF CHRIST</td>
<td>74-2242806</td>
<td>501 (C) 3</td>
<td>5,700.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(12) LIVE ACTION</td>
<td>42-1764425</td>
<td>501 (C) 3</td>
<td>43,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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3. Enter total number of other organizations listed in the line 1 table...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ☑ Yes  ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>LIVE AGAIN MINISTRIES INC 108 WALNUT CREEK RD LOCUST, NC 28097</td>
<td>27-2256967</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>LIVE IN PEACE INC 321 BELL ST EAST PALO ALTO, CA 94303</td>
<td>45-2301493</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>LIVE OAK A LEARNING CENTER FOR CHILDREN 1555 MARIPOSA ST SAN FRANCISCO, CA 94107</td>
<td>94-2153158</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>LIVE OAK UNITARIAN UNIVERSALIST CONGREGATION 820 N FAIRVIEW AVE GOLETA, CA 93117</td>
<td>77-0128401</td>
<td>501 (C) 3</td>
<td>6,240.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>LIVE VIOLENCE FREE 2941 LAKE TAHOE BLVD SOUTH LAKE TAHOE, CA 9</td>
<td>94-2598256</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>LIVECONNECTIONS ORG 3025 WALNUT ST PHILADELPHIA, PA 19104</td>
<td>26-2666641</td>
<td>501 (C) 3</td>
<td>608,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>LIVING ALTERNATIVES PREGNANCY RESOURCE CENTER 205 WILBUR AVE CHAMPAIGN, IL 61822</td>
<td>37-1182626</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>LIVING BEYOND BREAST CANCER 40 MONUMENT RD STE 104 BALA CYNWYD, PA 19004</td>
<td>23-2734689</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9</td>
<td>LIVING BRANCHES FOUNDATION 275 DOCK DR LANDSDALE, PA 19446</td>
<td>91-2113430</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10</td>
<td>LIVING CITIES INC THE NATIONAL COMMUNITY DE 1730 M ST NW STE 400 WASHINGTON, DC 20036</td>
<td>26-0003950</td>
<td>501 (C) 3</td>
<td>408,420.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>LIVING CLASSROOMS FOUNDATION INC 802 S CAROLINE ST BALTIMORE, MD 21231</td>
<td>52-1369524</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>LIVING FAITH COMMUNITY CHURCH 1901 NORTHERN BLVD MANHASSET, NY 11030</td>
<td>11-3599025</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  ..............................................................................................................

3 Enter total number of other organizations listed in the line 1 table.  ..............................................................................................................

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

Schedule I (Form 990) 2020

JSA
0E1288 1,000

18674H 1467 V 20-7.21
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**SCHEDULE I**

**Form 990**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

## Part I – General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II – Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | LIVING FAITH LUTHERAN CHURCH  
2180 NW 142ND ST CLIVE, IA 50325 | 33-1008508 | 501 (C) 3 | 35,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | LIVING GOODS  
220 HALLECK ST STE 200B SAN FRANCISCO, CA 94109 | 20-5010527 | 501 (C) 3 | 37,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | LIVING HIS LIFE ABUNDANTLY INTERNATIONAL IN  
36181 E LAKE RD STE 310 PALM HARBOR, FL 34618 | 59-3581170 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | LIVING HOPE INTERNATIONAL INC  
PO BOX 116 WEST BEND, WI 53095 | 39-2000544 | 501 (C) 3 | 6,796. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | LIVING INDEPENDENTLY FOREVER INC  
550 LINCON RD RXT HYANNIS, MA 2601 | 22-3190452 | 501 (C) 3 | 53,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | LIVING NEW DEAL PROJECT  
1421 LINCOLN ST BERKELEY, CA 94702 | 46-3760943 | 501 (C) 3 | 125,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | LIVING ON THE EDGE WITH CHIP INGRAM  
3080 PREMIERE PKWY STE 150 DULUTH, GA 30097 | 46-0484695 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | LIVING PROMISE EVANGELICAL LUTHERAN CHURCH  
5075 DEARING RD MORRISTOWN, TN 37813 | 27-4573309 | 501 (C) 3 | 18,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | LIVING SAVIOR LUTHERAN CHURCH  
301 OVERLOOK RD ASHEVILLE, NC 28803 | 56-2265776 | 501 (C) 3 | 12,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | LIVING STONES CHURCH  
445 S VIRGINIA ST RENO, NV 89501 | 27-1142184 | 501 (C) 3 | 115,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | LIVING STONES VILLAGE USA LIMITED  
2360 MCLAUGHLIN AVE SAN JOSE, CA 95122 | 77-0662148 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | LIVING WATER APOSTOLIC  
PO BOX 322 ALGOMA, WI 54201 | 47-3347936 | 501 (C) 3 | 7,300. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number: 23-2888152

---

**Part I**
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   □ Yes  □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(a) Name and address of organization or government</th>
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<th>1(c) IRC section (if applicable)</th>
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<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of non-cash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1(LIVING WATER INTERNATIONAL)</td>
<td>76-0324875</td>
<td>501 (C) 3</td>
<td>93,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>PO BOX 2257 SUGAR LAND, TX 77487</td>
<td></td>
<td></td>
<td>115,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3(LIVING WATERS PUBLICATIONS)</td>
<td>94-149134</td>
<td>501 (C) 3</td>
<td>26,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4(LIVING WISDOM SCHOOL OF NEVADA CITY)</td>
<td>47-0957856</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6(LIVING WORD CHURCH OF WEST PASCO INC)</td>
<td>59-1461065</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7(LIVING WORD COMMUNITY CHURCH)</td>
<td>81-0568326</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9(LIVING WORD LUTHERAN CHURCH)</td>
<td>15-0690475</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10(LIZ S LEGACY INC)</td>
<td>21-0267058</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11(LLOYD CENTER FOR THE ENVIRONMENT INC)</td>
<td>14-0366693</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12(LOAVES &amp; FISHES)</td>
<td>16-0771515</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOAVES &amp; FISHES COMMUNITY SERVICES</td>
<td>36-3786777</td>
<td>501 (C) 3</td>
<td>21,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOAVES &amp; FISHES FAMILY KITCHEN</td>
<td>77-0370874</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LOAVES &amp; FISHES FOOD PANTRY INC</td>
<td>45-1498743</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LOAVES &amp; FISHES INC</td>
<td>56-1398498</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOAVES AND FISHES OF TOMPKINS COUNTY INC</td>
<td>16-1271406</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOAVES AND FISHES INC</td>
<td>59-2494440</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOAVES AND FISHES TOO</td>
<td>41-1421522</td>
<td>501 (C) 3</td>
<td>32,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOBOLLOYPop Foundation INC</td>
<td>65-0865926</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOCAL INITIATIVES SUPPORT CORPORATION</td>
<td>13-3030229</td>
<td>501 (C) 3</td>
<td>517,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOCAL MEDIA FOUNDATION</td>
<td>36-4427750</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOGAN COUNTY CHARITABLE AND EDUCATIONAL FOUNDATION</td>
<td>31-1498923</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOGGERHEAD MARINELIFE CENTER INC</td>
<td>59-2445926</td>
<td>501 (C) 3</td>
<td>52,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
**(Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

[Attach to Form 990.](#)

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>LOGOS ACADEMY</td>
<td>250 W KING ST YORK, PA 17401</td>
<td>31-1520442</td>
<td>501 (C) 3</td>
<td>200,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>LOGOS COMMUNITY CHURCH</td>
<td>4300 171ST ST FLUSHING, NY 11358</td>
<td>46-4948326</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>LOGOS EVANGELICAL SEMINARY FOUNDATION INCOR</td>
<td>9358 TELSTAR AVE EL MONTE, CA 91731</td>
<td>95-4810364</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>LOMA LINDA ACADEMY</td>
<td>10656 ANDERSON ST LOMA LINDA, CA 92354</td>
<td>95-1831069</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>LOMA LINDA UNIVERSITY MEDICAL AUXILIARY</td>
<td>11245 ANDERSON ST STE 230 LOMA LINDA, CA 92</td>
<td>95-3157339</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>LON SOLOMON MINISTRIES</td>
<td>8116 ARLINGTON BLVD # 302 FALLS CHURCH, VA</td>
<td>82-3476770</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>LONE CONE LIBRARY FOUNDATION</td>
<td>1110 LUCERNE ST NORWOOD, CO 81423</td>
<td>81-3049342</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>LONG BEACH COMMUNITY FOUNDATION</td>
<td>400 OCEANGATE LONG BEACH, CA 90802</td>
<td>20-5054010</td>
<td>501 (C) 3</td>
<td>5,557.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>LONG BEACH RESCUE MISSION</td>
<td>1430 PACIFIC AVE LONG BEACH, CA 90813</td>
<td>95-2741506</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>LONG HOLLOW BAPTIST CHURCH</td>
<td>3031 LONG HOLLOW PIKE HENDERSONVILLE, TN 37</td>
<td>62-1017342</td>
<td>501 (C) 3</td>
<td>13,013.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>LONG ISLAND CARES INC</td>
<td>10 DAVIDS DR HAUPPAUGE, NY 11788</td>
<td>11-2524512</td>
<td>501 (C) 3</td>
<td>127,660.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>LONG ISLAND COALITION FOR THE HOMELESS</td>
<td>600 ALBANY AVE STE 2 AMITYVILLE, NY 11701</td>
<td>11-2770718</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<tr>
<th>Name of the organization</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
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</table>

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>LONG ISLAND CRISIS CENTER INC</td>
<td>2740 MARTIN AVE. BELLMORE, NY 11710</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>LONG ISLAND GAY AND LESBIAN YOUTH INC</td>
<td>125 KENNEDY DR STE 100 HAUPPAUGE, NY 11788</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>LONG ISLAND JIREH CHURCH</td>
<td>267 SCHENCK AVE GREAT NECK, NY 11021</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>LONG LAKE LUTHERAN CHURCH</td>
<td>33114 CHURCH RD SARONA, WI 54870</td>
<td>501 (C) 3</td>
<td>8,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>LONG RIDGE SCHOOL INC</td>
<td>478 ERSKINE RD STAMFORD, CT 6903</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>LONGWOOD GARDENS INC</td>
<td>1001 CONSERVATORY RD KENNETH SQUARE, PA 193</td>
<td>501 (C) 3</td>
<td>12,085.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>LONGWOOD UNIVERSITY FOUNDATION INC</td>
<td>201 HIGH ST FARMVILLE, VA 23909</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>LOOKOUT MOUNTAIN PRESBYTERIAN CHURCH</td>
<td>PO BOX 57 LOOKOUT MOUNTAIN, TN 37350</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>LOOMIS INSTITUTE</td>
<td>4 BATECHLERD RD WINDSOR, CT 6095</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>LOON PRESERVATION COMMITTEE</td>
<td>PO BOX 604 MOULTONBOROUGH, NH 3254</td>
<td>501 (C) 3</td>
<td>74,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>LOOP CHRISTIAN MINISTRIES</td>
<td>10858 S MICHIGAN AVE CHICAGO, IL 60628</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. Lopez Island Family Resource Center</td>
<td>91-1919212</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. Loras College</td>
<td>1450 ALTA VISTA ST DUBUQUE, IA 52001</td>
<td>501 (C) 3</td>
<td>300,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. Lord and Schryver Conservancy</td>
<td>83-0436350</td>
<td>501 (C) 3</td>
<td>48,175</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. Lord of Life Lutheran Church</td>
<td>17989 CHILICOTHE RD. CHAGRIN FALLS, MN 553</td>
<td>501 (C) 3</td>
<td>7,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. Lord of Life Lutheran Church</td>
<td>7401 COUNTY ROAD 101 N MAPLE GROVE, TX 7507</td>
<td>501 (C) 3</td>
<td>57,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. Lord of Life Lutheran Church</td>
<td>3601 W 15TH ST PLANO, AZ 85375</td>
<td>501 (C) 3</td>
<td>29,381</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. Lord of Life Lutheran Church</td>
<td>13724 W MEKER BLVD SUN CITY WEST, OH 44023</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8. Lord of Life Lutheran Church</td>
<td>3801 S PANTHER CREEK DR SPRING, TX 77381</td>
<td>501 (C) 3</td>
<td>27,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. Lord of the Mountains Lutheran- Church</td>
<td>84-1000615</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. Lord of the Streets Episcopal Church</td>
<td>3401 FANNIN ST HOUSTON, TX 77004</td>
<td>501 (C) 3</td>
<td>23,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. Lord S Pantry of Downingtown</td>
<td>141 E LANCASTER AVE DOWNINGTOWN, PA 19335</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. Lords Place Inc</td>
<td>59-2240502</td>
<td>501 (C) 3</td>
<td>73,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] 
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
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<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>LORETO HOUSE</td>
<td>26-1395425</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>LORETO ACADEMY</td>
<td>74-1282698</td>
<td>501 (C) 3</td>
<td>15,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>LORTON COMMUNITY ACTION CENTER</td>
<td>51-0181451</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>LOS ALAMITOS EDUCATION FOUNDATION</td>
<td>95-3756247</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>LOS ALAMITOS YOUTH CENTER INC</td>
<td>95-2142369</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>LOS ALTOS COMMUNITY FOUNDATION</td>
<td>77-0273721</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>LOS ALTOS EDUCATIONAL FOUNDATION</td>
<td>94-2862793</td>
<td>501 (C) 3</td>
<td>36,050.</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>LOS ALTOS UNITED METHODIST CHURCH</td>
<td>94-6050395</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>LOS ANGELES ALLIANCE FOR A NEW ECONOMY</td>
<td>95-4459427</td>
<td>501 (C) 3</td>
<td>112,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>LOS ANGELES CENTER FOR LAW AND JUSTICE</td>
<td>95-2690540</td>
<td>501 (C) 3</td>
<td>5,104.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>LOS ANGELES COMMUNITY GARDEN COUNCIL</td>
<td>31-1734705</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>LOS ANGELES CONTEMPORARY ARCHIVE</td>
<td>81-3986670</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) LOS ANGELES COUNTY MUSEUM OF NATURAL HISTORY</td>
<td>95-6132185</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) LOS ANGELES JAZZ SOCIETY</td>
<td>95-3990859</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) LOS ANGELES LGBT CENTER</td>
<td>95-3567895</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) LOS ANGELES MISSION INC</td>
<td>95-3134049</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) LOS ANGELES OPERA COMPANY</td>
<td>95-2096402</td>
<td>501 (C) 3</td>
<td>24,337.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) LOS ANGELES PHILHARMONIC ASSOCIATION</td>
<td>95-1696734</td>
<td>501 (C) 3</td>
<td>131,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) LOS ANGELES PREGNANCY SERVICES INC</td>
<td>80-0182069</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) LOS ANGELES REGIONAL FOOD BANK</td>
<td>95-3135649</td>
<td>501 (C) 3</td>
<td>640,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) LOS ANGELES RESIDENTIAL COMMUNITY FOUNDATION</td>
<td>95-2134243</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) LOS ANGELES SPORTS &amp; ENTERTAINMENT COMMISSION</td>
<td>95-4541188</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) LOS ANGELES UNIFIED SCHOOLS DISTRICT</td>
<td>95-6001908</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) LOS ANGELES COMMUNITY FOUNDATION</td>
<td>83-1430888</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>2</td>
<td>(b) LOS BARRIOS UNIDOS COMMUNITY CLINIC INC</td>
<td>809 SINGLETON BLVD DALLAS, TX 75212</td>
<td>75-1378664</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>(c) LOS CABOS CHILDREN'S FOUNDATION</td>
<td>1585 THOMAS CENTER DR STE 101 SAINT PAUL, M</td>
<td>20-2882711</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
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<td>4</td>
<td>(d) LOS GATOS EDUCATION FOUNDATION</td>
<td>17010 ROBERTS RD LOS GATOS, CA 95032</td>
<td>94-2874929</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td>(e) LOST OUR HOME FHT FOUNDATION INC</td>
<td>2323 S HARDY DR TEMPE, AZ 85282</td>
<td>37-1589959</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>6</td>
<td>(f) LOST TREE CHAPEL INC</td>
<td>11149 TURTLE BEACH RD NORTH PALM BEACH, FL</td>
<td>59-1709556</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>7</td>
<td>(g) LOST TREE VILLAGE CHARITABLE FOUNDATION INC</td>
<td>8 CHURCH LN NORTH PALM BEACH, FL 33408</td>
<td>59-2104920</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>(h) LOTUS FINE ARTS PRODUCTIONS INC</td>
<td>310 RIVERSIDE DR NEW YORK, NY 10025</td>
<td>13-3530544</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>(i) LOUDON FOOD PANTRY</td>
<td>30 CHICHESTER RD UNIT D LOUDON, NH 3307</td>
<td>80-0203180</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>(j) LOUDOUN CITIZENS FOR SOCIAL JUSTICE INC</td>
<td>105 E MARKET ST LEESBURG, VA 20176</td>
<td>54-1282756</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<tr>
<td>11</td>
<td>(k) LOUDOUN HUNGER RELIEF</td>
<td>750 MILLER SE DR LEESBURG, VA 20175</td>
<td>54-1591635</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>(l) LOUISIANA COUNTY HISTORICAL SOCIETY</td>
<td>PO BOX 1172 LOUISA, VA 23093</td>
<td>23-7058587</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>13</td>
<td>(m) LOUISIANA BUCKET BRIGADE</td>
<td>3416 CANAL ST # B NEW ORLEANS, LA 70119</td>
<td>72-1488935</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................................................

3. Enter total number of other organizations listed in the line 1 table. .......................................................................................................................
SCHEDULE I
(Exempt Organizations
Governments, and Individuals in the United States)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

I Attach to Form 990.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>LOUISIANA TECH UNIVERSITY FOUNDATION INC</td>
<td>72-6022176</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>LOUISIANAVOICE</td>
<td>84-3171730</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>LOUISVILLE CHRISTIAN CHURCH</td>
<td>34-1371574</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>4</td>
<td>LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION 1</td>
<td>61-0969361</td>
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<td>N/A</td>
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<td>5</td>
<td>LOUISVILLE PRESBYTERIAN THEOLOGICAL SEMINAR</td>
<td>61-0444768</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
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<td>6</td>
<td>LOUISVILLE PUBLIC LIBRARY FOUNDATION</td>
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<td>7</td>
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<td>61-0444771</td>
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<td>8</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>9</td>
<td>LOVE INC OF COLUMBIA</td>
<td>20-8801850</td>
<td>501 (c) 3</td>
<td>15,500.</td>
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<td>10</td>
<td>LOVE INC OF SOUTH SAN JOSE</td>
<td>77-0229924</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>11</td>
<td>LOVE INC OF WESTERN SUBURBS CHICAGO</td>
<td>36-3377798</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>LOVE JUSTICE INTERNATIONAL</td>
<td>71-0982808</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>LOVE-CRAFT ATHENS INC</td>
<td>82-3410932</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVELAND FOUNDATION INC</td>
<td>83-3421375</td>
<td>501 (C) 3</td>
<td>81,060.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVELAND INTER FAITH EFFORT</td>
<td>31-1710803</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>LOVENMARK FOUNDATION INC</td>
<td>81-5274973</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVERS OF THE HOLY CROSS SISTERS</td>
<td>14700 VAN NESS AVE GARDENA, CA 90249</td>
<td>23-2274195</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVETT SCHOOL</td>
<td>4075 PACES FERRY RD NW ATLANTA, GA 30327</td>
<td>58-0619038</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVIN SPOONFULS INC</td>
<td>1304 COMMONWEALTH AVE ALLSTON, MA 2134</td>
<td>27-1810597</td>
<td>501 (C) 3</td>
<td>7,580.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVING ALL NATIONS INC</td>
<td>150 NASSAU ST APT 4G NEW YORK, NY 10038</td>
<td>81-5471924</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOVING WORK FOUNDATION</td>
<td>1212 CAFERTON WAY CHARLESTON, SC 29412</td>
<td>46-3885244</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOW INCOME HOUSING INSTITUTE</td>
<td>1253 S JACKSON ST STE A SEATTLE, WA 98144</td>
<td>94-3155150</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOWCOUNTRY FOOD BANK INC</td>
<td>950 17TH ST DENVER, CO 80202</td>
<td>57-0751835</td>
<td>501 (C) 3</td>
<td>130,757.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LOWCOUNTRY ORPHAN RELIEF</td>
<td>PO BOX 70185 CHARLESTON, SC 29415</td>
<td>26-1108081</td>
<td>501 (C) 3</td>
<td>16,757.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>LOWELL OBSERVATORY</td>
<td>86-0098918</td>
<td>501 (C) 3</td>
<td>443,421.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>LOWER BOTTOM PLAYAZ INC</td>
<td>45-3745370</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>LOWER CAPE OUTREACH COUNCIL INC</td>
<td>04-2864255</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>LOWER EAST SIDE PRINTSHOP INC</td>
<td>13-2812419</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>LOWER EAST SIDE TENEMENT MUSEUM</td>
<td>13-3475390</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>LOWER MANHATTAN COMMUNITY CHURCH</td>
<td>80-0528841</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
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<td>23-7348782</td>
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<td>8</td>
<td>LOWER MERION SYNAGOGUE</td>
<td>23-2615920</td>
<td>501 (C) 3</td>
<td>20,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>LOYOLA ACADEMY</td>
<td>36-2367981</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10</td>
<td>LOYOLA ACADEMY OF ST LOUIS</td>
<td>43-1859076</td>
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<td>N/A</td>
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<tr>
<td>11</td>
<td>LOYOLA EARLY LEARNING CENTER INC</td>
<td>81-3725495</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>LOYOLA EDUCATIONAL CORPORATION OF SHREVEPOR</td>
<td>72-0679392</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table: .........................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization: **VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number:** 23-2888152

## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [  ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>52-1142152</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
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<td>52-0704627</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>LOYOLA HIGH SCHOOL OF LOS ANGELES</td>
<td>95-1664109</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>LOYOLA MARYMOUNT UNIVERSITY</td>
<td>95-1643334</td>
<td>501 (C) 3</td>
<td>27,120.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
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<td>13-1624073</td>
<td>501 (C) 3</td>
<td>38,000.</td>
<td>FMV</td>
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<tr>
<td>6</td>
<td>LOYOLA UNIVERSITY</td>
<td>72-0408946</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>LOYOLA UNIVERSITY MARYLAND INC</td>
<td>52-0591623</td>
<td>501 (C) 3</td>
<td>18,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>LOYOLA UNIVERSITY OF CHICAGO</td>
<td>36-1408475</td>
<td>501 (C) 3</td>
<td>115,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>LUBAVITCH CHABAD OF EVANSTON, INC</td>
<td>36-39912238</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>LUBAVITCH OF ABINGTON INC</td>
<td>71-0994193</td>
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<td>7,160.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>LUBAVITCH OF CAMBRIDGE INC</td>
<td>04-3394990</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>LUBAVITCH ON THE PALISADES</td>
<td>04-3394990</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>141,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUBAVITCH-CHABAD JEWISH CENTER OF GAINESVILE</td>
<td>59-3652042</td>
<td>501 (C) 3</td>
<td>17,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>LUBBOCK AREA UNITED WAY INC</td>
<td>75-0961812</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUCAS COUNTY HEALTH CENTER</td>
<td>42-6039708</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUCEDALE FIRST UNITED METHODIST CHURCH</td>
<td>64-0651040</td>
<td>501 (C) 3</td>
<td>5,901.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>LUCILE PACKARD FOUNDATION FOR CHILDRENS HEA</td>
<td>77-0440090</td>
<td>501 (C) 3</td>
<td>330,817.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>LUCILE SALTER PACKARD CHILDRENS HOSPITAL AT</td>
<td>77-0003859</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUCKY ORPHANS HORSE RESCUE</td>
<td>26-2729197</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUDWIG VON MISES INSTITUTE FOR AUSTRIAN ECO</td>
<td>52-1263436</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUIS PALAU ASSOCIATION</td>
<td>93-0713827</td>
<td>501 (C) 3</td>
<td>21,025.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUEK COMMISSION INC</td>
<td>20-8635797</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUMA ARTS INITIATIVE INC</td>
<td>83-0967180</td>
<td>501 (C) 3</td>
<td>8,889.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>LUMEN CRISTI INSTITUTE</td>
<td>1220 E 58TH ST CHICAGO, IL 60637</td>
<td>6-191992</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUMIND ISD FOUNDATION</td>
<td>20 W ALL RD STE 200 BURLINGTON, MA 1803</td>
<td>6-1483975</td>
<td>501 (C) 3</td>
<td>401,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>LUNCH BREAK</td>
<td>22-2440028</td>
<td>501 (C) 3</td>
<td>63,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUND FAMILY CENTER INC</td>
<td>700 COLLEGE DR DECORAH, IA 52101</td>
<td>42-0680466</td>
<td>501 (C) 3</td>
<td>22,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUNG CANCER RESEARCH FOUNDATION</td>
<td>1226 VERMONT AVE NW WASHINGTON, DC 20005</td>
<td>53-0222329</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>LUTHER SEMINARY</td>
<td>2481 COMO AVE SAINT PAUL, MN 55108</td>
<td>41-1425961</td>
<td>501 (C) 3</td>
<td>8,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN CHURCH MISSOURI SYNGOD</td>
<td>1333 S KIRKWOOD RD SAINT LOUIS, MO 63122</td>
<td>43-0658188</td>
<td>501 (C) 3</td>
<td>29,749.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF GODS LOVE</td>
<td>791 NEWTOWN YARDLEY RD NEWTOWN, PA 18940</td>
<td>23-2170696</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN CHURCH OF HOPE</td>
<td>925 JORDAN CREEK PKW WEST DES MOINES, IA 5</td>
<td>42-1368046</td>
<td>501 (C) 3</td>
<td>43,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN CHURCH OF ST ANDREW</td>
<td>15300 NEW HAMPSHIRE AVE SILVER SPRING, MD 2</td>
<td>52-0747877</td>
<td>501 (C) 3</td>
<td>12,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN CHURCH OF ST. ANDREW - FRANKLIN, T</td>
<td>908 MURFREESSBORO ROAD FRANKLIN, TN 37064</td>
<td>62-0961320</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE ASCENSION</td>
<td>460 SUNSET RIDGE RD NORTHFIELD, IL 60093</td>
<td>36-2519177</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE ATONEMENT</td>
<td>909 E MAIN ST BARRINGTON, IL 60010</td>
<td>36-6424125</td>
<td>501 (C) 3</td>
<td>6,333.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE GOOD SHEPHERD</td>
<td>1108 24TH ST W BILLINGS, MT 59102</td>
<td>81-0265201</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE GOOD SHEPHERD</td>
<td>1601 NORTH ST SE OLYMPIA, WA 98501</td>
<td>91-0792536</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE REDEEMER</td>
<td>60 FOREST PARK RD WOBURN, MA 1801</td>
<td>22-2508452</td>
<td>501 (C) 3</td>
<td>8,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN CHURCH OF THE RESURRECTION</td>
<td>4814 PAPER MILL RD SE MARIETTA, GA 30067</td>
<td>58-1352477</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................  
   - Yes ☐ - No ☒

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>LUTHERAN COALITION FOR HABITAT INC 2922 SANDY PLAINS RD MARIETTA, GA 30066</td>
<td>26-4741170</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>LUTHERAN FAMILY AND CHILDREN'S SERVICES OF M 9666 OLIVE BLVD SAINT LOUIS, MO 63132</td>
<td>43-0652650</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3.</td>
<td>LUTHERAN FAMILY SERVICES IN THE CAROLINAS I PO BOX 2369 SALISBURY, NC 28145</td>
<td>56-1286323</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>LUTHERAN HIGH SCHOOL ASSOCIATION OF ORANGE 2222 N SANTIAGO BLVD ORANGE, CA 92867</td>
<td>95-6122865</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>LUTHERAN HIGH SCHOOL ASSOCIATION OF ST LOUIS 5401 LUCAS AND HUNT RD # 103 SAINT LOUIS, MO 63132</td>
<td>43-0662478</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>LUTHERAN HIGH SOUTH - ORANGE COUNTY CREAM L 12500 SAND CANYON AVE IRVINE, CA 92618</td>
<td>55-0909201</td>
<td>501 (C) 3</td>
<td>550,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>LUTHERAN HOME ASSOCIATION FOUNDATION 337 S MERIDIAN ST BELLE PLAINE, MN 56011</td>
<td>36-3449735</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>LUTHERAN HOMES OF OCONOMOWOC INC 1305 W WISCONSIN AVE OCONOMOWOC, WI 53066</td>
<td>39-0845016</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9.</td>
<td>LUTHERAN IMMIGRATION AND REFUGEE SERVICE 700 LIGHT ST BALTIMORE, MD 21230</td>
<td>13-2574854</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>LUTHERAN OUTDOOR MINISTRIES OF FLORIDA INC 264 VAUSE LAKE RD HAWTHORNE, FL 32640</td>
<td>65-0193099</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>LUTHERAN PUBLIC RADIO INC 1600 GOFVIEW DR STR 130 COLLINSVILLE, IL 6</td>
<td>26-2290343</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12.</td>
<td>LUTHERAN RETREATS CAMPS AND CONFERENCES 23838 KITTRIDGE ST WEST HILLS, CA 91307</td>
<td>33-0256537</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table. .................................  

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>LUTHERAN SCHOOL OF OUR SAVIOR</td>
<td>5825 BOLLINGER RD CUPERTINO, CA 95014</td>
<td>94-134630</td>
<td>501 (C) 3</td>
<td>14,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN SOCIAL SERVICE OF MINNESOTA</td>
<td>2485 COMO AVE SAINT PAUL, MN 55108</td>
<td>41-0872993</td>
<td>501 (C) 3</td>
<td>19,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN SOCIAL SERVICE OF THE SOUTH INC</td>
<td>8305 CROSS PARK DR AUSTIN, TX 78754</td>
<td>74-1109745</td>
<td>501 (C) 3</td>
<td>33,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN SOCIAL SERVICES OF CENTRAL OHIO IN</td>
<td>500 W WILSON BRIDGE RD STE 245 WORTHINGTON,</td>
<td>31-4412586</td>
<td>501 (C) 3</td>
<td>73,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN SOCIAL SERVICES OF ILLINOIS</td>
<td>1001 E TOUBY AVE DES PLAINES, IL 60018</td>
<td>36-2584799</td>
<td>501 (C) 3</td>
<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>LUTHERAN SOCIAL SERVICES OF NEW YORK INC</td>
<td>475 RIVERSIDE DR NEW YORK, NY 10115</td>
<td>45-2799940</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>LUTHERAN SOCIAL SERVICES OF SOUTH DAKOTA</td>
<td>705 E 41ST ST STE 200 SIOUX FALLS, SD 57105</td>
<td>46-0224731</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN SOCIAL SERVICES OF THE SOUTHWEST</td>
<td>2502 E UNIVERSITY DR STE 125 PHOENIX, AZ 85</td>
<td>86-0252302</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN UNIVERSITY ASSOCIATION</td>
<td>1700 CHAPEL DR VALPARAISO, IN 46383</td>
<td>35-0868125</td>
<td>501 (C) 3</td>
<td>1,015,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERAN WORLD RELIEF INC</td>
<td>700 LIGHT ST BALTIMORE, MD 21230</td>
<td>13-2574963</td>
<td>501 (C) 3</td>
<td>304,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>LUTHERLYN</td>
<td>PO BOX 355 PROSPECT, PA 16052</td>
<td>25-0984609</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
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<tr>
<td>LWA COMMUNITY ALLIANCE INC</td>
<td>PO BOX 6088 NASHVILLE, TN 37206</td>
<td>26-1303951</td>
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<td>10,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### Part II

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>LYNBLOMSTEN FOUNDATION</td>
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3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td></td>
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<tr>
<td>LYNN UNIVERSITY INC</td>
<td>3601 N MILITARY TRL BOCA RATON, FL 33431</td>
<td>59-1023117</td>
<td>501 (C) 3</td>
<td>48,500.</td>
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<tr>
<td>LYRIC FEST</td>
<td>312 CARPENTER LN FL 3 PHILADELPHIA, PA 1911</td>
<td>83-0375561</td>
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<td>FMV</td>
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<tr>
<td>LYRIC OPERA OF CHICAGO</td>
<td>20 N WACKER DR STE 860 CHICAGO, IL 60606</td>
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<td>107,500.</td>
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<tr>
<td>LYTLE ANIMAL ALLIES</td>
<td>PO BOX 874 LYTLE, TX 78052</td>
<td>81-5410832</td>
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<td>M K B ALLIANCE FOR EDUCATOR DIVERSITY INC</td>
<td>7500 RIALTO BLVD STE 270 AUSTIN, TX 78735</td>
<td>81-4012999</td>
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<td>1,100,000.</td>
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<td>M S D OF LAWRENCE TOWNSHIP FOUNDATION INC</td>
<td>6501 SUNNYSIDE RD INDIANAPOLIS, IN 46236</td>
<td>35-1573468</td>
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<td>7,000.</td>
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<td>M Y KEREN HASHLUCHIM INC</td>
<td>398 CROWN ST BROOKLYN, NY 11225</td>
<td>81-0583641</td>
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<td>5,773,955.</td>
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<td>M.S.A.D. #17</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>M4K RICHMOND INC</td>
<td>1201 SYCAMORE SQUARE DR UNIT 882 MIDLOTHIAN</td>
<td>27-1881035</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>MAB COMMUNITY SERVICES INC</td>
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<td>04-2109859</td>
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<td>MAC ANGELS FOUNDATION INC</td>
<td>2005 PALMER AVE # 291 LARCHMONT, NY 10538</td>
<td>22-3769685</td>
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<tr>
<td>MACALESTER COLLEGE</td>
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<td>52,775.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>3</td>
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<td>N/A</td>
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<td>4</td>
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<td>5</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>FMV</td>
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<td>23-1352343</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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**Part I**
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- Yes
- No

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**Part II**
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<td>MADONNA MISSION</td>
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<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 448 BUFFALO, NY 14215</td>
<td>16-1433964</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MADRE INC</td>
<td>13-3280194</td>
<td>501 (c) 3</td>
<td>29,100.</td>
<td>FMV</td>
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<td>MAFAIR UNITED METHODIST CHURCH</td>
<td>62-6016276</td>
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<td>MAGDALENA MINISTRIES INC</td>
<td>80-0251526</td>
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<td>7,000.</td>
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<td>46-1874309</td>
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<td>MAGEN AM USA INC</td>
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<td>501 (c) 3</td>
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<td>MAGIC CITY HARVEST</td>
<td>11-1666839</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<tr>
<td>MAGIC THEATRE INC</td>
<td>58-2060122</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MAGNOLIA MONTESORI ACADEMY INC</td>
<td>94-1733420</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>MAGNOLIA PRESBYTERIAN CHURCH</td>
<td>46-0872502</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FMV</td>
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</tbody>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

Enter total number of other organizations listed in the line 1 table: ...........................................................................................................

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes ☑️ No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAGNUM CULTURAL FOUNDATION 59 E 4TH ST STE 7W NEW YORK, NY 10003 45-0573269 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAHAIWE PERFORMING ARTS CENTER INC 244 MAIN ST STE 3 GREAT BARRINGTON, MA 1230 57-1140453 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAHALAS HOPE INC N4590 US HIGHWAY 45 EDEN, WI 53019 84-1680693 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAHARISHI GLOBAL ADMINISTRATION THROUGH NAT PO BOX 1140 LIVINGSTON MANOR, NY 12758 95-2485909 501 (C) 3 85,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAHARISHI INTERNATIONAL UNIVERSITY 1000 N 4TH ST FAIRFIELD, IA 52557 42-1315493 501 (C) 3 163,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MAHARISHI PURUSHU PROGRAM 1000 PURUSHU PL APT 108 ROMNEY, WV 26757 56-1824160 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MAIDEN FACTOR FOUNDATION INC 154 W 14TH ST NEW YORK, NY 10011 84-2562795 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAIMONIDES MEDICAL CENTER 4802 10TH AVE BROOKLYN, NY 11219 11-1635081 501 (C) 3 502,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAIMONIDES-SHALOM ACADEMY INC 5300 SW 40TH AVE FORT LAUDERDALE, FL 33314 65-0213879 501 (C) 3 31,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MAIN LINE ART CENTER 746 PANMURE RD HAVERFORD, PA 19041 23-1429811 501 (C) 3 50,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MAIN LINE HOSPITALS INC 3803 WEST CHESTER PIKE STE 250 NEWTOWN SQUA 23-1352160 501 (C) 3 49,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MAIN LINE REFORM TEMPLE 410 MONTGOMERY AVE WYNNEWOOD, PA 19096 23-1497772 501 (C) 3 37,650. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>MAIN LINE SCHOOL NIGHT ASSOCIATION</td>
<td>23-6050469</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MAIN LINE UNITARIAN CHURCH</td>
<td>23-6050841</td>
<td>501 (C) 3</td>
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<td>MAIN STREET PROJECT</td>
<td>20-1798275</td>
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<td>180,000. FMV</td>
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<td>MAIN STREET UNITED METHODIST CHURCH</td>
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<td>MAININA FOUNDATION</td>
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<td>6,000. FMV</td>
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<td>MAINE CENTER FOR PUBLIC INTEREST REPORTING</td>
<td>27-2623867</td>
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<td>MAINE CHAPETER OF THE AMERICAN CHESTNUT FOUN</td>
<td>01-0530623</td>
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<td>10,000. FMV</td>
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<td>MAINE COAST HERITAGE TRUST</td>
<td>23-7099105</td>
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<td>MAINE COMMUNITY FOUNDATION INC</td>
<td>01-0391479</td>
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<td>107,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) MAINE JUSTICE FOUNDATION 40 WATER ST HALLOWELL, ME 4347</td>
<td>22-2559133</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>(2) MAINE MARITIME ACADEMY 1 PLEASANT ST CASTINE, ME 4421</td>
<td>01-6000724</td>
<td>501 (C) 3</td>
<td>28,949.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MAINE PUBLIC BROADCASTING CORPORATION 1450 LISBON ST LEWISTON, ME 4420</td>
<td>22-3171529</td>
<td>501 (C) 3</td>
<td>35,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) MAINE SEACOAST MISSION 6 OLD FIREHOUSE LANE NORTHEAST HARBOR, ME 4</td>
<td>01-0216837</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) MAINE HEALTH 22 BRAMHALL ST PORTLAND, ME 4102</td>
<td>01-0238552</td>
<td>501 (C) 3</td>
<td>115,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) MAINSTAY INC PO BOX 238 ROCK HALL, MD 21661</td>
<td>52-2341260</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) MAITRI PO BOX 697 SANTA CLARA, CA 95052</td>
<td>94-3132087</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) MAJI SAFI GROUP 465 MARINE ST BOULDER, CO 80302</td>
<td>46-1712301</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) MAKE- A- WISH FOUNDATION OF AMERICA 1702 E HIGHLAND AVE STE 400 PHOENIX, AZ 850</td>
<td>86-0481941</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) MAKE A WISH FOUNDATION OF GREATER BAY AREA 1333 BROADWAY STE 200 OAKLAND, CA 94612</td>
<td>94-2958481</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>(11) MAKE A WISH FOUNDATION OF NEW JERSEY 1384 PERRINEVILLE RD MONROE TOWNSHIP, NJ 88</td>
<td>22-2488495</td>
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<td>21,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) MAKE A WISH FOUNDATION OF OREGON INC 5901 S MACADAM AVE STE 200 PORTLAND, OR 972</td>
<td>82-0385049</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
**SCHEDULE I**  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  

Attach to Form 990.  

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Department of the Treasury  
Internal Revenue Service  

Name of the organization  

VANGUARD CHARITABLE ENDOWMENT PROGRAM  

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<tbody>
<tr>
<td>(1)</td>
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<td>FMV</td>
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<td>(2)</td>
<td>MAKE A WISH FOUNDATION OF SOUTHERN FLORIDA</td>
<td>59-2620322</td>
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<td>7,000.</td>
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<td>(3)</td>
<td>MAKE IT MOVEMENT INC</td>
<td>85-3470837</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>MAKE THE ROAD NEW YORK</td>
<td>11-3344389</td>
<td>501 (C) 3</td>
<td>38,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>MAKE-A-WISH FOUNDATION OF ALASKA &amp; WASHINGTON</td>
<td>91-1329433</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>MAKE-A-WISH FOUNDATION OF COLORADO INC</td>
<td>74-2273004</td>
<td>501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7)</td>
<td>MAKE-A-WISH FOUNDATION OF CT INC</td>
<td>22-2710919</td>
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<td>23,400.</td>
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<td>(8)</td>
<td>MAKE-A-WISH FOUNDATION OF ILLINOIS INC</td>
<td>36-3422138</td>
<td>501 (C) 3</td>
<td>116,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9)</td>
<td>MAKE-A-WISH FOUNDATION OF MASSACHUSETTS AND</td>
<td>22-2867371</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td>MAKE-A-WISH FOUNDATION OF METRO NEW YORK AN</td>
<td>11-2645641</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td>MAKE-A-WISH FOUNDATION OF MICHIGAN</td>
<td>38-2505812</td>
<td>501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td>MAKE-A-WISH FOUNDATION OF NORTH TEXAS</td>
<td>16803 DALLAS PKWY STE 100 ADDISON, TX 75001</td>
<td>75-1889666</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.  

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

Schedule I (Form 990) 2020
## Part I — General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X] No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II — Grants and Other Assistance to Domestic Organizations and Domestic Governments

### 1. Name and address of organization or government

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MAKE-A-WISH FOUNDATION OF OHIO KENTUCKY AND</td>
<td>2545 FARMERS DR STE 300 COLUMBUS, OH 43235</td>
<td>34-1471131</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
</tr>
<tr>
<td>(2) MAKE-A-WISH FOUNDATION OF SC INC</td>
<td>225 S PLEASANTBURG DR STE C17 GREENVILLE, SC</td>
<td>57-0786119</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
</tr>
<tr>
<td>(3) MAKE-A-WISH FOUNDATION OF THE HUDSON VALLEY</td>
<td>832 S BROADWAY Tarrytown, NY 10591</td>
<td>13-3344306</td>
<td>501 (C) 3</td>
<td>38,243.</td>
<td>FMV</td>
</tr>
<tr>
<td>(4) MAKE-A-WISH FOUNDATION OF THE TEXAS GULF CO</td>
<td>12625 SOUTHWEST FWY STAFFORD, TX 77477</td>
<td>76-0116615</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
</tr>
<tr>
<td>(5) MAKE-A-WISH FOUNDATION OF WISCONSIN INC</td>
<td>11020 W PLANK CT STE 200 MILWAUKEE, WI 53226</td>
<td>39-1543541</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
</tr>
<tr>
<td>(6) MAKING HEADWAY FOUNDATION INC</td>
<td>115 KING ST CHAPPQUA, NY 10514</td>
<td>13-3906297</td>
<td>501 (C) 3</td>
<td>18,400.</td>
<td>FMV</td>
</tr>
<tr>
<td>(7) MALACHI HOUSE INC</td>
<td>2810 CLINTON AVE CLEVELAND, OH 44113</td>
<td>34-1598707</td>
<td>501 (C) 3</td>
<td>10,951.</td>
<td>FMV</td>
</tr>
<tr>
<td>(8) MALARIA CONSORTIUM</td>
<td>8024 UPPER LAKE DR RALEIGH, NC 27615</td>
<td>98-0627052</td>
<td>501 (C) 3</td>
<td>1,105,047.</td>
<td>FMV</td>
</tr>
<tr>
<td>(9) MALAWI CHILDREN'S VILLAGE FOUNDATION INC</td>
<td>PO BOX 240547 ANCHORAGE, AK 99524</td>
<td>16-1526805</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
</tr>
<tr>
<td>(10) MALDEN CATHOLIC HIGH SCHOOL</td>
<td>99 CRYSTAL ST MALDEN, MA 2148</td>
<td>04-2339383</td>
<td>501 (C) 3</td>
<td>504,000.</td>
<td>FMV</td>
</tr>
<tr>
<td>(11) MALE CONTRACEPTION INITIATIVE</td>
<td>811 9TH ST STE 120 # 255 DURHAM, NC 27705</td>
<td>47-1124856</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
</tr>
<tr>
<td>(12) MALTA HOUSE INC</td>
<td>5 PROWITT ST NORWALK, CT 06855</td>
<td>06-1604710</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
</tr>
</tbody>
</table>

### 2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

### 3. Enter total number of other organizations listed in the line 1 table

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

---

**Schedule I (Form 990) 2020**
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.

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

### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MALTZ JUPITER THEATRE INC</td>
<td>65-0985652</td>
<td>501 (C) 3</td>
<td>76,101.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) MALVERN PREPARATORY SCHOOL</td>
<td>23-1352658</td>
<td>501 (C) 3</td>
<td>104,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MALVERN RETREAT HOUSE</td>
<td>23-1365371</td>
<td>501 (C) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) MAMARONECK-LARCHMONT STUDENT AID FUND INC</td>
<td>23-7378894</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) MAMAS KITCHEN</td>
<td>33-0434246</td>
<td>501 (C) 3</td>
<td>206,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) MAMATOTO VILLAGE INC</td>
<td>46-2564702</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) MAMMOTH LAKES FOUNDATION</td>
<td>77-0245395</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) MAMMOTH MOUNTAIN COMMUNITY FOUNDATION INC</td>
<td>26-4368015</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) MAN IN THE MIRROR INC</td>
<td>59-3178628</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) MANADA CONSERVANCY</td>
<td>25-1784517</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11) MANAGEMENT LEADERSHIP FOR TOMORROW</td>
<td>52-1795164</td>
<td>501 (C) 3</td>
<td>80,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) MANAGERS OF THE DIOCESAN MISSIONARY AND CHURCH</td>
<td>13-1623985</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)  
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
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**Part I**  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANASOTA SOLVE INC 1335 MANATEE AVE W BRADENTON, FL 34205 59-1683408 501 (C) 3 122,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANASSAS PRESBYTERIAN CHURCH 8201 ASHTON AVE MANASSAS, VA 20109 56-0948525 501 (C) 3 11,700. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANAV SADHNA 1916 PASTORAL LN HANOVER PARK, IL 60133 36-3954234 501 (C) 3 9,900. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANCHESTER CHURCH OF THE BRETHREN PO BOX 349 N MANCHESTER, IN 46962 35-0923981 501 (C) 3 10,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANCHESTER RESCUE SQUAD INC PO BOX 26 MANCHESTER CENTER, VT 5255 03-6011503 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANCHESTER UNITED METHODIST CHURCH 129 WOODS MILL RD MANCHESTER, MO 63011 43-0889609 501 (C) 3 22,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MANCHESTER UNIVERSITY INC 604 E COLLEGE AVE NORTH MANCHESTER, IN 4696 35-0868127 501 (C) 3 7,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>MANCHESTER-BIDWELL CORPORATION 1815 METROPOLITAN ST PITTSBURGH, PA 15233 25-1842945 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>HANDELA PARTNERS 1344 7TH ST OAKLAND, CA 94607 11-3754129 501 (C) 3 150,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MANGALA SHRI BHUTI PO BOX 4088 BOULDER, CO 80306 84-1217062 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MANHATTAN BEACH EDUCATION FOUNDATION 325 S PECK AVE MANHATTAN BEACH, CA 90266 95-3881166 501 (C) 3 36,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MANHATTAN CLASS COMPANY INC 511 W 52ND ST NEW YORK, NY 10019 13-3391844 501 (C) 3 10,040. FMV N/A FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [x]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MANHATTAN COLLEGE 4513 MANHATTAN COLLEGE PKWY BRONX, NY 10471</td>
<td>13-1740468</td>
<td>501 (C) 3</td>
<td>226,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(2) MANHATTAN CORNERSTONE PRESBYTERIAN CHURCH 170TH E 87TH ST STE E4H NEW YORK, NY 10128</td>
<td>72-1615773</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>(3) MANHATTAN COUNTRY SCHOOL INC 150 W 85TH ST NEW YORK, NY 10024</td>
<td>13-2546971</td>
<td>501 (C) 3</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) MANHATTAN INSTITUTE FOR POLICY RESEARCH INC 52 VANDERBILT AVE NEW YORK, NY 10017</td>
<td>13-2912529</td>
<td>501 (C) 3</td>
<td>492,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) MANHATTAN JEWISH EXPERIENCE SYNAGOGUE 131 W 86TH ST NEW YORK, NY 10024</td>
<td>13-4010099</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>(6) MANHATTAN THEATRE CLUB INC 311 W 43RD ST 8TH FLOOR NEW YORK, NY 10036</td>
<td>23-7086643</td>
<td>501 (C) 3</td>
<td>45,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(7) MANIFESTWORKS 823 SEWARD ST LOS ANGELES, CA 90038</td>
<td>47-5485332</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) MANISTEE COUNTY COMMUNITY 395 3RD ST MANISTEE, MI 49660</td>
<td>38-2741723</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(9) MANN CENTER FOR THE PERFORMING ARTS 123 S BROAD ST STE 815 PHILADELPHIA, PA 191</td>
<td>23-1473884</td>
<td>501 (C) 3</td>
<td>71,033.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) MANNA CONEJO VALLEY FOOD DISTRIBUTION CENTE PO BOX 1114 THOUSAND OAKS, CA 91358</td>
<td>95-3413415</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) MANNA FOOD BANK INC 627 SWANNADE RIVER RD ASHEVILLE, NC 28805</td>
<td>58-1514800</td>
<td>501 (C) 3</td>
<td>123,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) MANNA FOOD BANK INCORPORATED 3030 N E ST PENSACOLA, FL 32501</td>
<td>59-2181031</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

3. Enter total number of other organizations listed in the line 1 table:

JSA 0E1288 1.000

SCHEDULE I (Form 990) 2020

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   - [ ] Yes
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | MANNA FOOD CENTER INC  
9311 GAITHER RD GAITHERSBURG, MD 20877 | 52-1289203 | 501 (C) 3 | 135,950. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | MANNA MEAL INC  
1105 QUARRIER ST CHARLESTON, WV 25301 | 31-0977670 | 501 (C) 3 | 23,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | MANNA ON MAIN STREET  
606 EAST MAIN STREET LANSDALE, PA 19446 | 23-2287252 | 501 (C) 3 | 20,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | MANO A MANO INTERNATIONAL PARTNERS  
925 PIERCE BUTLER RTE SAINT PAUL, MN 55104 | 41-1796971 | 501 (C) 3 | 51,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | MANOR CLUB  
1023 ESPLANADE PELHAM, NY 10803 | 13-1719365 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | MANSIO MONTESSORI OF GENEVA LTD  
102 HOWARD ST GENEVA, IL 60134 | 36-3079526 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | MANY HANDS INC  
PO BOX 15048 CHEVY CHASE, MD 20825 | 51-0486987 | 501 (C) 3 | 6,900. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | MANY HOPE INC  
67 TROTTING PARK RD TEATICKET, MA 2536 | 39-2067502 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | MANEANO DAY SCHOOL  
1801 CENTRAL AVE NW ALBUQUERQUE, NM 87104 | 85-0127993 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | MAP INTERNATIONAL  
700 GLOUCESTER ST UNIT 302 BRUNSWICK, GA 31 | 36-2586390 | 501 (C) 3 | 53,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | MAPLE SPRINGS UNITED METHODIST CHURCH  
2569 REYNOLDA ROAD WINSTON-SALEM, NC 27106 | 20-5665302 | 501 (C) 3 | 16,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | MAPLIGHT  
2223 SHATTUCK AVE BERKELEY, CA 94704 | 33-1094233 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MARANATHA BIBLE AND MISSIONARY CONFERENCE I</td>
<td>4759 LAKE HARBOR RD NORTON SHORES, MI 49441</td>
<td>38-1558540</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>MARANATHA CHAPEL</td>
<td>10752 COASTWOOD RD SAN DIEGO, CA 92127</td>
<td>33-0070042</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MARANATHA EVANGELICAL FREE CHURCH</td>
<td>3340 S MAIN ST RICE LAKE, WI 54668</td>
<td>39-6171173</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MARANATHA VOICE MINISTRIES</td>
<td>926 E POINT DR Schaumburg, IL 60193</td>
<td>36-4318865</td>
<td>501 (C) 3</td>
<td>24,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>MARANATHA VOLUNTEERS INTERNATIONAL INC</td>
<td>990 RESERVE DR STE 100 ROSEVILLE, CA 95678</td>
<td>38-1945104</td>
<td>501 (C) 3</td>
<td>16,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>MARATHON COUNTY YOUTH HOCKEY INC</td>
<td>PO BOX 176 WAUSAU, WI 54402</td>
<td>39-1395615</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>MARBLEHEAD FOOD PANTRY INC</td>
<td>80 ATLANTIC AVE MARBLEHEAD, MA 1945</td>
<td>04-3276552</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>MARC LUSTGARTEN PANCREATIC CANCER FOUNDATION</td>
<td>415 CROSSWAYS PARK DR STE D WOODBURY, NY 11</td>
<td>31-1611837</td>
<td>501 (C) 3</td>
<td>164,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MARCH FOR OUR LIVES FOUNDATION</td>
<td>PO BOX 8929 CORAL SPRINGS, FL 33075</td>
<td>83-0885411</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>MARCH OF DIMES INC</td>
<td>1550 CRYSTAL DR STE 1300 ARLINGTON, VA 2220</td>
<td>13-1846366</td>
<td>501 (C) 3</td>
<td>126,651.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>MARCH ON MARYLAND INC</td>
<td>820 RITCHIE HWY STE 250 SEVERNA PARK, MD 21</td>
<td>82-0958114</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>MARCUM FOUNDATION INC</td>
<td>1 SE 3RD AVE STE 1100 MIAMI, FL 33131</td>
<td>20-3081932</td>
<td>501 (C) 3</td>
<td>23,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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3. Enter total number of other organizations listed in the line 1 table.
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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   - No

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### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>(1) MARCUS A FOSTER EDUCATIONAL INSTITUTE</td>
<td>23-7357906</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2000 FRANKLIN ST OAKLAND, CA 94612</td>
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<td>(2) MARCUS JEWISH COMMUNITY CENTER OF ATLANTA I</td>
<td>58-0566126</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5342 TILLY MILL RD ATLANTA, GA 30338</td>
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<td>(3) MARET SCHOOL INC</td>
<td>43-0211355</td>
<td>501 (c) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3000 CATHEDRAL AVE NW WASHINGTON, DC 20008</td>
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<td>(4) MARGARET WOODBURY STRONG MUSEUM</td>
<td>16-0954168</td>
<td>501 (c) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1 MANHATTAN SQUARE DR ROCHESTER, NY 14607</td>
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<td>(5) MARIAN CATHOLIC HIGH SCHOOL</td>
<td>36-2387143</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>700 ASHLAND AVE CHICAGO HEIGHTS, IL 60411</td>
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<td>(6) MARIAN CENTRAL CATHOLIC HIGH SCHOOL</td>
<td>36-2426418</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1001 MCHENARY AVE WOODSTOCK, IL 60098</td>
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<tr>
<td>(7) MARIAN FATHERS OF THE IMMACULATE CONCEPTION</td>
<td>20-8599030</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 PROSPECT HILL RD STOCKBRIDGE, MA 1262</td>
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<tr>
<td>(8) MARIAN HIGH SCHOOL</td>
<td>47-0524910</td>
<td>501 (c) 3</td>
<td>8,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ADVANCEMENT OFFICE 7400 MILITARY AVENUE OMA</td>
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<td>(9) MARIAN MIDDLE SCHOOL</td>
<td>43-1873629</td>
<td>501 (c) 3</td>
<td>37,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4130 WYOMING ST SAINT LOUIS, MO 63116</td>
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<td>(10) MARIAN UNIVERSITY</td>
<td>35-0868175</td>
<td>501 (c) 3</td>
<td>30,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3200 COLD SPRING RD INDIANAPOLIS, IN 46222</td>
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<tr>
<td>(11) MARICOPA COUNTY HISTORICAL SOCIETY</td>
<td>86-0204201</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>21 N FRONTIER ST WICKENBURG, AZ 85390</td>
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<tr>
<td>(12) MARIBONDT COMMUNITY CHURCH</td>
<td>31-0555848</td>
<td>501 (c) 3</td>
<td>114,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3908 PLAINVILLE RD CINCINNATI, OH 45227</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. MARIETTA COLLEGE</td>
<td>31-4379584</td>
<td>501 (C) 3</td>
<td>1,440,836.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. MARIN ACADEMY</td>
<td>94-1186189</td>
<td>501 (C) 3</td>
<td>115,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. MARIN AGRICULTURAL LAND TRUST</td>
<td>94-2689383</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. MARIN COMMUNITY FOUNDATION</td>
<td>94-3007979</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. MARIN COUNTY DAY SCHOOL</td>
<td>94-1375791</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. MARIN COUNTY BICYCLE COALITION</td>
<td>68-0413994</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. MARIN COURT APPOINTED SPECIAL ADVOCATES</td>
<td>81-5047208</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. MARIN HUMANE SOCIETY</td>
<td>94-1156562</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. MARIN MONTESORI SCHOOL INC</td>
<td>94-1567656</td>
<td>501 (C) 3</td>
<td>32,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. MARIN PRIMARY &amp; MIDDLE SCHOOL</td>
<td>94-2302389</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. MARIN SHAKESPEARE COMPANY</td>
<td>68-0201240</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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(Form 990)  
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   - No

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</thead>
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<tr>
<td>(1) MARIN SYMPHONY ASSN 4340 REDWOOD HWY STE 409 SAN RAFAEL, CA 949</td>
<td>94-6104150</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) MARIN THEATRE COMPANY 397 MILLER AVE MILL VALLEY, CA 94941</td>
<td>23-7018125</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MARINE APPLIED RESEARCH AND EXPLORATION 1230 BRICKYARD COVE RD STE 101 RICHMOND, CA</td>
<td>31-1821639</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4) MARINE BIOLOGICAL LABORATORY 7 M B L ST WOODS HOLE, MA 2543</td>
<td>04-2104690</td>
<td>501 (C) 3</td>
<td>249,716.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) MARINE CORPS HERITAGE FOUNDATION 18900 JEFFERSON DAVIS HWY TRIANGLE, VA 2217</td>
<td>26-0803466</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) MARINE CORPS SCHOLARSHIP FOUNDATION INC 909 N WASHINGTON ST ALEXANDRIA, VA 22314</td>
<td>22-1905062</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(7) MARINE CORPS UNIVERSITY FOUNDATION INC 715 BROADWAY ST FL 2 QUANTICO, VA 22134</td>
<td>54-1143646</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) MARINE CORPS-LAW ENFORCEMENT FOUNDATION INC 273 COLUMBUS AVE TUCKAHoe, NY 10707</td>
<td>22-3357410</td>
<td>501 (C) 3</td>
<td>6,300.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) MARINE MARMAP CENTER 2000 BUNKER RD SAUSALITO, CA 94965</td>
<td>51-0144436</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
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<tr>
<td>(10) MARINE TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DR TRIANGLE, VA 2217</td>
<td>20-3021444</td>
<td>501 (C) 3</td>
<td>67,130.</td>
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<tr>
<td>(11) MARINERS CHURCH 5001 NEWPORT COAST DR IRVINE, CA 92603</td>
<td>95-2419940</td>
<td>501 (C) 3</td>
<td>91,892.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) MARINERS CHURCH HUNTINGTON BEACH 17011 BEACH BLVD STE 425 HUNTINGTON BEACH, CA 92649</td>
<td>82-2751351</td>
<td>501 (C) 3</td>
<td>7,255.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. Yes ☑ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. MARINERS COMMUNITY CHURCH</td>
<td>94-3085955</td>
<td>501 (C) 3</td>
<td>40,000.</td>
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<tr>
<td>2. MARION CHURCH OF CHRIST</td>
<td>54-1103883</td>
<td>501 (C) 3</td>
<td>9,600.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. MARION COMMUNITY FOUNDATION</td>
<td>31-4446189</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. MARION MEDICAL MISSION</td>
<td>37-1277129</td>
<td>501 (C) 3</td>
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<td>5. MARION-POLK FOOD SHARE INC</td>
<td>94-3034161</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6. MARIST CATHOLIC HIGH SCHOOL EUGENE OREGON</td>
<td>93-1189917</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. MARIST SCHOOL INC</td>
<td>58-0566204</td>
<td>501 (C) 3</td>
<td>11,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8. MARITIME MUSEUM ASSOCIATION OF SAN DIEGO</td>
<td>95-2130325</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9. MARK TWAIN LIBRARY ASN INC</td>
<td>06-0776655</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. MARKET STREET BAPTIST CHURCH</td>
<td>04-2774267</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11. MARKET STREET MISSION INC</td>
<td>22-6047486</td>
<td>501 (C) 3</td>
<td>69,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. MARKETPLACE INTEGRATION AND DEVELOPMENT COR</td>
<td>20-0008127</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MARLBORO SCHOOL OF MUSIC INC</td>
<td>1528 WALNUT ST STE 301 PHILADELPHIA, PA 191</td>
<td>03-0186612</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MARLBOROUGH SCHOOL</td>
<td>250 S ROSSMORE AVE LOS ANGELES, CA 90004</td>
<td>95-2816435</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MARLOW GUITAR INTERNATIONAL INCORPORATED</td>
<td>451 HUNGERFORD DR STE 119 # 482 ROCKVILLE,</td>
<td>47-4523712</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MARQUETTE NEIGHBORHOOD ASSOCIATION</td>
<td>PO BOX 8474 MADISON, WI 53708</td>
<td>20-1926852</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MARQUETTE UNIVERSITY</td>
<td>PO BOX 1881 MILWAUKEE, WI 53201</td>
<td>39-0806251</td>
<td>501 (C) 3</td>
<td>623,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>MARQUETTE UNIVERSITY HIGH SCHOOL</td>
<td>3401 W WISCONSIN AVE MILWAUKEE, WI 53208</td>
<td>39-0806826</td>
<td>501 (C) 3</td>
<td>55,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>MARQUIS STUDIOS LTD</td>
<td>20 JAY ST STE 826 BROOKLYN, NY 11201</td>
<td>13-3047206</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MARRIAGE MENTORS</td>
<td>5999 SUMMERSIDE DR STE 106 DALLAS, TX 75252</td>
<td>20-5559617</td>
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<td>17,400.</td>
<td>FMV</td>
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<td>9</td>
<td>MARS HILL UNIVERSITY</td>
<td>100 ATHLETIC ST MARS HILL, NC 28754</td>
<td>56-0554207</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>MARSHALL CHRISTENSEN FOUNDATION FOR INTERNA</td>
<td>PO BOX 2099 SANDY, UT 84092</td>
<td>93-1230131</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>MARSHALL COUNTY COMMUNITY</td>
<td>2701 N MICHIGAN ST PLYMOUTH, IN 46563</td>
<td>35-1826870</td>
<td>501 (C) 3</td>
<td>200,114.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>MARSHALL PROJECT INC</td>
<td>156 W 56TH ST STE 701 NEW YORK, NY 10019</td>
<td>46-4352634</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>55-6011111</td>
<td>501 (C) 3</td>
<td>107,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MARSHALLTON UNITED METHODIST CHURCH</td>
<td>23-2097256</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>MARSHFIELD AREA COMMUNITY FOUNDATION INC</td>
<td>47-3441083</td>
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<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>MARTHA BOWMAN UNITED METHODIST CHURCH</td>
<td>58-6110877</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MARTHA JEFFERSON HOSPITAL</td>
<td>54-0261840</td>
<td>501 (C) 3</td>
<td>46,409.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
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<td>62-0477728</td>
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<td>8</td>
<td>MARTHAS VILLAGE AND KITCHEN INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>MARTHAS VINEYARD BOYS AND GIRLS CLUB INCORPOR</td>
<td>04-2104167</td>
<td>501 (C) 3</td>
<td>11,000.</td>
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<td>10</td>
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<td>501 (C) 3</td>
<td>61,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>MARTHAS VINEYARD FISHERMENS PRESERVATION TR</td>
<td>45-3546941</td>
<td>501 (C) 3</td>
<td>81,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>MARTHAS VINEYARD MUSEUM INC</td>
<td>04-2160642</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

#### 1 (a) Name and address of organization or government

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<thead>
<tr>
<th>Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) MARTIN HOUSE RESTORATION CORP</td>
<td>16-1426693</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>143 JEWETT PKWY BUFFALO, NY 14214</td>
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<td></td>
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<td></td>
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<td></td>
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<tr>
<td>(2) MARTIN LUTHER KING COMMUNITY CENTER INCORPO</td>
<td>05-0271882</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>20 DR MARCUS WHEATLAND BLVD NEWPORT, RI 284</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(3) MARTIN LUTHER KING MULTI-SERVICE CENTER INC</td>
<td>23-7415846</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>40 W 40TH ST INDIANAPOLIS, IN 46208</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>(4) MARTIN MEMORIAL FOUNDATION INC</td>
<td>59-2343938</td>
<td>501 (C) 3</td>
<td>391,500.</td>
<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (Yes or No) 
   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) MARY INSTITUTE AND SAINT LOUIS COUNTRY DAY</td>
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<td>(2) MARY LYON EDUCATION FUND INC</td>
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<td>N/A</td>
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<td>(3) MARY LEES HOUSE INC</td>
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<td>(8) MARY MOTHER OF THE REDEMER CHURCH</td>
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<td>(9) MARYKNOLL MISSION ASSOCIATION OF THE FAITHF</td>
<td>13-3864513</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
   - 13

3. Enter total number of other organizations listed in the line 1 table.
   - 12
### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>MARYKNOLL SISTERS OF ST DOMINIC INC</td>
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<td>13-1740257</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..............................  ☒ Yes  ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>MARYVALE PREPARATORY SCHOOL</td>
<td>11300 FALLS RD LUTHERVILLE TIMONIUM, MD 210</td>
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<td>MARYWOOD UNIVERSITY</td>
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<td>26-0795453</td>
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<td>20-5117245</td>
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<td>47-3336305</td>
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<td>FMV</td>
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<td>MASHIA</td>
<td>PO BOX 191181 BROOKLYN, NY 11219</td>
<td>20-1923521</td>
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<td>34,000.</td>
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<td>MASIPHUMELELE CORPORATION</td>
<td>PO BOX 290477 CHARLESTOWN, MA 2129</td>
<td>02-0511758</td>
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<td>7433 LINEKILN FYE # 35 PHILADELPHIA, PA 19</td>
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<td>MASLOW PROJECT</td>
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<td>27-0734969</td>
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<td>9</td>
<td>MASLOWNS ARMY INC</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10</td>
<td>MASON COMMUNITY CHURCH</td>
<td>18674H 1467 V 20-7.21</td>
<td>1000 E COLUMBIA ST MASON, MI 48854</td>
<td>38-1422402</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>11</td>
<td>MASON COUNTY HISTORICAL SOCIETY INC</td>
<td>1687 S LAKESHORE DR LUDINGTON, MI 49431</td>
<td>38-1689000</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>12</td>
<td>MASORTI FOUNDATION FOR CONSERVATIVE JUDAISM</td>
<td>3080 BROADWAY NEW YORK, NY 10027</td>
<td>13-3137586</td>
<td>501 (C) 3</td>
<td>27,450.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................  

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................................  

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MASSACHUSETTS AUDUBON SOCIETY INC</td>
<td>04-2104702</td>
<td>501 (C) 3</td>
<td>154,150.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>208 S GREAT RD LINCOLN, MA 1773</td>
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<td>MASSACHUSETTS COALITION TO PREVENT GUN VIOLITION</td>
<td>04-5092934</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<tr>
<td>11 BEACON ST STE 722 BOSTON, MA 2108</td>
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<td>MASSACHUSETTS FAMILY INSTITUTE INC</td>
<td>04-3113783</td>
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<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>400 TRADECENTER STE 1950 WOBURN, MA 1801</td>
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<td>MASSACHUSETTS SOCIETY FOR THE PREVENTION OF</td>
<td>04-2103594</td>
<td>501 (C) 3</td>
<td>3,428,128.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MASSACHUSETTS INSTITUTE OF TECHNOLOGY</td>
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<tr>
<td>77 MASSACHUSETTS AVE # NE49-31 CAMBRIDGE, M</td>
<td>04-3192668</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>56 SUFFOLK ST STE 300 HOLYOKE, MA 1040</td>
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<td>MASSACHUSETTS RIVERS ALLIANCE INC</td>
<td>20-8387704</td>
<td>501 (C) 3</td>
<td>30,500.</td>
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<td>2343 MASSACHUSETTS AVE CAMBRIDGE, MA 2140</td>
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<td>501 (C) 3</td>
<td>156,200.</td>
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<tr>
<td>350 S HUNTINGTON AVE JAMAICA PLAIN, MA 2130</td>
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<tr>
<td>MASSACHALLENGE</td>
<td>27-0382989</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>21 DRYDOCK AVE BOSTON, MA 2210</td>
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<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

### General Information on Grants and Assistance

1. Name and address of organization or government
2. EIN
3. IRC section (if applicable)
4. Amount of cash grant
5. Amount of non-cash assistance
7. Description of non-cash assistance
8. Purpose of grant or assistance

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>EIN</th>
<th>IRC Section</th>
<th>Cash Grant</th>
<th>Non-Cash Assistance</th>
<th>Method of Valuation</th>
<th>Description of Assistance</th>
<th>Purpose of Grant or Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MASTERS ACADEMY INTERNATIONAL INC</td>
<td>24307 MAGIC MOUNTAIN PKWY # 540 VALENCIA, C</td>
<td>52-2366766</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MASTERS SCHOOL</td>
<td>ATTN: ADVANCEMENT OFFICE 49 CLINTON AVENUE</td>
<td>13-1740472</td>
<td>501 (C) 3</td>
<td>432,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>MASTERS Voices INC</td>
<td>1441 BROADWAY STE 3024 NEW YORK, NY 10018</td>
<td>13-1606158</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
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<tr>
<td>MATA AMRITANANDAMAYI CENTER</td>
<td>PO BOX 613 SAN RAMON, CA 94583</td>
<td>94-3044871</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATAN B SETER BAMBI INC</td>
<td>1728 53RD ST BROOKLYN, NY 11204</td>
<td>11-2967060</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATER DEI HIGH SCHOOL ROMAN CATHOLIC BISHOP</td>
<td>1202 W EDINGER AVE SANTA ANA, CA 92707</td>
<td>95-1648193</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATER DEI PERSONAL PARISH</td>
<td>2030 E STATE HIGHWAY 356 IRVING, TX 75066</td>
<td>27-0567024</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MATER DEI REGIONAL CATHOLIC SCHOOL</td>
<td>493 E MAIN ST LANSDALE, PA 19446</td>
<td>80-0795247</td>
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<td>49,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATER DEI SCHOOL INC</td>
<td>9600 SEVEN LOCKS RD BETHESDA, MD 20817</td>
<td>52-0906575</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATER ECCLESIAE FUND FOR VOCATIONS INC</td>
<td>9243 OLD GREEN MOUNTAIN RD ESMONT, VA 22937</td>
<td>51-0612966</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>MATERIAL AID AND ADVOCACY PROGRAM INC</td>
<td>5 LONGFELLOW PARK CAMBRIDGE, MA 2138</td>
<td>82-2927617</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MATERNITY CARE COALITION</td>
<td>2000 HAMILTON ST STE 205 PHILADELPHIA, PA 1</td>
<td>23-2200410</td>
<td>501 (C) 3</td>
<td>181,734.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| MATH FOR AMERICA INC  
915 BROADWAY FL 16 NEW YORK, NY 10010 | 20-0651886 | 501 (C) 3 | 27,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATHEMATICAL SCIENCES RESEARCH  
17 GAUSS WAY BERKELEY, CA 94720 | 94-2650833 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATHEMATICS FOUNDATION OF AMERICA  
129 HANCOCK ST CAMBRIDGE, MA 2139 | 57-1035414 | 501 (C) 3 | 51,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATHPATH  
63 FAIRVIEW RD SKILLMAN, NJ 8558 | 20-1290489 | 501 (C) 3 | 300,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATRICULATE INC  
1375 CONEY ISLAND AVE PMB 1011 BROOKLYN, NY | 35-2531989 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATT 25 INC  
1200 N THORNTON ST STE A CLOVIS, NM 88101 | 20-0342251 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATTHEW 25  
201 3RD AVE SW CEDAR RAPIDS, IA 52404 | 26-0467321 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATTHEW 25 INC  
413 E JEFFERSON BLVD FORT WAYNE, IN 46802 | 35-1484951 | 501 (C) 3 | 9,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATTHEW 25 MINISTRIES INC  
11060 KENWOOD RD BLUE ASH, OH 45242 | 31-1348100 | 501 (C) 3 | 85,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATTIE N DIXON COMM CUPBOARD INC  
150 N MAIN ST AMBLER, PA 19002 | 23-3061645 | 501 (C) 3 | 19,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MATTITUCK PRESBYTERIAN CHURCH  
PO BOX 1411 MATTITUCK, NY 11952 | 11-1761488 | 501 (C) 3 | 5,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MAUI FOOD BANK INC  
760 KOLI ST WAILUKU, HI 96793 | 99-0315110 | 501 (C) 3 | 14,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ....... X Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1 MAUI HUMANE SOCIETY INC</td>
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<td>N/A</td>
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<td>2 MAX CARES FOUNDATION INC</td>
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<td>249 PEARL ST WARTFORD, CT 6103</td>
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<td>3 MAX McGRAW WILDLIFE FOUNDATION</td>
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<td>36-2519612</td>
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<td>20,000.</td>
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<td>24 SAWYER RD LEE, NH 3861</td>
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<td>5 WAMARDING RD NEW PALTZ, NY 12561</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2727 COLLEGE AVE BERKELEY, CA 94705</td>
<td>94-2176125</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>1000 WESTOVER RD RICHMOND, VA 23220</td>
<td>54-6039788</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8 MAYO CLINIC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>200 1ST ST SW ROCHESTER, MN 55905</td>
<td>41-601702</td>
<td>501 (c) 3</td>
<td>2,809,000.</td>
<td>FMV</td>
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<td>9 MAYO CLINIC</td>
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<td>200 1ST STREET SW CO CORPORATE TAX ROCHESTER</td>
<td>86-0800150</td>
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<td>270,500.</td>
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<td>10 MAYO CLINIC</td>
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<tr>
<td>200 1ST ST SW ROCHESTER, MN 55905</td>
<td>59-3337028</td>
<td>501 (c) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11 MAYORS FUND FOR LOS ANGELES</td>
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<td></td>
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<tr>
<td>200 N SPRING ST RN 305B LOS ANGELES, CA 900</td>
<td>47-1084641</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12 MAYSVILLE PLAYERS INC</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 57 MAYSVILLE, KY 41056</td>
<td>61-6035038</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. ▶

3. Enter total number of other organizations listed in the line 1 table ................................................................................................................................. ▶
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MAYVIEW MO FOUNDATION 705 OWL CREEK PKWY ODESSA, MO 64076</td>
<td>47-2895639</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. MAZON INC A JEWISH RESPONSE TO HUNGER 10850 WILSHIRE BLVD SUITE 400 LOS ANGELES, CA</td>
<td>22-2624532</td>
<td>501 (C) 3</td>
<td>279,486.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. MC DANIEL COLLEGE INC 2 COLLEGE WL WESTMINSTER, MD 21157</td>
<td>52-0591694</td>
<td>501 (C) 3</td>
<td>56,867.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. MC PREPARATORY SCHOOL OF WISCONSIN INC 1228 W LLOYD ST STE 100 MILWAUKEE, WI 53205</td>
<td>39-1881295</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. MCADAMS BAPTIST CHURCH 6265 ATTALA ROAD 4167 SALLIS, MS 39160</td>
<td>64-0740339</td>
<td>501 (C) 3</td>
<td>18,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. MCALL PUBLIC LIBRARY FOUNDATION INC PO BOX 4016 MCCALL, ID 83638</td>
<td>61-1886895</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. MCCARTER THEATRE COMPANY 91 UNIVERSITY PL PRINCETON, NJ 8540</td>
<td>21-0724198</td>
<td>501 (C) 3</td>
<td>21,900.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8. MCOMBS SCHOOL OF BUSINESS FOUNDATION UNIVERSITY OF AUSTIN TX GSB-2104 G AUSTIN, TX</td>
<td>75-1589151</td>
<td>501 (C) 3</td>
<td>26,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. MCCORMICK THEOLOGICAL SEMINARY 22-22148 5460 S UNIVERSITY AVE CHICAGO, IL 60615</td>
<td>36-2167802</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. MCCUNE ALUMNI ASSOCIATION INC KATHY STEWART, TREASURER PO BOX 122 MCCUNE, KS 67501</td>
<td>46-3663666</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11. MCCUNE OSAGE TOWNSHIP LIBRARY PO BOX 73 MCCUNE, KS 66753</td>
<td>90-0674158</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. MCDONALD LOCAL SCHOOLS 600 IOWA AVE MC DONALD, OH 44437</td>
<td>36-6001745</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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Schedule I (Form 990) 2020
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>MCDONOUGH ROAD BAPTIST CHURCH OF FAYETTEVILLE</td>
<td>352 MCDONOUGH ROAD FAYETTEVILLE, GA 30214</td>
<td>58-6010501 501 (c) 3</td>
<td>17,340.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MCR SOCIAL CAPITAL</td>
<td>5758 GEARY BLVD # 261 SAN FRANCISCO, CA 941</td>
<td>20-3154063 501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MCGAW YMCA</td>
<td>1000 GROVE ST EVANSTON, IL 60201</td>
<td>36-2169194 501 (c) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MCKEE BOTANICAL GARDEN INC</td>
<td>350 US HIGHWAY 1 VERO BEACH, FL 32962</td>
<td>65-1189895 501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MCKENDREE UNIVERSITY</td>
<td>701 COLLEGE RD LEBANON, IL 62254</td>
<td>37-0661219 501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>MCKENNA ACADEMY OF NATURAL PHILOSOPHY INC</td>
<td>145 ELDRIDGE AVE MILL VALLEY, CA 94941</td>
<td>85-1313799 501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>MCKENZIE RIVER GATHERING FOUNDATION</td>
<td>909 NE ONEONTA ST APT 205 PORTLAND, OR 9721</td>
<td>93-0691187 501 (c) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MCKIN Community ASSOCIATION INC</td>
<td>1120 E BALTIMORE ST BALTIMORE, MD 21202</td>
<td>52-0611110 501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>MCKINLEY HIGH SCHOOL FOUNDATION</td>
<td>1039 S KING ST HONOLULU, HI 96814</td>
<td>99-0274503 501 (c) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>MCLAIR ASSOCIATION FOR CHILDREN INC</td>
<td>2150 BRYANT ST PALO ALTO, CA 94301</td>
<td>47-1774031 501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>MCLAREN NORTHERN MICHIGAN FOUNDATION</td>
<td>360 CONNABLE AVE PETOSKEY, MI 49770</td>
<td>38-2445611 501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>MCLAIN BAPTIST CHURCH</td>
<td>1367 CHAIN BRIDGE RD MC LEAN, VA 22101</td>
<td>54-0722664 501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1. MCLEAN BIBLE CHURCH 8925 LEESBURG PIKE VIENNA, VA 22182 54-0763526 501 (C) 3 128,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2. MCLEAN PRESBYTERIAN CHURCH 1020 BALLS HILL RD MCLEAN, VA 22101 54-0957095 501 (C) 3 118,164. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>3. MCLEAN PROJECT FOR THE ARTS INC 1446 CHAIN BRIDGE RD MCLEAN, VA 22101 52-1374407 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4. MCLEAN SCHOOL OF MARYLAND INC 8224 LOCHINVER LN POMOMAC, MD 20854 52-1117092 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. MCQUAID JESUIT HIGH SCHOOL 1800 S CLINTON AVE ROCHESTER, NY 14618 16-0781584 501 (C) 3 39,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6. MCRD MUSEUM HISTORICAL SOCIETY PO BOX 400805 SAN DIEGO, CA 92140 33-0290006 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7. MDRC 200 VESBY ST FL 23 NEW YORK, NY 10281 23-7379473 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. ME OHR BAIS YAAYOY INC 422 YESHIVA LN PIKEVILLE, MD 21208 32-3523224 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. HEAD SCHOOL FOR HUMAN DEVELOPMENT INC 1095 RIVERBANK RD STAMFORD, CT 6903 06-0869691 501 (C) 3 75,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10. MEADOWBROOK CHURCH - GREEN BAY, WI 701 HILLCREST HEIGHTS GREEN BAY, WI 54313 39-1376191 501 (C) 3 10,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. MEADOWBROOK SCHOOL OF WESTON INCORPORATED 10 FARM RD WESTON, MA 2493 04-2104720 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. MEADVILLE THEOLOGICAL SCHOOL OF LOMBARD COL 610 S MICHIGAN AVE CHICAGO, IL 60605 36-6078270 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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</tr>
</tbody>
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Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MEALS ON WHEELS</td>
<td>23-1705557</td>
<td>501 (C) 3</td>
<td>10,000</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>MEALS ON WHEELS AMERICA</td>
<td>23-7447812</td>
<td>501 (C) 3</td>
<td>50,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MEALS ON WHEELS AND MORE INC</td>
<td>23-7202594</td>
<td>501 (C) 3</td>
<td>23,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>MEALS ON WHEELS ASSOCIATION OF HOWARD COUNT</td>
<td>35-1291401</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MEALS ON WHEELS ATLANTA INC</td>
<td>58-0960309</td>
<td>501 (C) 3</td>
<td>10,500</td>
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<tr>
<td>6</td>
<td>MEALS ON WHEELS DIABLO REGION</td>
<td>68-0044205</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>MEALS ON WHEELS NEW JERSEY</td>
<td>47-4851096</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>MEALS ON WHEELS ALAMEDA COUNTY</td>
<td>94-2651065</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MEALS ON WHEELS OF CENTRAL MARYLAND INC</td>
<td>52-6074723</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>MEALS ON WHEELS OF CHESAPEAKE INC</td>
<td>54-1080366</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>MEALS ON WHEELS OF CONTRA COSTA INC</td>
<td>597 CENTER AVE STE 125 MARTINEZ, CA 94553</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>MEALS ON WHEELS OF DURHAM INC</td>
<td>56-1729111</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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### (Form 990)

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   [ ] Yes  
   [ ] No

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<tr>
<td>1</td>
<td>MEALS ON WHEELS OF GREATER HYDE PARK INC</td>
<td>14-1585991</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MEALS ON WHEELS OF GREENVILLE INC</td>
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<td>501 (C) 3</td>
<td>12,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3</td>
<td>MEALS ON WHEELS OF MACON COUNTY INC</td>
<td>22-3240238</td>
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<td>4</td>
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<td>05-0340723</td>
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<td>5</td>
<td>MEALS ON WHEELS OF SAN FRANCISCO INC</td>
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<td>39-1238290</td>
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<td>FMV</td>
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<td>7</td>
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<td>59-1679915</td>
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<td>23-1861779</td>
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<td>11</td>
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<td>12</td>
<td>MEALS ON WHEELS PLUS OF MANATEE INC</td>
<td>59-1420986</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tbody>
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<td>3</td>
<td>Enter total number of other organizations listed in the line 1 table: ..............</td>
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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>MEALS ON WHEELS WEST 1823 MICHIGAN AVE STE A SANTA MONICA, CA 90153</td>
<td>95-4613280</td>
<td>501 (C) 3</td>
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<td>MEALS-ON-WHEELS GREATER SAN DIEGO INC 2254 SAN DIEGO AVE STE 200 SAN DIEGO, CA 92101</td>
<td>95-2660509</td>
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<td>MEALS-ON-WHEELS INC OF TARRANT 5740 AIRPORT FWY HALTOM C1TY, TX 76177</td>
<td>75-1568798</td>
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<td>MEAN STREET MINISTRY 1380 AMBROSE ST LAKEWOOD, CO 80214</td>
<td>01-0797012</td>
<td>501 (C) 3</td>
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<tr>
<td>MEANY MIDDLE SCHOOL PTSA 6-15-420 301 21ST AVE E SEATTLE, WA 98112</td>
<td>82-1238675</td>
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<tr>
<td>MECHANICS INSTITUTE 57 POST ST STE 504 SAN FRANCISCO, CA 94104</td>
<td>94-1254644</td>
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<tr>
<td>MECHON HADAR 25 BROADWAY STE 1700 NEW YORK, NY 10004</td>
<td>26-4412164</td>
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<tr>
<td>MECKLENBURG COUNTY BUSINESS-EDUCATION PARTNERSHIP PO BOX 225 BOYDTON, VA 23917</td>
<td>54-1845328</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>MECKLENBURG PARTNERSHIP FOR CHILDREN 601 E 5TH ST STE 500 CHARLOTTE, NC 28202</td>
<td>56-1853108</td>
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<tr>
<td>MEDAL OF HONOR MUSEUM FOUNDATION 1905 E RANDOL MILL RD ARLINGTON, TX 76011</td>
<td>90-0900556</td>
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<td>50,000.</td>
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<tr>
<td>MEDECINS SANS FRONTIERS USA INC 40 RECTOR ST 16TH FL NEW YORK, NY 10006</td>
<td>13-3433452</td>
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<td>7,852,456.</td>
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<tr>
<td>MEDFIELD ANIMAL SHELTER INC PO BOX 271 MEDFIELD, MA 2052</td>
<td>04-3508728</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes  No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of noncash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>MEDFIELD COALITION FOR PUBLIC EDUCATION INC</td>
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<tr>
<td>CO ADRIENNE BROOSLIN 13 LEE ROAD MEDFIELD,</td>
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<td>MEDFIELD FOOD CUPBOARD</td>
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<td>PO BOX 172 MEDFIELD, MA 2052</td>
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<td>PO BOX 7284 OLYMPIA, WA 98507</td>
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<td>MEDIA LINE LTD</td>
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<td>1325 AVENUE OF THE AMERICAS # 27TH NEW YORK</td>
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<td>MEDIA MATTERS FOR AMERICA</td>
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<td>501 (C) 3</td>
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<td>800 MAINE AVE SW STE 500 WASHINGTON, DC 200</td>
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<td>1900 CAMPUS COMMONS DR RESTON, VA 20191</td>
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<td>MEDIA PROVIDENCE FRIENDS SCHOOL</td>
<td>23-1386177</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>125 W THIRD ST MEDIA, PA 19063</td>
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<td>MEDIA-UPPER PROVIDENCE FREE LIBRARY ASSOCIA</td>
<td>23-1384955</td>
<td>501 (C) 3</td>
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<td>1 E FRONT ST MEDIA, PA 19063</td>
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<td>11747 NE 1ST ST STE 310 BELLEVUE, WA 98005</td>
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<td>MEDIC OUTPOST INC</td>
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<td>N/A</td>
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<tr>
<td>PO BOX 1302 SALIDA, CA 9538</td>
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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tr>
<td>(1) MEDICAL BRIDGES INC 2706 MAGNET ST HOUSTON, TX 77054</td>
<td>76-0548161</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) MEDICAL COLLEGE OF VIRGINIA FOUNDATION PO BOX 980234 RICHMOND, VA 23298</td>
<td>54-6053660</td>
<td>501 (C) 3</td>
<td>123,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MEDICAL DEBT RESOLUTION INC 80 THEODORE FREEMD AVE RYE, NY 10580</td>
<td>47-1442997</td>
<td>501 (C) 3</td>
<td>161,017.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) MEDICAL FOUNDATION OF NORTH CAROLINA, INC. 123 W FRANKLIN ST., SUITE 510 CB#7565 CHARLOTTESVILLE, VA 22902</td>
<td>56-6057494</td>
<td>501 (C) 3</td>
<td>230,000.</td>
<td>FMV</td>
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<tr>
<td>(5) MEDICAL STUDENTS FOR CHOICE PO BOX 40935 PHILADELPHIA, PA 19107</td>
<td>20-5263777</td>
<td>501 (C) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) MEDICAL TEAMS INTERNATIONAL 14150 SW MILTON CT PORTLAND, OR 97224</td>
<td>93-0878944</td>
<td>501 (C) 3</td>
<td>197,448.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) MEDICARE RIGHTS CENTER INC 266 WEST 37TH ST 3RD FL NEW YORK, NY 10018</td>
<td>13-3505372</td>
<td>501 (C) 3</td>
<td>22,500.</td>
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<tr>
<td>(8) MEDINA PARENT TEACHER ASSOCIATION PO BOX 247 MEDINA, WA 98039</td>
<td>81-1328998</td>
<td>501 (C) 3</td>
<td>12,600.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) MEDS &amp; FOOD FOR KIDS 8050 WATSON RD STE 355 SAINT LOUIS, MO 6311</td>
<td>20-1257910</td>
<td>501 (C) 3</td>
<td>52,994.</td>
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<td>(10) MEDSHARE INTERNATIONAL 3240 CLIFTON SPRINGS RD DECATUR, GA 30034</td>
<td>58-2433968</td>
<td>501 (C) 3</td>
<td>38,000.</td>
<td>FMV</td>
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<tr>
<td>(11) MEDSTAR HEALTH INC 10980 GRANTCHESTER WAY FL 6 COLUMBIA, MD 21044</td>
<td>52-2087445</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) MEDSTAR-GEORGETOWN MEDICAL CENTER INC 10980 GRANTCHESTER WAY COLUMBIA, MD 21044</td>
<td>52-2218584</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
**SCHEDULE I (Form 990)**

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes ☑
   - No ☐

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>27-1105051</td>
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<td>32,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1504 MAPLEWOOD, NJ 7040</td>
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<td>225 COMMERCE AVE SW GRAND RAPIDS, MI 49503</td>
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<td>MELVIN J BERMAN HEBREW ACADEMY</td>
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<td>MEMORIAL BAPTIST CHURCH</td>
<td>73-0654572</td>
<td>501 (C) 3</td>
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<tr>
<td>2800 S YALE AVE TULSA, OK 74114</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations,**
**Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to **www.irs.gov/Form990** for the latest information.

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>20-4031475</td>
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<td>FMV</td>
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<td>4</td>
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<td>74-6027435</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>5</td>
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<td>62-1201138</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>MEMORIAL HEALTH SYSTEM</td>
<td>37-1110301</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>7</td>
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<td>FMV</td>
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<td>9</td>
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<td>14,000.</td>
<td>FMV</td>
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<td>1,300,051.</td>
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<td>20-2212588</td>
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<td>FMV</td>
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<td>58-2291775</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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# SCHEDULE I
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**Employer identification number**

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDO...</td>
<td>23-2888152</td>
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</tbody>
</table>

### Part I  General Information on Grants and Assistance

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   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</table>
| MEMPHIS ISLAMIC CENTER  
PO BOX 382624 GERMANTOWN, TN 38183           | 26-2450287 | 501 (C) 3 | 26,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MEMPHIS OPPORTUNITY SCHOLARSHIP TR INC        | 62-1723618 | 501 (C) 3 | 30,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENACHEM MENDEL SEATTLE CHEDER                | 91-1962749 | 501 (C) 3 | 6,880. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENDOCINO COAST HUMANE SOCIETY                | 94-3053960 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENDOCINO FOOD AND NUTRITION PROGRAM          | 94-2577092 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENDOCINO WOODLANDS CAMP ASSOC INC            | 94-1575258 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENDONOMA HEALTH ALLIANCE                     | 92-1813874 | 501 (C) 3 | 40,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENLO AThERTON HIGH SCHOOL FOUNDATION FOR T  | 26-0820369 | 501 (C) 3 | 27,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENLO PARK PRESBYTERIAN CHURCH                | 94-1167435 | 501 (C) 3 | 371,440. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENLO PARK-ATHERTON EDUCATION FOUNDATION      | 94-2871701 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENLO SCHOOL                                  | 94-3204137 | 501 (C) 3 | 343,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| MENNEN ENVIRONMENTAL FOUNDATION INC           | 68-0323681 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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3. Enter total number of other organizations listed in the line 1 table.

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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► Attach to Form 990.

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## Part I  General Information on Grants and Assistance

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   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>33 N MARKET ST STE 400 LANCASTER, PA 17603</td>
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<td>(5) MENTAL HEALTH ADVOCACY SERVICES INC</td>
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<td>FMV</td>
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<tr>
<td>3255 WILSHIRE BLVD STE 902 LOS ANGELES, CA</td>
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<td>(6) MENTAL HEALTH AMERICA OF CENTRAL CAROLINAS</td>
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<td>(7) MENTAL HEALTH AMERICA OF NORTH CENTRAL IND</td>
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<tr>
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<td>(8) MENTARI HUMAN TRAFFICKING SURVIVOR EMPOWER</td>
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<td>PO BOX 8316 NEW YORK, NY 10150</td>
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</tr>
<tr>
<td>(12) MEOWS KITTY-KAT RESCUE INC</td>
<td>47-2548494</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>14 RAINBOW TER WEST ORANGE, NJ 07052</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Mepkin Abbey Catholic Conference</td>
<td>1098 Mepkin Abbey Rd Moncks Corner, SC 2946</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) Mercado Global Inc</td>
<td>254 36TH ST UNIT 41 STE 3308 BROOKLYN, NY 1</td>
<td>501 (C) 3</td>
<td>105,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) Mercantile Library Association of the City</td>
<td>80 5TH AVE RM 1201 NEW YORK, NY 10011</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) Mercatus Center Inc</td>
<td>3434 Washington Blvd Arlington, VA 22201</td>
<td>501 (C) 3</td>
<td>10,132,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) Mercer County Community College Foundation</td>
<td>1200 Old Trenton Rd Princeton Junction, NJ</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) Mercer Island Presbyterian Church</td>
<td>3605 84TH AVENUE SE MERCER ISLAND, WA 98040</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) Mercer Island Schools Foundation</td>
<td>PO Box 1243 Mercer Island, WA 98040</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(8) Mercer Street Friends Center</td>
<td>151 Mercer St Trenton, NJ 8611</td>
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<td>FMV</td>
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<tr>
<td>(9) Merck Forest &amp; Farmland Center</td>
<td>PO Box 86 RUPERT, VT 5768</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(10) Mercury One Inc</td>
<td>PO Box 140489 IRVING, TX 75014</td>
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<td>14,700.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11) Mercy Center Corporation</td>
<td>1106 Main St ASBURY PARK, NJ 7712</td>
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<td>FMV</td>
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<tr>
<td>(12) Mercy Charitable Program</td>
<td>5223 E FELLARS DR SCOTTDALE, AZ 85254</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
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<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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<tbody>
<tr>
<td>1 (a)</td>
<td>Name and address of organization or government</td>
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<td>(b)</td>
<td>EIN</td>
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<td>IRC section (if applicable)</td>
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<td>(d)</td>
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<td>(e)</td>
<td>Amount of non-cash assistance</td>
</tr>
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<td>(f)</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
</tr>
<tr>
<td>(g)</td>
<td>Description of noncash assistance</td>
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<td>(h)</td>
<td>Purpose of grant or assistance</td>
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<td>1</td>
<td>MERCY CHEFS INC</td>
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<td>711 WASHINGTON ST PORTSMOUTH, VA 23704</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MERCY CORPS</td>
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<tr>
<td>45 SW ANKENY ST PORTLAND, OR 97204</td>
<td>91-1148123</td>
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<td>501 (C) 3</td>
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<td>3</td>
<td>MERCY FOR ANIMALS</td>
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<td>7908 SANTA MONICA BLVD WEST HOLLYWOOD, CA 9</td>
<td>54-2076145</td>
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<td>4</td>
<td>MERCY FOUNDATION</td>
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<td>3400 DATA DR FL 3 RANCHO CORDOVA, CA 95670</td>
<td>23-7072762</td>
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<td>5</td>
<td>MERCY FOUNDATION NORTH</td>
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<td>2625 EDITH AVE STE E REDDING, CA 96001</td>
<td>94-3136799</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>MERCY HEALTH CLINIC INC</td>
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<tr>
<td>7 METROPOLITAN CT STE 1 GAITHERSBURG, MD 20</td>
<td>52-2230932</td>
</tr>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>MERCY HEALTH FOUNDATION NORTHWEST ARKANSAS</td>
</tr>
<tr>
<td>2710 S RIFE MEDICAL LN ROGERS, AR 72758</td>
<td>71-0601687</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>MERCY HEALTH FOUNDATION SPRINGFIELD</td>
</tr>
<tr>
<td>1235 E CHEROKEE ST SPRINGFIELD, MO 65804</td>
<td>32-0195818</td>
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<td>9</td>
<td>MERCY HEALTH FOUNDATION ST LOUIS</td>
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<td>615 S NEW BALLAS RD SAINT LOUIS, MO 63141</td>
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<td>10</td>
<td>MERCY HEALTH SERVICES INC</td>
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<td>1113 MURFREESBORO RD STE 319 FRANKLIN, TN 3</td>
<td>62-1781969</td>
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<tr>
<td>11</td>
<td>MERCY HIGH SCHOOL</td>
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<tr>
<td>29300 W 11 MILE RD FARMINGTON HILLS, MI 483</td>
<td>38-2501739</td>
</tr>
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<td>FMV</td>
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<td>12</td>
<td>MERCY HIGH SCHOOL</td>
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<tr>
<td>1507 S 48TH ST OMAHA, NE 68106</td>
<td>47-0424786</td>
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<td>501 (C) 3</td>
<td>5,188.</td>
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<td>FMV</td>
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
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<tbody>
<tr>
<td>MERCY HOUSE LIVING CENTERS PO BOX 1905 SANTA ANA, CA 92702</td>
<td>33-0315864</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERCY KIDS AFRICA INC PO BOX 296 BROOKLYN, PA 19028</td>
<td>47-2315850</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERCY LEARNING CENTER OF BRIDGEPORT INCORPO</td>
<td>637 PARK AVE BRIDGEPORT, CT 6604</td>
<td>22-2859879</td>
<td>78,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERCY MATERNITY HOUSE INC 8000 RESEARCH FOREST DR STE 115-11 SPRING,</td>
<td>27-3196267</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERCY NEIGHBORHOOD MINISTRIES OF PHILADELPH</td>
<td>1939 W VENANGO ST PHILADELPHIA, PA 19140</td>
<td>57-1144097</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MERCY SHIPS PO BOX 2020 LINDALE, TX 75771</td>
<td>26-2414132</td>
<td>501 (c) 3</td>
<td>232,600.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MERCY SHIPS INTERNATIONAL PO BOX 2020 LINDALE, TX 75771</td>
<td>75-2685233</td>
<td>501 (c) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MERCY VINEYARD CHURCH 752 HARDING ST NE MINNEAPOLIS, MN 55413</td>
<td>20-1219309</td>
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<td>MERCYFIRST</td>
<td>525 CONVENT RD SYOSSET, NY 11791</td>
<td>11-1635089</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MEREDITH COLLEGE</td>
<td>3800 HILLSBOROUGH ST RALEIGH, NC 27607</td>
<td>56-0530242</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERIDIAN HERALD INC</td>
<td>542 OAKDALE RD NE ATLANTA, GA 30307</td>
<td>58-2345108</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERIDIAN INSTITUTE PO BOX 1829 DILLON, CO 80435</td>
<td>84-3143502</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table.
### Part I
**General Information on Grants and Assistance**

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MERIDIAN INTERNATIONAL CENTER 1630 CRESCENT PL NW WASHINGTON, DC 20009</td>
<td>53-0259663</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>MERIT AMERICA 712 H ST NE STE 1560 WASHINGTON, DC 20002</td>
<td>84-2108762</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>MERIT SCHOOL OF MUSIC 38 S PEORIA ST CHICAGO, IL 60607</td>
<td>36-3028768</td>
<td>501 (C) 3</td>
<td>93,000.</td>
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<td>MERKOS CHABAD-LUBAVITCH ORGANIZATION 2110 E LINCOLN DR PHOENIX, AZ 85016</td>
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<tr>
<td>MERKOS LINYONEI CHINUCH INC 770 EASTERN PKWY BROOKLYN, NY 11213</td>
<td>11-6001111</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>MEROLA OPERA PROGRAM 601 VAN NESS AVE STE S SAN FRANCISCO, CA 94</td>
<td>94-6084831</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>MERRIE WOODE FOUNDATION INC 100 MERRIE WOODE RD SAPPHIRE, NC 28774</td>
<td>62-1055955</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERRIMACK REPERTORY THEATRE 132 WARREN ST LOWELL, MA 1852</td>
<td>04-2664784</td>
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<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MERRITT ISLAND REDEVELOPMENT AGENCY 2575 N. COURTENAY PARKWAY SUITE 214 MERRITT</td>
<td>83-2672126</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MESA REFUGE 11435 STATE ROUTE 1 STE 2B PO BOX POINT REY</td>
<td>46-2740651</td>
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<td>10,000.</td>
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<tr>
<td>MESIPTA MEOR HTORAH 7 ABRAMS WAY LAKWOOD, NJ 8701</td>
<td>47-1823109</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<tr>
<td>MESILLA VALLEY COMMUNITY OF HOPE INCORPORATED PO BOX 16592 LAS CRUCES, NM 88004</td>
<td>85-0410134</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1730 N UNIVERSITY DR CORAL SPRINGS, FL 3307</td>
<td>81-4451593</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MESIVTA YESHIVA RABBI CHAIM BERLIN</td>
<td>1585 CONEY ISLAND AVE BROOKLYN, NY 11230</td>
<td>501 (C) 3</td>
<td>70,700.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MESOTHELIOMA APPLIED RESEARCH FOUNDATION IN WASHINGTON, DC 20001</td>
<td>75-2816066</td>
<td>501 (C) 3</td>
<td>7,635.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MESSIAH CHRISTIAN CHURCH INC</td>
<td>PO BOX 526 WELLS, ME 4090</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MESSIAH LUTHERAN CHURCH</td>
<td>7740 HIGHWAY 72 W MADISON, TX 77429</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
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<tr>
<td>MESSIAH LUTHERAN CHURCH</td>
<td>1550 S POSEYVILLE RD MIDLAND, WA 98665</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>MESSIAH LUTHERAN CHURCH</td>
<td>11522 TELGE RD CYPRESS, WI 48640</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>MESSIAH LUTHERAN CHURCH</td>
<td>905 NW 94TH ST VANCOUVER, AL 35758</td>
<td>501 (C) 3</td>
<td>10,900.</td>
<td>FMV</td>
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<tr>
<td>MESSIAH UNIVERSITY</td>
<td>1 UNIVERSITY AVE STE 3015 MECHANICSBURG, PA</td>
<td>501 (C) 3</td>
<td>61,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>METANOA CENTER</td>
<td>316 HOME AVENUE METANOA CENTER LOCKLAND, O</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>METCALFE PARK COMMUNITY BRIDGES INC</td>
<td>3624 W NORTH AVE MILWAUKEE, WI 53208</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>METCO COLLEGE SCHOLARSHIP FUND OF LEXINGTON</td>
<td>10 FLETCHER AVE LEXINGTON, MA 2420</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   [ ] Yes  [ ] No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) METHODIST HOME FOR CHILDREN FOUNDATION</td>
<td>56-2259577</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1041 WASHINGTON ST RALEIGH, NC 27605</td>
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<td>(2) METHODIST HOME OF KENTUCKY</td>
<td>61-0458375</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1115 ASHgrove RD NICHOLASVILLE, KY 40356</td>
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<td>(3) METHODIST HOME OF THE SOUTH GEORGIA CONFERENCE</td>
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<td>304 PIERCE AVE MACON, GA 31204</td>
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<td>(4) METHODIST HOSPITAL</td>
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<td>6565 FANNIN ST # GB240 HOUSTON, TX 77030</td>
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<td>(5) METRIC MEDIA FOUNDATION</td>
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<td>117 S LEXINGTON ST HARRISONVILLE, MO 64701</td>
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<td>(6) METRO BICYCLE COALITION OF NEW ORLEANS</td>
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<td>501 (C) 3</td>
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<tr>
<td>1024 ELYSIAN FIELDS AVE NEW ORLEANS, LA 701</td>
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<td>(7) METRO CARING</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1100 E 18TH AVE DENVER, CO 80218</td>
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<td>(8) METRO MEALS ON WHEELS INC</td>
<td>31-1501057</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1200 WASHINGTON AVE S MINNEAPOLIS, MN 55415</td>
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<td>(9) METRO SQUASH NFP</td>
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<td>6100 S COTTAGE GROVE AVE CHICAGO, IL 60637</td>
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<td>(10) METROHEALTH FOUNDATION INC</td>
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<td>FMV</td>
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<td>2500 METROHEALTH DR CLEVELAND, OH 44109</td>
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<td>(11) METROPOLITAN AREA NEIGHBORHOOD NUTRITION AL</td>
<td>23-2586142</td>
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<td>(12) METROPOLITAN BOSTON HOUSING PARTNERSHIP INC</td>
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<td>FMV</td>
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<td>1411 TREMONT ST ROXBURY CROSSING, MA 2120</td>
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## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<tr>
<td>METROPOLITAN CLUB PRESERVATION FOUNDATION</td>
<td>1700 H ST NW WASHINGTON, DC 20006</td>
<td>52-2063793</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN FAMILY SERVICES</td>
<td>ONE NORTH DEARBORN 10TH FLOOR CHICAGO, IL 6</td>
<td>36-2167940</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN GOLF ASSOCIATION FOUNDATION</td>
<td>49 KNOLLWOOD RD ELMSFORD, NY 10523</td>
<td>13-3637689</td>
<td>501 (C) 3</td>
<td>14,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN LUTHERAN MINISTRY</td>
<td>3031 HOLMES ST KANSAS CITY, MO 64109</td>
<td>43-0970991</td>
<td>501 (C) 3</td>
<td>14,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>METROPOLITAN MEMORIAL METHODIST CHURCH</td>
<td>3401 NEBRASKA AVE NW WASHINGTON, DC 20016</td>
<td>53-0225162</td>
<td>501 (C) 3</td>
<td>27,770</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>METROPOLITAN MINISTRIES</td>
<td>4001 ROSSVILLE BLVD CHATTANOOGA, TN 37407</td>
<td>27-0203084</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN MINISTRIES INC</td>
<td>2002 N FLORIDA AVE TAMPA, FL 33602</td>
<td>59-1477007</td>
<td>501 (C) 3</td>
<td>42,000</td>
<td>FMV</td>
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<td>METROPOLITAN MONTESSORI SCHOOL</td>
<td>325 W 85TH ST NEW YORK, NY 10024</td>
<td>13-2527041</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>METROPOLITAN NEW YORK COORDINATING COUNCIL</td>
<td>77 WATER ST FL 26 NEW YORK, NY 10005</td>
<td>13-2738818</td>
<td>501 (C) 3</td>
<td>37,428</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN OPERA ASSOCIATION INC</td>
<td>LINCOLN CENTER PLAZA NEW YORK, NY 10023</td>
<td>13-1624087</td>
<td>501 (C) 3</td>
<td>439,010</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>METROPOLITAN OPERA GUILD INC</td>
<td>70 LINCOLN CENTER PLZ # 6TH NEW YORK, NY 10</td>
<td>13-1681983</td>
<td>501 (C) 3</td>
<td>61,850</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>METROPOLITAN SEATTLE JEWISH DAY SCHOOL</td>
<td>15749 NE 4TH ST BELLEVUE, WA 98008</td>
<td>91-1085790</td>
<td>501 (C) 3</td>
<td>71,640</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1.</td>
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<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>PO BOX 9015 KAILUA KONA, HI 96745</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>MEVAKSHAI KASHM</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>MEXICAN AMERICAN LEGAL DEFENSE AND EDUCATIO</td>
<td>501 (C) 3</td>
<td>49,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>MGVP INC</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>MI FAMILIA VOTA EDUCATION FUND</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>MIAMI BEACH COMMUNITY CHURCH, INC</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>MIAMI BOARDING SCHOOL INC</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>MIAMI CITY BALLET INC</td>
<td>501 (C) 3</td>
<td>217,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>MIAMI RESCUE MISSION BROWARD OUTREACH CENTE</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>MIAMI UNIVERSITY</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>MIAMI UNIVERSITY FOUNDATION INC</td>
<td>501 (C) 3</td>
<td>59,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MIAMI VALLEY HOSPITAL FOUNDATION</td>
<td>110 N MAIN ST STE 500 DAYTON, OH 45402</td>
<td>31-1040231</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>MICHAEL J FOX FOUNDATION FOR PARKINSONS RES</td>
<td>111 W 33RD ST FL 10 NEW YORK, NY 10001</td>
<td>13-4141945</td>
<td>501 (C) 3</td>
<td>488,581.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MICHAEL LEVIN LONE SOLDIER FOUNDATION INC</td>
<td>1500 BROADWAY STE 903 NEW YORK, NY 10036</td>
<td>47-3798721</td>
<td>501 (C) 3</td>
<td>11,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MICHAEL ROLFE PANCREATIC CANCER FOUNDATION</td>
<td>4255 N HONORE ST STE 209 CHICAGO, IL 60613</td>
<td>36-4338152</td>
<td>501 (C) 3</td>
<td>18,525.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MICHAEL SERVETUS UNITARIAN UNIVERSALIST FEL</td>
<td>4505 E 18TH ST VANCOUVER, WA 98661</td>
<td>23-7449266</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>MICHAEL-ANN RUSSELL JEWISH COMMUNITY CENTER</td>
<td>18900 NE 25TH AVE MIAMI, FL 33180</td>
<td>59-2791269</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>MICHAELS WAY</td>
<td>520 PENNSYLVANIA AVE # 4 FORT WASHINGTON, P</td>
<td>43-1959538</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MICHIGAN COUNCIL ON CRIME AND DELINQUENCY</td>
<td>1679 BROADWAY ST ANN ARBOR, MI 48105</td>
<td>38-2108273</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>MICHIGAN ENVIRONMENTAL COUNCIL</td>
<td>602 W IONIA ST LANSING, MI 48933</td>
<td>38-2517980</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>MICHIGAN HISTORY FOUNDATION INC</td>
<td>702 W KALAMAZOO ST LANSING, MI 48915</td>
<td>38-2888411</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>MICHIGAN LEAGUE OF CONSERVATION VOTERS EDUC</td>
<td>3029 MILLER RD ANN ARBOR, MI 48103</td>
<td>37-1430158</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>MICHIGAN LUTHERAN SEMINARY FOUNDATION</td>
<td>2777 HARDIN ST # 4 SAGINAW, MI 48602</td>
<td>35-2159001</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>MICHIGAN STATE UNIVERSITY</td>
<td>38-6005984</td>
<td>501 (C) 3</td>
<td>733,973.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MICHIGAN TECH FUND</td>
<td>38-1554664</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>MICHIGAN THEATER FOUNDATION INC</td>
<td>38-2269013</td>
<td>501 (C) 3</td>
<td>17,610.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>MID ATLANTIC CENTER FOR THE ARTS</td>
<td>22-1923415</td>
<td>501 (C) 3</td>
<td>5,835.</td>
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<td>5</td>
<td>MID ATLANTIC CHRISTIAN MINISTRIES</td>
<td>20-5650251</td>
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<td>15,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>MID COAST HUNGER PREVENTION PROGRAM INC</td>
<td>01-0492643</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>MIDAMERICA BAPTIST CONFERENCE</td>
<td>36-2284262</td>
<td>501 (C) 3</td>
<td>9,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MID-ATLANTIC INNOCENCE PROJECT</td>
<td>54-1993334</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MIDDLE EAST CHILDRENS ALLIANCE</td>
<td>94-3074600</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>10</td>
<td>MIDDLE EAST FORUM</td>
<td>23-7749796</td>
<td>501 (C) 3</td>
<td>95,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>MIDDLE EAST MEDIA AND RESEARCH INSTITUTE IN</td>
<td>52-2068483</td>
<td>501 (C) 3</td>
<td>117,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>MIDDLE TENNESSEE GERMAN SHEPHERD RESCUE</td>
<td>46-1193308</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................................................................................

Enter total number of other organizations listed in the line 1 table .................................................................................................................................

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

Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467 V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>MIDDLEBRIDGE SCHOOL INC 333 OCEAN RD NARRAGANSETT, RI 2882</td>
<td>26-3113890</td>
<td>501 (c) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLEBURY COMMUNITY CENTER INC 300 W WASHINGTON ST MIDDLEBURG, VA 20117</td>
<td>56-0566300</td>
<td>501 (c) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>MIDDLEBURG HUMANE FOUNDATION PO BOX 684 MARshall, VA 20116</td>
<td>54-1694317</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLEBURY COMMUNITY CHURCH INC 56893 COUNTY ROAD 29 GOSHEN, IN 46528</td>
<td>26-0532773</td>
<td>501 (c) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLEBURY TRANSITIONAL CARE COALITION INC 27 N PLEASANT ST MIDDLEBURY, VT 5753</td>
<td>56-2531802</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLESEX HOSPITAL 28 CRESCENT ST MIDDLETOWN, CT 6457</td>
<td>06-0646718</td>
<td>501 (c) 3</td>
<td>14,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLESEX SCHOOL PO BOX 9122 CONCORD, MA 1742</td>
<td>04-2103821</td>
<td>501 (c) 3</td>
<td>47,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLETON OUTREACH MINISTRY INC 3502 PARMENTER ST MIDDLETON, WI 53562</td>
<td>39-1484945</td>
<td>501 (c) 3</td>
<td>30,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLETON BIBLE CHURCH PO BOX 989 MIDDLETOWN, CA 95461</td>
<td>94-2893359</td>
<td>501 (c) 3</td>
<td>56,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MIDDLETOWN PUBLIC LIBRARY 20 N CATHERINE ST MIDDLETOWN, PA 17057</td>
<td>37-1706325</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>MIDLAND COMMUNITY FORMER OFFENDER ADVOCACY 1415 WASHINGTON ST MIDLAND, MI 48640</td>
<td>81-2927442</td>
<td>501 (c) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>MIDLAND SCHOOL CORPORATION PO BOX 8 LOS OLIVOS, CA 93441</td>
<td>95-1684072</td>
<td>501 (c) 3</td>
<td>5,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### General Information on Grants and Assistance

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | MIDLands Humane Society  
1020 Railroad Hwy # A Council Bluffs, IA 51 | 20-5105144 | 501 (c) 3 | 11,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | MIDLands Open Door  
PO Box 1614 Midland, MI 48641 | 38-2161429 | 501 (c) 3 | 9,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | MIDNIGHT MISSION  
601 S San Pedro St Los Angeles, CA 90014 | 95-1691293 | 501 (c) 3 | 5,900. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | MIDNIGHT RUN INC  
97 Main St Dobbs Ferry, NY 10522 | 13-3576702 | 501 (c) 3 | 12,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | MID-OHIO FoodBank  
3960 Brookham DR Grove City, OH 43123 | 31-0865343 | 501 (c) 3 | 301,384. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | MID-PENINSULA Education Center INC  
1340 Willow Rd Menlo Park, CA 94025 | 94-2693417 | 501 (c) 3 | 364,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | MID-SHORE Community Foundation INC  
102 E Dover St Easton, MD 21601 | 52-1782373 | 501 (c) 3 | 9,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | MID-SOUTH Food Bank  
3865 S Perkins Rd Memphis, TN 38118 | 62-1340755 | 501 (c) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | MIDTOWN Educational Foundation  
718 S Loomis St Chicago, IL 60607 | 36-3417278 | 501 (c) 3 | 14,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | MIDTOWN NEIGHBORHOOD OPPORTUNITIES Corporat  
1202 S Boyle Ave Saint Louis, MO 63110 | 81-2818972 | 501 (c) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | MIDWAY Baptist Church  
200 N Old Kentucky Road Cookeville, TN 3850  
200 N Old Kentucky Road Cookeville, TN 3850 | 62-1177187 | 501 (c) 3 | 14,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | MIDWAY Foundation INC  
910 N Harbor Dr San Diego, CA 92101 | 51-0571147 | 501 (c) 3 | 105,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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### Part I: General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1</td>
<td>MIDWEST ATHLETES AGAINST CHILDHOOD CANCER I</td>
<td>39-1270290</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>2</td>
<td>MIDWEST ENVIRONMENTAL ADVOCATES INC</td>
<td>39-2006475</td>
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<td>3</td>
<td>MIDWEST FOOD BANK NFP INC</td>
<td>41-2120170</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>4</td>
<td>MIDWEST SPECIAL SERVICES INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MIDWESTERN BAPTIST THEOLOGICAL SEMINARY INC</td>
<td>44-0618839</td>
<td>501 (C) 3</td>
<td>61,060.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>MIDWESTERN INNOCENCE PROJECT INC</td>
<td>43-1914499</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>MIDWESTERN STATE UNIVERSITY FOUNDATION INC</td>
<td>75-1101337</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>MIFGASH JEWISH EDUCATIONAL PROGRAM INC</td>
<td>26-2868502</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MIGHTY EIGHTH FOUNDATION INC</td>
<td>75-3076651</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>MIGHTY WRITERS</td>
<td>01-0920922</td>
<td>501 (C) 3</td>
<td>77,000.</td>
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<td>11</td>
<td>MJENTE SUPPORT COMMITTEE</td>
<td>82-1711382</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
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<td>12</td>
<td>MIKROENOWORKS FOUNDATION</td>
<td>26-4324338</td>
<td>501 (C) 3</td>
<td>42,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table:  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes ☑
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a)</th>
<th>(b)</th>
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</tr>
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<tr>
<td>Name and address of organization or government</td>
<td>EIN</td>
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<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
</tr>
<tr>
<td>MILBANK CENTRAL UNITED METHODIST CHURCH</td>
<td>201 S 5TH ST MILBANK, SD 57252</td>
<td>46-0247337</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILLE HIGH 360</td>
<td>PO BOX 40160 DENVER, CO 80204</td>
<td>26-1598336</td>
<td>501 (c) 3</td>
<td>5,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILE HIGH CALVARY INCORPORATED</td>
<td>181 W COUNTY LINE RD HIGHLANDS RANCH, CO 80</td>
<td>27-0394511</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILE HIGH MINISTRIES</td>
<td>913 WYANDOT ST DENVER, CO 80204</td>
<td>84-0782214</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILE HIGH UNITED WAY INC</td>
<td>711 PARK AVE W DENVER, CO 80205</td>
<td>84-0404235</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILITARY CHILD EDUCATION COALITION</td>
<td>909 MOUNTAIN LION CIR HARKER HEIGHTS, TX 76</td>
<td>74-2889416</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILITARY COMMUNITY YOUTH MINISTRIES</td>
<td>540 N CASCADE AVE STE 300 COLORADO SPRINGS, CO 80903</td>
<td>74-2238462</td>
<td>501 (c) 3</td>
<td>210,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILITARY OFFICERS ASSOCIATION OF AMERICA SC</td>
<td>201 N WASHINGTON ST ALEXANDRIA, VA 22314</td>
<td>54-1659039</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILL CITY FARMERS MARKET CHARITABLE FUND</td>
<td>704 S 2ND ST MINNEAPOLIS, MN 55401</td>
<td>81-4420781</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>MILL COMMUNITY MINISTRIES</td>
<td>8 LOIS AVE GREENVILLE, SC 29611</td>
<td>90-0854058</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILL REEF FUND</td>
<td>1235 ALDEBARAN DR MC LEAN, VA 22101</td>
<td>13-6162947</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MILLBROOK BAND BOOSTERS CLUB</td>
<td>PO BOX 97092 RALEIGH, NC 27624</td>
<td>56-1181490</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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3. Enter total number of other organizations listed in the line 1 table.

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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tr>
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</tr>
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**Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MILLBROOK SCHOOL</td>
<td>131 MILLBROOK SCHOOL RD MILLBROOK, NY 12545</td>
<td>14-1413770</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MILLBURN DIAMOND CLUB INC</td>
<td>434 MILLBURN AVE MILLBURN, NJ 7041</td>
<td>52-1783108</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MILLENNIUM RELIEF AND DEVELOPMENT SERVICES</td>
<td>5233 BELLAIRE BLVD # 358 BELLAIRE, TX 77401</td>
<td>76-0574590</td>
<td>501 (C) 3</td>
<td>10,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MILLERSVILLE UNIVERSITY OF PENNSYLVANIA</td>
<td>PO BOX 1002 MILLERSVILLE, PA 17551</td>
<td>23-2397926</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>MILLIGAN UNIVERSITY</td>
<td>PO BOX 750 MILLIGAN COLLEGE, TN 37682</td>
<td>62-0535755</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>MILLIKIN UNIVERSITY</td>
<td>1184 W MAIN ST DECATUR, IL 62522</td>
<td>37-0706154</td>
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<td>13,800.</td>
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<td>N/A</td>
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<td>7</td>
<td>MILLS COLLEGE</td>
<td>5000 MACARTHUR BLVD OAKLAND, CA 94613</td>
<td>94-1156566</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MILLSAPS COLLEGE</td>
<td>1701 N STATE ST JACKSON, MS 39210</td>
<td>64-0303084</td>
<td>501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MILLS-PENINSULA HOSPITAL FOUNDATION</td>
<td>C/O SH TAX 2200 RIVER PLAZA DR SACRAMENTO, CA 95815</td>
<td>23-7288765</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>MILPITAS FOOD PANTRY</td>
<td>1440 S MAIN ST MILPITAS, CA 95035</td>
<td>77-0254042</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>MILTON ACADEMY</td>
<td>170 CENTRE ST MILTON, MA 2186</td>
<td>04-2103603</td>
<td>501 (C) 3</td>
<td>58,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>MILWAUKEE AREA TECHNICAL COLLEGE FOUNDATION</td>
<td>700 WEST STATE STREET S214 MILWAUKEE, WI 53233</td>
<td>39-1341603</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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</tr>
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<tbody>
<tr>
<td>1. MILWAUKEE BALLET 128 N. JACKSON STREET MILWAUKEE, WI 53202</td>
<td>39-1134735</td>
<td>501 (C) 3</td>
<td>8,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. MILWAUKEE CHAMBER THEATRE LTD 158 N BROADWAY MILWAUKEE, WI 53202</td>
<td>39-1323345</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. MILWAUKEE HABITAT FOR HUMANITY 3458 N WELL ST MILWAUKEE, WI 53212</td>
<td>39-1496741</td>
<td>501 (C) 3</td>
<td>11,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. MILWAUKEE JEWISH FEDERATION INC 1360 N PROSPECT AVE MILWAUKEE, WI 53202</td>
<td>39-0806312</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. MILWAUKEE REPERTORY THEATER INC 108 E WELLS ST MILWAUKEE, WI 53202</td>
<td>39-0946025</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. MILWAUKEE RESCUE MISSION 830 N 19TH ST MILWAUKEE, WI 53233</td>
<td>39-0816851</td>
<td>501 (C) 3</td>
<td>25,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. MILWAUKEE SCHOOL OF ENGINEERING 1025 N BROADWAY MILWAUKEE, WI 53202</td>
<td>39-0477970</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. MILWAUKEE SYMPHONY ORCHESTRA INC 212 W WISCONSIN AVE MILWAUKEE, WI 53203</td>
<td>39-6023436</td>
<td>501 (C) 3</td>
<td>109,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. MINDARTS DREAM ALLIANCE PO BOX 35 DENTON, MD 21629</td>
<td>85-0988396</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10. MIND THE GAP 4400 KELMARI RD SOUTH CHESTERFIELD, VA 238</td>
<td>83-2024419</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11. MINDFUL LIFE PROJECT 124 WASHINGTON AVE STE B RICHMOND, CA 94801</td>
<td>47-5066819</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. MINDFUL PHILANTHROPY INC 1501 CHERRY ST PHILADELPHIA, PA 19102</td>
<td>85-0838359</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - Yes  
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1. 124 SIBLEY AVE ARDMORE, PA 19003</td>
<td>20-8448707</td>
<td>501 (C) 3</td>
<td>22,500</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. MINDLEAPS</td>
<td>20-2041093</td>
<td>501 (C) 3</td>
<td>175,000</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. MINDROLLING CHARITABLE SOCIETY</td>
<td>84-1330685</td>
<td>501 (C) 3</td>
<td>79,000</td>
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<td>4. MINDS MATTER</td>
<td>32-0191502</td>
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<td>5. MINDS MATTER</td>
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<td>501 (C) 3</td>
<td>16,219</td>
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<td>6. MINDS MATTER NATIONAL INC</td>
<td>13-3688434</td>
<td>501 (C) 3</td>
<td>26,000</td>
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<td>FMV</td>
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<td>7. MINGEI INTERNATIONAL INC</td>
<td>23-7433357</td>
<td>501 (C) 3</td>
<td>7,500</td>
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<td>FMV</td>
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<tr>
<td>8. MINISTER ELDERS AND DEACONS OF THE REFORMED</td>
<td>13-5564117</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>9. MINISTRY CENTER</td>
<td>46-3656474</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>10. MINISTRY CENTER</td>
<td>82-2360739</td>
<td>501 (C) 3</td>
<td>10,000</td>
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<td>FMV</td>
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<tr>
<td>11. MINNEAPOLIS COLLEGE OF ART &amp; DESIGN</td>
<td>41-1607453</td>
<td>501 (C) 3</td>
<td>6,000</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12. MINNEAPOLIS FOUNDATION</td>
<td>41-6029402</td>
<td>501 (C) 3</td>
<td>11,500</td>
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<td>FMV</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
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<th></th>
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<tbody>
<tr>
<td>(1)</td>
<td>MINNEAPOLIS HEART INSTITUTE FOUNDATION</td>
<td>920 E 28TH ST STE 100 MINNEAPOLIS, MN 55407</td>
<td>41-1426406</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(2)</td>
<td>MINNEAPOLIS JEWISH FEDERATION</td>
<td>111 CHEShIRE LN HOPKINS, MN 55305</td>
<td>41-0693866</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3)</td>
<td>MINNEAPOLIS SOCIETY OF FINE ARTS</td>
<td>2400 3RD AVE S MINNEAPOLIS, MN 55404</td>
<td>41-0693915</td>
<td>501 (C) 3</td>
<td>23,250.</td>
<td>FMV</td>
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<td>(4)</td>
<td>MINNEHAHA ACADEMY</td>
<td>3100 W RIVER PKWY MINNEAPOLIS, MN 55406</td>
<td>41-0693870</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(5)</td>
<td>MINNESOTA BOYCHOIR</td>
<td>75 5TH ST W STE 411 SAINT PAUL, MN 55102</td>
<td>41-1260795</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>(6)</td>
<td>MINNESOTA HISTORICAL SOCIETY</td>
<td>345 KELLOGG BLVD W SAINT PAUL, MN 55102</td>
<td>41-0713907</td>
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<td>23,700.</td>
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<td>(7)</td>
<td>MINNESOTA LAKES MARITIME SOCIETY</td>
<td>PO BOX 1216 ALEXANDRIA, MN 56308</td>
<td>41-1967683</td>
<td>501 (C) 3</td>
<td>6,300.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8)</td>
<td>MINNESOTA LAND TRUST</td>
<td>2356 UNIVERSITY AVE W STE 240 SAINT PAUL, MN 55104</td>
<td>41-1713652</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9)</td>
<td>MINNESOTA LANDSCAPE ARBORETUM FOUNDATION</td>
<td>3675 ARBORETUM DR CHASKA, MN 55318</td>
<td>23-7081057</td>
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<td>82,000.</td>
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<tr>
<td>(10)</td>
<td>MINNESOTA ORCHESTRAL ASSOCIATION</td>
<td>1111 NICOLLET MALL MINNEAPOLIS, MN 55403</td>
<td>41-0693875</td>
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<td>120,100.</td>
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<td>(11)</td>
<td>MINNESOTA OVARIAN CANCER ALLIANCE INC</td>
<td>4604 CHICAGO AVE MINNEAPOLIS, MN 55407</td>
<td>41-1960449</td>
<td>501 (C) 3</td>
<td>7,534.</td>
<td>FMV</td>
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<td>(12)</td>
<td>MINNESOTA PUBLIC RADIO</td>
<td>480 CEDAR ST SAINT PAUL, MN 55101</td>
<td>41-0953924</td>
<td>501 (C) 3</td>
<td>415,100.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MINNESOTA STATE UNIVERSITY MANKATO FOUNDATION</td>
<td>236 WIGLEY ADMINISTRATION CTR MANKATO, MN 56001</td>
<td>41-6033423</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) MINNESOTA STATE UNIVERSITY MOORHEAD FOUNDATION</td>
<td>1104 7TH AVE S MOORHEAD, MN 56563</td>
<td>23-7101061</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MINNESOTA TEEN CHALLENGE INC</td>
<td>740 E 24TH ST MINNEAPOLIS, MN 55404</td>
<td>41-1517351</td>
<td>501 (C) 3</td>
<td>66,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) MINNESOTA VETERINARY MEDICAL FOUNDATION</td>
<td>101 BRIDGEPOINT WAY SOUTH SAINT PAUL, MN 55105</td>
<td>41-1678571</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) MINNESOTA ZOO FOUNDATION</td>
<td>13000 ZOO BLVD SAINT PAUL, MN 55124</td>
<td>51-0147653</td>
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<td>24,600.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) MINNETONKA PUBLIC SCHOOLS FOUNDATION</td>
<td>5621 COUNTY ROAD 101 MINNETONKA, MN 55345</td>
<td>41-1569085</td>
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<td>11,000.</td>
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<td>(7) MINNETONKA UNITED METHODIST CHURCH</td>
<td>17611 LAKE STREET EXTENSION MINNETONKA, MN 55345</td>
<td>41-1249710</td>
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<td>(8) MINNIE PERKINS FOUNDATION</td>
<td>6711 VASHON HWY SW VASHON, WA 98070</td>
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<td>(9) MINNIES FOOD PANTRY INC</td>
<td>671 18TH ST PLANO, TX 75074</td>
<td>27-2363211</td>
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<td>(10) MIDOT STATE UNIVERSITY DEVELOPMENT FOUNDATION</td>
<td>500 UNIVERSITY AVE W MINOT, ND 58705</td>
<td>45-0344784</td>
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<td>(11) MINT MUSEUM OF ART INC</td>
<td>2730 RANDOLPH RD CHARLOTTE, NC 28207</td>
<td>56-0670666</td>
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<td>(12) MIRA FOUNDATION USA INC</td>
<td>77 CHEROKEE RD CHARLOTTE, NC 28277</td>
<td>26-3603779</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>MIRACLE FOR MOM</td>
<td>46-1767089</td>
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<td>MIRACLE FOUNDATION INC</td>
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<td>N/A</td>
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<td>MIRACLE HILL MINISTRIES INC</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MIRACLEFEET</td>
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<td>FMV</td>
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<td>56-1866587</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MIRIAM OSBORN MEMORIAL HOME ASSOCIATION</td>
<td>13-5562312</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>MIRIAMS KITCHEN</td>
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<td>MIRMAN SCHOOL FOR GIFTED CHILDREN</td>
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<td>MISHKAN SHALOM SYNAGOGUE</td>
<td>23-2518433</td>
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<td>N/A</td>
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<td>MISS PORTERS SCHOOL INC</td>
<td>06-0646786</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
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## Part II
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>MISS RUBYS KIDS PO BOX 1007 GEORGETOWN, SC 29442</td>
<td>20-3933169</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSION AT THE EASTWARD PO BOX 206 FARMINGTON, ME 4938</td>
<td>02-0235171</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MISSION AVIATION FELLOWSHIP 112 N PILATUS LN TAMPA, FL 83687</td>
<td>95-1290983</td>
<td>501 (C) 3</td>
<td>104,851.</td>
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<tr>
<td>MISSION CHURCH OF ROSELLE 82 STRATFORD DR BLOOMINGDALE, IL 60108</td>
<td>27-4097662</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSION CITY COMMUNITY FUND PO BOX 587 SANTA CLARA, CA 95052</td>
<td>77-0162950</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSION CURE INC 245 W 107TH ST APT 15A NEW YORK, NY 10025</td>
<td>84-3043384</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSION DEL SOL PRESBYTERIAN CHURCH 1565 E WARNER RD TEMPE, AZ 85284</td>
<td>86-0623070</td>
<td>501 (C) 3</td>
<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSION DISPATCH PO BOX 641 EDMONDS, WA 98020</td>
<td>81-2035652</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MISSION DOCTORS ASSOCIATION 6102 S VICTORIA AVE LOS ANGELES, CA 90043</td>
<td>95-6110132</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MISSION DOLORES ACADEMY 3371 16TH ST SAN FRANCISCO, CA 94114</td>
<td>20-2849575</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSION EAST ASIAN NATIONAL SUPPORT PO BOX 8434 BARTLETT, IL 60103</td>
<td>23-7258008</td>
<td>501 (C) 3</td>
<td>12,500.</td>
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<tr>
<td>MISSION EMANUEL 1855 E MAIN ST. STE 14 #149 SPARTANBURG, SC 29149</td>
<td>46-3214379</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................................................

3. Enter total number of other organizations listed in the line 1 table. ..................................................................................
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I General Information on Grants and Assistance
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>MISSION FIRST INC</td>
<td>64-0797107</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 250 JACKSON, MS 39205</td>
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<td>MISSION GRADUATES</td>
<td>23-7172909</td>
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<td>10,500.</td>
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<tr>
<td>3400 16TH ST SAN FRANCISCO, CA 94103</td>
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<td>MISSION GUATEMALA INC</td>
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<td>501 (C) 3</td>
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<tr>
<td>PO BOX 441776 INDIANAPOLIS, IN 46244</td>
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<td>MISSION HAITI</td>
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<tr>
<td>PO BOX 2175 SIOUX FALLS, SD 57101</td>
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<td>620 SOUTH PARK DR LITTLETON, CO 80120</td>
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<td>MISSION HOPE</td>
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<td>2555 NORTHWINDS PKWY RM 1500 ALPHARETTA, GA</td>
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<td>MISSION HOUSE INC</td>
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<tr>
<td>800 SHETTER AVE JACKSONVILLE BEACH, FL 3225</td>
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<tr>
<td>1142 44TH ST SE GRAND RAPIDS, MI 49508</td>
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<td>MISSION NETWORK INTERNATIONAL</td>
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<tr>
<td>PO BOX 351 MIDDLESEX, NJ 8846</td>
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<td>MISSION OF HOPE</td>
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<td>FMV</td>
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<tr>
<td>1700 B AVE NE STE 101 CEDAR RAPIDS, TX 7871</td>
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<tr>
<td>PO BOX 171500 AUSTIN, IA 52402</td>
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<td></td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
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<td>1.</td>
<td>MISSION OF OUR LADY OF ANGELS</td>
<td>20-3436272</td>
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<td>2.</td>
<td>MISSION OF OUR LADY OF MERCY</td>
<td>36-2171726</td>
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<td>3.</td>
<td>MISSION PRE-BORN INC</td>
<td>20-8755673</td>
<td>501 (C) 3</td>
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<td>4.</td>
<td>MISSION PROJECTS FELLOWSHIP INC</td>
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<td>FMV</td>
<td>N/A</td>
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<td>5.</td>
<td>MISSION SAN JUAN CAPISTRANO FOUNDATION</td>
<td>23-0833283</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>MISSION SQUASH OF HOUSTON</td>
<td>45-4562711</td>
<td>501 (C) 3</td>
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<td>MISSION ST LOUIS</td>
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<td>8.</td>
<td>MISSION TEENS INC</td>
<td>23-7071094</td>
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<td>FMV</td>
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<td>9.</td>
<td>MISSION TO HAITI INC</td>
<td>59-2173214</td>
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<td>10.</td>
<td>MISSION TO THE CHILDREN INC</td>
<td>86-0910685</td>
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<td>FMV</td>
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<td>11.</td>
<td>MISSION TO THE WORLD PCA INC</td>
<td>58-3235982</td>
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<td>12.</td>
<td>MISSION WOLF</td>
<td>74-2489879</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**  
(Form 990)  

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**Part I**  
**General Information on Grants and Assistance**

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**Part II**  
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>MISSIONARIES OF AFRICA</td>
<td>1622 21ST ST NW WASHINGTON, DC 20009</td>
<td>53-0219725</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSIONARIES OF CHARITY INC</td>
<td>727 NW 17TH ST MIAMI, FL 33136</td>
<td>06-1013589</td>
<td>501 (C) 3</td>
<td>68,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MISSIONARIES OF THE POOR USA INC</td>
<td>3758 LAVISTA RD STE 100 TUCKER, GA 30084</td>
<td>20-4553442</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSIONARY SERVANTS OF THE MOST HOLY TRINIT</td>
<td>9001 NEW HAMPSHIRE AVE SILVER SPRING, MD 20</td>
<td>52-0591670</td>
<td>501 (C) 3</td>
<td>9,618.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSIONARY SOCIETY OF ST. COLUMBAN</td>
<td>1902 N CALHOUN ST COLUMBANS, NE 68056</td>
<td>47-0376616</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSIONARY SUPPORT SERVICES INC</td>
<td>3703 BENTLEY PL WAXHAW, NC 28173</td>
<td>26-3259373</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>MISSIONARY VENTURES INTERNATIONAL INC</td>
<td>1017 MAITLAND CENTER COMMONS BLVD MAITLAND,</td>
<td>59-2321060</td>
<td>501 (C) 3</td>
<td>7,650.</td>
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<td>MISSIONHURST, INC.</td>
<td>4651 NORTH 25TH STREET ARLINGTON, VA 22207</td>
<td>54-0916857</td>
<td>501 (C) 3</td>
<td>96,500.</td>
<td>FMV</td>
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<td>MISSIONS DOOR</td>
<td>750 W RAMPDEN AVE STE 518 ENGLEWOOD, CO 801</td>
<td>36-2225484</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSISSIPPI CHILDREN'S MUSEUM</td>
<td>PO BOX 55409 JACKSON, MS 39296</td>
<td>64-0850010</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MISSISSIPPI FIRST INC</td>
<td>PO BOX 1159 JACKSON, MS 39215</td>
<td>80-0310153</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MISSISSIPPI FOOD NETWORK INC</td>
<td>440 BEATTY ST JACKSON, MS 39201</td>
<td>64-0676325</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
## SCHEDULE I (Form 990) 2020

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>MISSISSIPPI UNIVERSITY FOR WOMEN FOUNDATION</td>
<td>23-7050717</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MISSISSIPPI VALLEY CONSERVANCY INC</td>
<td>39-1871201</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>MISSOURI FOOD BANK &amp; COMMUNITY CENTER INCOR</td>
<td>81-0414143</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>MISSOURI INTERNATIONAL SCHOOL</td>
<td>81-0501614</td>
<td>501 (C) 3</td>
<td>256,000.</td>
<td>FMV</td>
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<td>MISSOURI BOTANICAL GARDEN BOARD OF TRUSTEES</td>
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<td>MISSOURI HISTORICAL SOCIETY JEFFERSON MEMOR</td>
<td>43-0654866</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

JSA 0E1288 1.000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

>>> Attach to Form 990.

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

PART I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

PART II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</table>

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3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▸ Attach to Form 990.

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---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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Schedule I (Form 990) 2020

JSA 0E1288 1,000

18674H 1467 V 20-7.21
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(Form 990)

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   - No

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(8) MONASTERY OF ST. CLARE</td>
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<td>(9) MONCLOVA ROAD BAPTIST CHURCH</td>
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<td>(10) MORRELL CHEMICAL SENSES CENTER</td>
<td>23-2020897</td>
<td>501 (C) 3</td>
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<tr>
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<td>15,000. FMV</td>
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<tr>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
# SCHEDULE I
## (Form 990)
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Name of the organization

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes** ☑  
   - **No**  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>MONMOUTH CONSERVATION FOUNDATION</td>
<td>22-2185314</td>
<td>501 (C) 3</td>
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<td>MONROE COUNTY MEALS ON WHEELS INC</td>
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<td>FMV</td>
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<td>MONROE COUNTY SHELTER CARE INC</td>
<td>22-7319589</td>
<td>501 (C) 3</td>
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<td>10,000</td>
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<td>MONSIGNOR FARRELL HIGH SCHOOL</td>
<td>27-0671459</td>
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<td>81-2889645</td>
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<td>MONTANA CHILDREN'S HOME &amp; HOSPITAL</td>
<td>81-0231789</td>
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<td>22-1487582</td>
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<td>FMV</td>
<td>N/A</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- **Attach to Form 990.**
- **Go to www.irs.gov/Form990 for the latest information.**

#### Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

#### Employer identification number
23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Number</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>MONTCLAIR FILM FESTIVAL INC</td>
<td>27-1732322</td>
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<td>12,500</td>
<td>FMV</td>
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<tr>
<td>2</td>
<td>MONTCLAIR FOUNDATION INC</td>
<td>22-6310859</td>
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<td>8,000</td>
<td>FMV</td>
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<td>3</td>
<td>MONTCLAIR FREE PUBLIC LIBRARY FOUNDATION</td>
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<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<td>4</td>
<td>MONTCLAIR KIMBERLY ACADEMY FOUNDATION</td>
<td>23-7365263</td>
<td>501 (C) 3</td>
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<td>5</td>
<td>MONTCLAIR SCHOLARSHIP FUND INC</td>
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<td>FMV</td>
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<td>6</td>
<td>MONTCLAIR STATE UNIVERSITY FOUNDATION INC</td>
<td>22-6017209</td>
<td>501 (C) 3</td>
<td>17,900</td>
<td>FMV</td>
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<td>7</td>
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<td>62-0475841</td>
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<td>8</td>
<td>MONTEBELLO POLICE ATHLETIC AND ACTIVITIES L</td>
<td>46-4368721</td>
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<td>FMV</td>
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<td>9</td>
<td>MONTECITO RETIREMENT ASSOCIATION</td>
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<td>10</td>
<td>MONTEREY BAY AQUARIUM FOUNDATION</td>
<td>94-2487469</td>
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<td>11</td>
<td>MONTEREY PENINSULA FOUNDATION</td>
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<td>12</td>
<td>MONTEREY PENINSULA UNIFIED SCHOOL DISTRICT</td>
<td>77-0320712</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467  V 20-7.21
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) MONTESANO PRESBYTERIAN CHURCH</td>
<td>91-0906334</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 110 MONTESAN, WA 98563</td>
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<td>(2) MONTESORI ASSOCIATION OF NEW YORK</td>
<td>13-1970585</td>
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<td>FMV</td>
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<td>416 E 80TH ST NEW YORK, NY 10075</td>
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<td>(3) MONTESORI COUNTRY SCHOOLS</td>
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<td>FMV</td>
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<td>(4) MONTESORI ETC INC</td>
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<td>(5) MONTESORI TRAINING CENTER OF MINNESOTA INC</td>
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<td>(6) MONTEVERDE FRIENDS U S INC</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 1308 GREENFIELD, MA 1302</td>
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<td>(7) MONTGOMERY COLLEGE FOUNDATION INC</td>
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<td>9221 CORPORATE BLVD ROCKVILLE, MD 20850</td>
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<td>(8) MONTGOMERY COUNTY FOOD BANK INC</td>
<td>76-0153892</td>
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<td>12,500.</td>
<td>FMV</td>
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<tr>
<td>1 FOOD FOR LIFE WAY CONROE, TX 77385</td>
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<td>(9) MONTGOMERY COUNTY FOUNDATION INC</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4 SENTRY PKW STE 302 BLUE BELL, PA 19422</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 1889 MERIDIAN, MS 39302</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>19W070 16TH ST LOMBARDO, IL 60148</td>
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<td>(12) MONTROSE COUNTY SCHOOL DISTRICT</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MCD C/O MIKE MADDEN, CONTROLLER MONTROSE,</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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## General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>16731 WOODGATE RD MONTROSE, CO 81401</td>
<td>94-2868914</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) MONTSERRAT COLLEGE OF ART INC</td>
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<td></td>
<td></td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>23 ESSEX ST BEVERLY, MA 01915</td>
<td>52-1859814</td>
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<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) MONTSHIRE MUSEUM OF SCIENCE</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1 MONTSHIRE RD NORWICH, VT 0555</td>
<td>22-3776772</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>(4) MONTVIEW BOULEVARD PRESBYTERIAN CHURCH</td>
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<td>1980 DAHLIA ST DENVER, CO 80220</td>
<td>84-0407664</td>
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<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(5) MONUMENT CEMETERY CHARITABLE TR</td>
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<td>812 BRIDGEBORO RD BEVERLY, NJ 0010</td>
<td>47-6350180</td>
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<td>1990 MARKET ST CONCORD, CA 94520</td>
<td>41-2111171</td>
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<td>(7) MOODY BIBLE INSTITUTE OF CHICAGO</td>
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<td>820 N LA SALLE DR CHICAGO, IL 60610</td>
<td>36-2167792</td>
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<td>(8) MOONBOX PRODUCTIONS INC</td>
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<td>209 BATTERY ST BURLINGTON, VT 0401</td>
<td>45-3114466</td>
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<td>(9) MOORE COLLEGE OF ART AND DESIGN</td>
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<td>20TH THE PARKWAY PHILADELPHIA, PA 19103</td>
<td>23-1352236</td>
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<td>(10) MOORESTOWN FRIENDS SCHOOL</td>
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<td>110 E MAIN ST MOORESTOWN, NJ 8057</td>
<td>21-0634967</td>
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<td>(11) MOORINGS PARK FOUNDATION INC</td>
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<td>120 MOORINGS PARK DR NAPLES, FL 34105</td>
<td>26-3631295</td>
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<td>47,000.</td>
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<td>(12) MOORINGS PRESBYTERIAN CHURCH</td>
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<td>791 HARBOUR DR NAPLES, FL 34103</td>
<td>59-1309473</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>MOOSE MOUNTAINS REGIONAL GREENWAYS</td>
<td>02-0515870</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MORAVIAN COLLEGE</td>
<td>24-0795460</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>MORAVIAN MANOR INC</td>
<td>14-0810461</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MORE THAN WORDS INC</td>
<td>04-2784985</td>
<td>501 (c) 3</td>
<td>74,760.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MOREHEAD SCHOLARSHIP FOUNDATION</td>
<td>56-2462593</td>
<td>501 (c) 3</td>
<td>5,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MORGAN ADAMS FOUNDATION</td>
<td>20-0165051</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MORGAN MEMORIAL GOODWILL INDUSTRIES INC</td>
<td>04-2106765</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MORGAN STANLEY GLOBAL IMPACT FUNDING TRUST</td>
<td>52-7082731</td>
<td>501 (c) 3</td>
<td>34,326,303.</td>
<td>FMV</td>
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<td>MORIAR CONGREGATION</td>
<td>36-2935511</td>
<td>501 (c) 3</td>
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<tr>
<td>MORIAR SCHOOL OF ENGLEWOOD</td>
<td>22-1766272</td>
<td>501 (c) 3</td>
<td>10,625.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>MORNING STAR CATHOLIC SCHOOL PINELLAS PARK</td>
<td>59-1274421</td>
<td>501 (c) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MORNING STAR PREGNANCY SERVICES</td>
<td>23-7336053</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MORNING STAR RISING INC</td>
<td>4612 S CLAIBORNE AVE NEW ORLEANS, LA 70125</td>
<td>72-1475326</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>MORNINGSIDE ACADEMY</td>
<td>901 LEMORA ST SEATTLE, WA 98121</td>
<td>91-1183562</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>MORRIS AND ROSE CASKEY TORAH ACADEMY OF GRE</td>
<td>742 ARGOyle RD WYNNEWOOD, PA 19096</td>
<td>23-1645684</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>MORRIS HABITAT FOR HUMANITY</td>
<td>274 SOUTH SALEM ST RANDOLPH, NJ 7869</td>
<td>22-2675802</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>MORRIS MUSEUM INC</td>
<td>6 NORMANDY HEIGHTS RD MORRISTOWN, NJ 7960</td>
<td>22-1514241</td>
<td>501 (c) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>MORRISON HEIGHTS BAPTIST CHURCH</td>
<td>3000 HAMPSTEAD BOULEVARD CLINTON, MS 39056</td>
<td>64-6011952</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>MORRISTOWN-BEARD SCHOOL</td>
<td>70 WHIPPANY RD MORRISTOWN, NJ 7960</td>
<td>22-1487252</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MORRYS CAMP INC</td>
<td>1 GATEWAY PLS STE 1D PORT CHESTER, NY 10573</td>
<td>13-3851126</td>
<td>501 (c) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>MORSELIFE FOUNDATION INC</td>
<td>4847 DAVID S MACK DR WEST PALM BEACH, FL 33</td>
<td>59-2774476</td>
<td>501 (c) 3</td>
<td>286,000.</td>
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<td>10</td>
<td>MORTGAGE MIRACLES FOR KIDS INC</td>
<td>17848 SKY PARK CIR STE C IRVINE, CA 92614</td>
<td>91-2160616</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>11</td>
<td>MORTON ARBORETUM</td>
<td>4100 ILLINOIS ROUTE 53 LISLE, IL 60532</td>
<td>36-1505770</td>
<td>501 (c) 3</td>
<td>159,000.</td>
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<td>12</td>
<td>MORTON PLANT MEASE HEALTH CARE FOUNDATION I</td>
<td>1200 DRUID RD S BELLEAIR, FL 33756</td>
<td>59-1751535</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
<td>☑ Yes ☐ No</td>
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<table>
<thead>
<tr>
<th>Name of the organization</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>MOSSAIC THEATER COMPANY OF DC</td>
<td>1333 H ST NE WASHINGTON, DC 20002</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>MOSAIC THEATER COMPANY OF DC</td>
<td>1333 H ST NE WASHINGTON, DC 20002</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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<td>MOSAIC THEATER COMPANY OF DC</td>
<td>1333 H ST NE WASHINGTON, DC 20002</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>MOSAIC THEATER COMPANY OF DC</td>
<td>1333 H ST NE WASHINGTON, DC 20002</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOSSAIC THEATER COMPANY OF DC</td>
<td>1333 H ST NE WASHINGTON, DC 20002</td>
<td>501 (C) 3</td>
<td>6,000</td>
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<td>MOST HOLY TRINITY ROMAN CATHOLIC CHURCH</td>
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<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
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<tr>
<td>MOST SACRED HEART CATHOLIC CHURCH EUREKA</td>
<td>350 E 4TH ST EUREKA, MO 63025</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTE MARINE LABORATORY</td>
<td>1600 KEN THOMPSON PKWY SARASOTA, FL 34236</td>
<td>501 (C) 3</td>
<td>18,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTHER AND UNBORN BABY CARE OF LONG ISLAND</td>
<td>35 E WILLOW ST MASSAPEQUA, NY 11768</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTHER BROC K ARTS AND COMMUNITY CENTER INC</td>
<td>12 SCHOOL ST DEDHAM, MA 2026</td>
<td>501 (C) 3</td>
<td>5,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTHER CABRINI LEAGUE</td>
<td>434 W DEMING PL CHICAGO, IL 60614</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

JSA

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18674H 1467 V 20-7.21
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOTHER KAULAN, 15371 ELVINA DR, SAN LEANDRO, CA 94579</td>
<td>26-4723512</td>
<td>501 (C) 3</td>
<td>18,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTHER TERESA OF CALCUTTA CATHOLIC CHURCH, 2014 NW 46TH ST, TOPEKA, KS 66618</td>
<td>33-1096344</td>
<td>501 (C) 3</td>
<td>10,566</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTHERS AGAINST DRUNK DRIVING, 511 E JOHN CARPENTER Fwy, IRVING, TX 75062</td>
<td>94-2707273</td>
<td>501 (C) 3</td>
<td>23,700</td>
<td>FMV</td>
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<td>MOTHERS HOME INC, 51 N MACDADE BLVD, DARBY, PA 19023</td>
<td>23-2654296</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>MOTHERS2MOTHERS INTERNATIONAL INC, 1622 N CURSON AVE, LOS ANGELES, CA 90046</td>
<td>30-0545760</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>MOTION PICTURE AND TELEVISION FUND, 23388 MULHOLLAND DR, WOODLAND HILLS, CA 9136</td>
<td>95-1652916</td>
<td>501 (C) 3</td>
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<tr>
<td>MOTORCYCLE RELIEF PROJECT, PO BOX 3220, EVERGREEN, CO 80437</td>
<td>47-2661987</td>
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<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOTT HAVEN ACADEMY CHARTER SCHOOL, 170 BROWN PL, BRONX, NY 10454</td>
<td>11-3833210</td>
<td>501 (C) 3</td>
<td>55,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOTUS THEATER, PO BOX 6080, BOULDER, CO 80306</td>
<td>90-0716569</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>MOUNT FOU, PO BOX 15013, SAINT LOUIS, MO 63110</td>
<td>27-1834162</td>
<td>501 (C) 3</td>
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<td>MOUNDS PARK ACADEMY, 2051 LARRENTEUR AVE, SAINT PAUL, MN 55109</td>
<td>41-1420915</td>
<td>501 (C) 3</td>
<td>65,000</td>
<td>FMV</td>
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<td>MOUNT AUBURN HOSPITAL, 330 MOUNT AUBURN ST, CAMBRIDGE, MA 2138</td>
<td>04-2103606</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? "Yes" □  "No" □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>MOUNT BAKER THEATRE</td>
<td>104 N COMMERCIAL ST BELLINGHAM, WA 98225</td>
<td>91-1208766</td>
<td>501 (C) 3</td>
<td>24,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT BETHEL UNITED METHODIST CHURCH</td>
<td>3239 70TH ST E INVER GROVE HEIGHTS, MN 5507</td>
<td>41-0878258</td>
<td>501 (C) 3</td>
<td>13,750.</td>
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<td>MOUNT CALVARY EPISCOPAL CHURCH</td>
<td>125 NORTH 25TH STREET CAMP HILL, PA 17011</td>
<td>23-1539358</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT CALVARY LUTHERAN CHURCH</td>
<td>472 MASSACHUSETTS AVE ACTON, MA 1720</td>
<td>04-2217891</td>
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<td>45,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT CARMEL HEALTH SYSTEM FOUNDATION</td>
<td>6150 E BROAD ST # W381N COLUMBUS, OH 43213</td>
<td>31-1113966</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>MOUNT CARMEL HIGH SCHOOL</td>
<td>6410 S DANTE AVE CHICAGO, IL 60637</td>
<td>36-2171161</td>
<td>501 (C) 3</td>
<td>143,640.</td>
<td>FMV</td>
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<td>MOUNT DESERT ISLAND BIOLOGICAL LABORATORY</td>
<td>PO BOX 35 SALSBURY COVE, ME 4672</td>
<td>01-0202467</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT DESERT ISLAND HOSPITAL</td>
<td>10 WAYMAN LN BAR HARBOR, ME 4609</td>
<td>01-0211797</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT GRACE LAND CONSERVATION TRUST INC</td>
<td>1461 OLD KEENE RD ATHOL, MA 1331</td>
<td>04-2938967</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNT HERMON ASSOCIATION INCORPORATED</td>
<td>PO BOX 413 MOUNT HERMON, CA 95041</td>
<td>94-6000955</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOUNT HERMON BAPTIST CHURCH</td>
<td>4385 FRANKLIN TPKE DAVENILLE, VA 24540</td>
<td>54-0616694</td>
<td>501 (C) 3</td>
<td>76,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MOUNT MARTY UNIVERSITY</td>
<td>1105 W 8TH ST YANKTON, SD 57078</td>
<td>46-0283336</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
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<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
</tr>
<tr>
<td>(1)</td>
<td>MOUNT MARY UNIVERSITY INC</td>
<td>2900 N MENOMONEE RIVER PKWY MILWAUKEE, WI 53202</td>
<td>39-0806154</td>
<td>501 (C) 3</td>
<td>291,700.</td>
<td>FMV</td>
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<td>(2)</td>
<td>MOUNT MERCY UNIVERSITY</td>
<td>1330 ELMHURST DR NE CEDAR RAPIDS, IA 52402</td>
<td>42-0681046</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>(3)</td>
<td>MOUNT MICHAEL BENEDICTINE SCHOOL</td>
<td>22520 MOUNT MICHAEL RD ELKHORN, NE 68022</td>
<td>30-0299031</td>
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<td>(4)</td>
<td>MOUNT NOTRE DAME HIGH SCHOOL</td>
<td>711 S COLUMBIA AVE CINCINNATI, OH 45215</td>
<td>31-0683700</td>
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<td>(5)</td>
<td>MOUNT OLIVE BAPTIST CHURCH</td>
<td>11212 LEE ROAD 54 AUBURN, AL 36830</td>
<td>63-0776493</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(6)</td>
<td>MOUNT OLIVE LUTHERAN CHURCH</td>
<td>7301 N 28TH AVE OMAHA, NE 68112</td>
<td>47-6036101</td>
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<td>FMV</td>
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<td>(7)</td>
<td>MOUNT PISGAH ACADEMY</td>
<td>75 ACADEMY DR CANDLER, NC 28715</td>
<td>56-0713794</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>(8)</td>
<td>MOUNT PISGAH UNITED METHODIST CHURCH</td>
<td>1100 MOUNT PISGAH DR MILDOWTHIAN, VA 23113</td>
<td>54-1069421</td>
<td>501 (C) 3</td>
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<td>(9)</td>
<td>MOUNT PLEASANT CHURCH OF GOD</td>
<td>936 WEST MAIN STREET MT PLEASANT, PA 15666</td>
<td>25-6094365</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>(10)</td>
<td>MOUNT PLEASANT PRESBYTERIAN CHURCH</td>
<td>302 HIBBEN ST MOUNT PLEASANT, SC 29464</td>
<td>57-0528685</td>
<td>501 (C) 3</td>
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<td>(11)</td>
<td>MOUNT SAINT JOSEPH ACADEMY</td>
<td>120 W WISSAHICKON AVE FLOURTOWN, PA 19031</td>
<td>23-1352663</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>(12)</td>
<td>MOUNT SAINT JOSEPH HIGH SCHOOL INC</td>
<td>4403 FREDERICK AVE BALTIMORE, MD 21229</td>
<td>52-1169308</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) MOUNT SINAI HEALTH SYSTEM EXECUTIVE V P FOR</td>
<td>46-4248304</td>
<td>501 (C) 3</td>
<td>82,000.</td>
<td>FMV</td>
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<td>(3) MOUNT SINAI HOSPITAL</td>
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<td>(4) MOUNT ST MARY ACADEMY CORPORATION</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) MOUNT STERLING COMMUNITY CENTER</td>
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<td>(6) MOUNT TABOR UNITED METHODIST CHURCH</td>
<td>20-4072222</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) MOUNT VERNON BAPTIST CHURCH</td>
<td>54-0794657</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) MOUNT VERNON LADIES ASSOCIATION OF THE UNIO</td>
<td>44-0564701</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(10) MOUNT VERNON PRESBYTERIAN FOUNDATION INC</td>
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<td>(11) MOUNT WASHINGTON OBSERVATORY</td>
<td>02-0225135</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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</tbody>
</table>

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SCHEDULE I (Form 990)  
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number: 23-2888152

Part I  General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?   Yes [X] No

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2</td>
<td>MOUNTAIN HEIGHTS CHURCH INC</td>
<td>83-3663621</td>
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<td>MOUNTAIN LAKE COMMUNITY SERVICE INC</td>
<td>59-2868636</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>MOUNTAIN LIFE EVANGELICAL FREE CHURCH</td>
<td>87-0552060</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>MOUNTAIN PLAY ASSOCIATION</td>
<td>94-6092215</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>MOUNTAIN RESOURCE CENTER INC</td>
<td>84-1178699</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>MOUNTAIN STATES LEGAL FOUNDATION</td>
<td>84-0736725</td>
<td>501 (C) 3</td>
<td>106,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>MOUNTAIN TOWN STAGES</td>
<td>87-0669814</td>
<td>501 (C) 3</td>
<td>10,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>MOUNTAIN VIEW CHAPEL</td>
<td>23-2450250</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>MOUNTAIN VIEW EDUCATIONAL FOUNDATION</td>
<td>77-0006770</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>MOUNTAIN VIEW LOS ALTOS HIGH SCHOOL FOUNDAT</td>
<td>94-2848246</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ........................................... [ ]

3. Enter total number of other organizations listed in the line 1 table ........................................... [ ]

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes** □  **No** □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>MOUNTAIN VIEW PRESBYTERIAN CHURCH</td>
<td>94-2939680</td>
<td>501 (c) 3</td>
<td>9,410.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2.</td>
<td>MOUNTAIN VIEW UNITED METHODIST CHURCH</td>
<td>84-0531078</td>
<td>501 (c) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>MOUNTAINTRUE</td>
<td>56-1422691</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4.</td>
<td>MOVEMENT ALLIANCE PROJECT</td>
<td>26-0307123</td>
<td>501 (c) 3</td>
<td>42,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>MOVEMENT OF YOUTH INCORPORATED</td>
<td>26-2399990</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6.</td>
<td>MOVEMENT STRATEGY CENTER</td>
<td>20-1037643</td>
<td>501 (c) 3</td>
<td>450,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>MOVING IMAGE ARTS AND EDUCATION</td>
<td>20-5239085</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>MOVING MOUNTAINE INC</td>
<td>26-1407568</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9.</td>
<td>MOVING PICTURE INSTITUTE</td>
<td>20-3237801</td>
<td>501 (c) 3</td>
<td>2,143,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10.</td>
<td>MOVING TRADITIONS</td>
<td>34-2015014</td>
<td>501 (c) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>MOZILLA FOUNDATION</td>
<td>331 E EVELYN AVE MOUNTAIN VIEW, CA 94041</td>
<td>20-0097189</td>
<td>501 (c) 3</td>
<td>25,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12.</td>
<td>MPK INC</td>
<td>95-4764370</td>
<td>501 (c) 3</td>
<td>350,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MPN Research Foundation</td>
<td>36-4330967</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. MPT Foundation Inc</td>
<td>52-1224503</td>
<td>501 (C) 3</td>
<td>18,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. MRCC Foundation Inc</td>
<td>81-1563864</td>
<td>501 (C) 3</td>
<td>5,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>4. MRelief</td>
<td>47-3559589</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>5. MS Foundation for Women Inc</td>
<td>23-7252609</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>6. MSU Foundation for Women High School</td>
<td>11-1805334</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7. MSU-US</td>
<td>54-1901882</td>
<td>501 (C) 3</td>
<td>744,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>8. MSU Foundation Inc</td>
<td>31-1003236</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>9. Mt Aucutney Outdoors Inc</td>
<td>47-5085988</td>
<td>501 (C) 3</td>
<td>19,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10. Mt Baker Planned Parenthood</td>
<td>91-0846274</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>11. Mt Bethel Christian Academy Inc</td>
<td>46-3839116</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12. Mt Bethel United Methodist Church and Academy</td>
<td>58-6106043</td>
<td>501 (C) 3</td>
<td>102,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| MT CARMEL LUTHERAN CHURCH  
8424 W CENTER ST MILWAUKEE, WI 53222  
39-0945792  
501 (C) 3  
36,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT DIABLO UNITARIST UNIVERSALIST CHURCH  
55 ECKLEY LN WALNUT CREEK, CA 94596  
94-1550533  
501 (C) 3  
5,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT HEALTHY ALLIANCE INC  
PO BOX 31028 CINCINNATI, OH 45231  
26-0247231  
501 (C) 3  
7,835.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT OLVET UNITED METH CHURCH  
1500 N GLEBE RD ARLINGTON, VA 22207  
54-0564100  
501 (C) 3  
30,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT PIGSAH UNITED METHODIST CHURCH  
2850 OLD ALABAMA RD ALPHARETTA, GA 30022  
58-1457408  
501 (C) 3  
36,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT PLEASANT COMMUNITY CHURCH  
1400 W BROOMFIELD ST MOUNT PLEASANT, MI 488  
38-2318221  
501 (C) 3  
14,300.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT PLEASANT MISSIONARY BAPTIST CHURCH OF OR  
4077 PRINCE HALL BLVD ORLANDO, FL 32811  
59-2344793  
501 (C) 3  
6,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT SAN ANTONIO COLLEGE FOUNDATION  
1100 N GRAND AVE WALNUT, CA 91789  
85-6196020  
501 (C) 3  
8,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT ST MARY SEMINARY OF THE WEST AThENAEUM  
6616 BEECHMONT AVE CINCINNATI, OH 45230  
31-0537076  
501 (C) 3  
11,250.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT TAMALPAIS PRIMARY SCHOOL ELEMENTARY  
100 HARVARD AVE MILL VALLEY, CA 94941  
94-2356968  
501 (C) 3  
12,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT WASHINGTON PEDIATRIC HOSPITAL INC  
1708 W ROGERS AVE BALTIMORE, MD 21209  
52-0591483  
501 (C) 3  
5,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| MT ZION UNITED METHODIST CHURCH  
12430 SCAGGSVILLE RD HIGHLAND, MD 20777  
52-0748639  
501 (C) 3  
12,100.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

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## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. MT. HOREB UNITED METHODIST CHURCH</td>
<td>1205 OLD CHEROKEE ROAD LEXINGTON, SC 29072</td>
<td>57-0697574 501 (C) 3</td>
<td>8,400. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td>2. MT. LEBANON UNITED LUTHERAN CHURCH</td>
<td>975 WASHINGTON ROAD PITTSBURGH, PA 15228</td>
<td>25-1048766 501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. MT. VERNON PRESBYTERIAN CHURCH</td>
<td>471 MOUNT VERNON HIGHWAY NE ATLANTA, GA 303</td>
<td>58-1562305 501 (C) 3</td>
<td>38,750. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. MU CHARTER FOUNDATION</td>
<td>4300C UNIVERSITY WAY NE SEATTLE, WA 98105</td>
<td>46-5667853 501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. MUDDY FOND TRUST INC</td>
<td>35 ELDER AVE KINGSTON, MA 2364</td>
<td>83-2847030 501 (C) 3</td>
<td>650,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. MUHLINBERG COLLEGE</td>
<td>2400 CHEW ST ALLENTOWN, PA 18104</td>
<td>23-1352664 501 (C) 3</td>
<td>32,600. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. MUJERES UNIDAS Y ACTIVAS</td>
<td>3543 18TH ST STE 3 SAN FRANCISCO, CA 94110</td>
<td>20-2986926 501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. MUKILTEO PRESBYTERIAN CHURCH</td>
<td>4514 84TH STREET SW MUKILTEO, WA 98275</td>
<td>81-6069199 501 (C) 3</td>
<td>5,200. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. MUKTI MISSION INC</td>
<td>PO BOX 4912 CLINTON, NJ 8809</td>
<td>23-1409702 501 (C) 3</td>
<td>9,520. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. MULY CHILDRENS FAMILY USA INC</td>
<td>3000 OLD ALABAMA RD ALPHARETTA, GA 30022</td>
<td>20-4105702 501 (C) 3</td>
<td>12,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>11. MULTIDISCIPLINARY ASSOCIATION FOR PSYCHEDEL</td>
<td>1115 MISSION ST SANTA CRUZ, CA 95060</td>
<td>59-2751953 501 (C) 3</td>
<td>661,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. MULTIPLE SCLEROSIS ASSOCIATION OF AMERICA I</td>
<td>375 KINGS HWY N CHERRY HILL, NJ 8034</td>
<td>22-1912812 501 (C) 3</td>
<td>12,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

**1.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

**2.** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>MULTIPLIER</strong></td>
<td>91-2166435</td>
<td>501 (C) 3</td>
<td>333,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. <strong>MULTI-SERVICE CENTER</strong></td>
<td>23-7120815</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3. <strong>MUNDS PARK COMMUNITY CHURCH ASSOCIATION</strong></td>
<td>86-0499122</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. <strong>MUNSON HEALTHCARE FOUNDATIONS</strong></td>
<td>38-2642724</td>
<td>501 (C) 3</td>
<td>113,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5. <strong>MUNSTER CHURCH</strong></td>
<td>35-0998739</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6. <strong>MURRAY STATE UNIVERSITY FOUNDATION</strong></td>
<td>61-6053844</td>
<td>501 (C) 3</td>
<td>19,446</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7. <strong>MUSCULAR DYSTROPHY ASSOCIATION</strong></td>
<td>13-1665552</td>
<td>501 (C) 3</td>
<td>30,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8. <strong>MUSEUM ASSOCIATES</strong></td>
<td>95-2264067</td>
<td>501 (C) 3</td>
<td>15,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. <strong>MUSEUM OF AMERICAN FINANCE</strong></td>
<td>13-3540880</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. <strong>MUSEUM OF ART OF Ogunquit</strong></td>
<td>02-6010628</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. <strong>MUSEUM OF ARTS &amp; SCIENCES</strong></td>
<td>59-1022050</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. <strong>MUSEUM OF CHINESE IN THE AMERICA</strong></td>
<td>11-2517055</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [ ]
   - No [x]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MUSEUM OF CONTEMPORARY ART 250 S GRAND AVE LOS ANGELES, CA 90012</td>
<td>95-3433820</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>MUSEUM OF CONTEMPORARY ART JACKSONVILLE INC 333 N LAURA ST JACKSONVILLE, FL 32202</td>
<td>59-0689705</td>
<td>501 (C) 3</td>
<td>6,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON, MA 2115</td>
<td>04-2103607</td>
<td>501 (C) 3</td>
<td>106,797.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>MUSEUM OF FINE ARTS HOUSTON PO BOX 6826 HOUSTON, TX 77265</td>
<td>74-1109655</td>
<td>501 (C) 3</td>
<td>75,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>MUSEUM OF FLIGHT FOUNDATION 9404 E MARGINAL WAY S TUKWILA, WA 98108</td>
<td>91-0785826</td>
<td>501 (C) 3</td>
<td>69,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>MUSEUM OF JEWISH HERITAGE A LIVING MEMORIAL 36 BATTERY PL NEW YORK, NY 10280</td>
<td>13-3376265</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>MUSEUM OF MODERN ART 11 W 53RD ST NEW YORK, NY 10019</td>
<td>13-1624100</td>
<td>501 (C) 3</td>
<td>76,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>MUSEUM OF NEW MEXICO FOUNDATION PO BOX 2065 SANTA FE, NM 87504</td>
<td>85-0202503</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>MUSEUM OF SCIENCE 1 SCIENCE PARK BOSTON, MA 2114</td>
<td>04-2103916</td>
<td>501 (C) 3</td>
<td>125,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10</td>
<td>MUSEUM OF SCIENCE AND INDUSTRY 5700 S LAKE SHORE OR CHICAGO, IL 60637</td>
<td>36-2167797</td>
<td>501 (C) 3</td>
<td>67,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>MUSEUM OF THE AMERICAN REVOLUTION 101 S 3RD ST PHILADELPHA, PA 19106</td>
<td>23-2773714</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>MUSEUM OF THE BIBLE INC 7507 SW 44TH ST OKLAHOMA CITY, OK 73179</td>
<td>27-3444987</td>
<td>501 (C) 3</td>
<td>101,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

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<tbody>
<tr>
<td>(1) MUSEUM OF THE CITY OF NEW YORK</td>
<td>1220 5TH AVE NEW YORK, NY 10029</td>
<td>13-1624098</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) MUSIC ACADEMY OF THE WEST</td>
<td>1070 FAIRWAY RD SANTA BARBARA, CA 93108</td>
<td>95-1525814</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) MUSIC ASSOCIATES OF ASPEN INC</td>
<td>225 MUSIC SCHOOL RD ASPEN, CO 81611</td>
<td>84-0445087</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) MUSIC FOR LIFE INSTITUTE</td>
<td>PO BOX 29690 BELLINGHAM, WA 98228</td>
<td>31-1746269</td>
<td>501 (C) 3</td>
<td>10,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) MUSIC IN THE SOMERSET HILLS</td>
<td>PO BOX 729 BERNARDSVILLE, NJ 7924</td>
<td>27-3418121</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) MUSIC INSTITUTE OF CHICAGO</td>
<td>1702 SHERMAN AVE EVANSTON, IL 60201</td>
<td>36-2374224</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) MUSIC MISSION KIEV INC</td>
<td>286 WILSHIRE BLVD CASSELBERRY, FL 32707</td>
<td>59-3278168</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) MUSIC WORCESTER INC</td>
<td>319 MAIN ST WORCESTER, MA 1608</td>
<td>04-2171207</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) MUSICA SACRA LIMITED</td>
<td>PO BOX 381336 CAMBRIDGE, MA 2238</td>
<td>04-2656831</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) MUSICAL EMPOWERMENT INC</td>
<td>117 W MAIN ST CABRERO, NC 27510</td>
<td>45-4589282</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) MUSICAL INSTRUMENT MUSEUM</td>
<td>4725 E MAYO BLVD PHOENIX, AZ 85050</td>
<td>16-1743588</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) MUSICIANS FOR HEALTH</td>
<td>4 WOODCREEK DR BLUE ASH, OH 45241</td>
<td>81-4738891</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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## Part I
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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. MUSICOPIA INC  
1700 MARKET ST STE 1005 PHILADELPHIA, PA 19  
23-7397981  
501 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 2. MUSKOGON COUNTY COMMUNITY FOUNDATION  
425 W WESTERN AVE STE 200 MUSKEGON, MI 4944  
38-6114135  
501 (C) 3  
7,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 3. MUSKINGUM UNIVERSITY  
163 STORMONT ST NEW CONCORD, OH 43762  
31-4379515  
501 (C) 3  
25,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 4. MUSLIM ADVOCATES  
PO BOX 34440 WASHINGTON, DC 20043  
30-0298794  
501 (C) 3  
9,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 5. MUSLIM COMMUNITY CENTER OF PORTLAND  
PO BOX 12214 PORTLAND, OR 97212  
91-1854576  
501 (C) 3  
5,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 6. MUSO INC  
3254 19TH ST FL 2 SAN FRANCISCO, CA 94110  
20-3171837  
501 (C) 3  
179,800.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 7. MUSK MINISTRIES INC  
PO BOX 1717 MARIETTA, GA 30061  
58-2034725  
501 (C) 3  
399,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 8. MUSTARD SEED COMMUNITIES INC  
29 JANES AVE MEDFIELD, MA 2052  
58-1657207  
501 (C) 3  
8,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 9. MUSTARD SEED INTERNATIONAL  
PO BOX 91569 AUSTIN, TX 78709  
95-2053950  
501 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 10. MUSTARD SEED SCHOOL CHRISTIAN URBAN EDUCATION  
422 WILLOW AVE HOBOKEN, NJ 7030  
22-2267469  
501 (C) 3  
167,600.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 11. MUSTARD TREE MINISTRIES INC  
605 TIMBER RIDGE DR HIXSON, TN 37343  
46-0683149  
501 (C) 3  
44,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 12. MUTTVILLE  
255 ALABAMA ST SAN FRANCISCO, CA 94103  
26-0146747  
501 (C) 3  
168,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

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1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes [x]  
   - No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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</thead>
<tbody>
<tr>
<td>(1)</td>
<td>MV YOUTH INC</td>
<td>46-5177674</td>
<td>501 (C) 3</td>
<td>26,795.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>MWANA VILLAGES US INC</td>
<td>47-3778624</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>MWLA</td>
<td>95-2668485</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4)</td>
<td>MY BROTHERS TABLE INC</td>
<td>04-2794047</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td>MY EXTENDED FAMILY</td>
<td>3315 AVENUE N BROOKLYN, NY 11234</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td>MY JOYFUL HEART NFP</td>
<td>02-0118912</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td>MY NEW RED SHOES</td>
<td>330 TWIN DOLPHIN DR STE 135 REDWOOD CITY, C</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(8)</td>
<td>MY SISTERS PLACE INC</td>
<td>13-2960628</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td>MY STEALTHY FREEDOM ORGANIZATION</td>
<td>497 MARLBOROUGH RD BROOKLYN, NY 11226</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td>MYAGRO FARMS</td>
<td>45-5267449</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td>MYASTHENA GRAVIS FOUNDATION OF AMERICA INC</td>
<td>83-1183064</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12)</td>
<td>MYCATHOLICDOCTOR FOUNDATION INC</td>
<td>83-4663318</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020

JSA

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18674H 1467 V 20-7.21
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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
</table>
| 1 | MYCELIUM YOUTH NETWORK  
1633 54TH AVE OAKLAND, CA 94601 | 85-0663137 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | MYERS PARK CHARLOTTE UNITED METHODIST CHURCH  
1501 QUEENS RD CHARLOTTE, NC 28207 | 56-0529960 | 501 (C) 3 | 12,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | MYERS PARK PRESBYTERIAN CHURCH  
2501 OXFORD PL CHARLOTTE, NC 28207 | 56-0532133 | 501 (C) 3 | 106,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | MYLESTONE EQUINE RESCUE A NEW JERSEY NON-PR  
227 STILL VALLEY RD PHILLIPSBURG, NJ 08865 | 22-3304384 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | MYNA MAHILA USA INC  
65 TOWNSEND BLVD WESTBOROUGH, MA 1581 | 84-2615139 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | MYOSITIS ASSOCIATION  
6950 COLUMBIA GATEWAY DRIVE SUITE 3 COLUMBIA | 54-1660976 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | MYOTONIC DYSTROPHY FOUNDATION  
663 13TH ST STE 100 OAKLAND, CA 94612 | 20-5014628 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | MYSTIC & NOANK LIBRARY INC  
40 LIBRARY ST MYSTIC, CT 6355 | 06-0709292 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | MYSTIC RIVER WATERSHED ASSOCIATION INC  
20 ACADEMY ST STE 306 ARLINGTON, MA 2476 | 23-7221094 | 501 (C) 3 | 7,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | MYSTIC SEAFOOT MUSEUM INC  
75 GREENMADVILLE AVE MYSTIC, CT 6355 | 06-0653120 | 501 (C) 3 | 78,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | N A A C P LEGAL DEFENSE AND EDUCATIONAL FUN  
40 RECTOR STREET 5TH FLOOR NEW YORK, NY 100 | 13-1655255 | 501 (C) 3 | 899,866. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | N A R D I N ACADEMY  
135 CLEVELAND AVE BUFFALO, NY 14222 | 16-0838979 | 501 (C) 3 | 9,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
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**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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</tr>
</thead>
<tbody>
<tr>
<td>N C LITTLE MEMORIAL HOSPICE INC</td>
<td>7019 LYNMAR LN MINNEAPOLIS, MN 55435</td>
<td>41-1791216</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>N STREET VILLAGE INC</td>
<td>1333 N ST NW WASHINGTON, DC 20005</td>
<td>52-1007373</td>
<td>501 (C) 3</td>
<td>113,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>N Y PET-I-CARE INC</td>
<td>301 E 22ND ST NEW YORK, NY 10010</td>
<td>13-4075468</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>N Y POLICE AND FIRE WIDOWS &amp; CHILDREN Bene Bene</td>
<td>767 5TH AVE NEW YORK, NY 10153</td>
<td>13-3340675</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>N1 FOUNDATION INC</td>
<td>PO BOX 26428 BROOKLYN, NY 11202</td>
<td>26-0483848</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NAACP EMPOWERMENT PROGRAM INC</td>
<td>7 SAINT PAUL ST STE 12 BALTIMORE, MD 21202</td>
<td>13-1084135</td>
<td>501 (C) 3</td>
<td>579,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NAACP FOUNDATION</td>
<td>7 SAINT PAUL ST STE 12 BALTIMORE, MD 21202</td>
<td>13-1998814</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NAALEH SCHOOL FOR GIRLS</td>
<td>500 FRANK W BURR BLVD STE 47 TEANECK, NJ 76</td>
<td>82-2773112</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>HAF</td>
<td>218 WEST 40TH STREET 5TH NEW YORK CITY, NY</td>
<td>13-3480246</td>
<td>501 (C) 3</td>
<td>225,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NAKOMA FOUNDATION INC</td>
<td>4145 COUNTRY CLUB RD MADISON, WI 53711</td>
<td>39-1719952</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NALANDABODHI</td>
<td>3902 WOODLAND PARK AVE N SEATTLE, WA 98103</td>
<td>91-1803978</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NAMELESS COALITION FOR THE HOMELESS</td>
<td>PO BOX 353 BEHINDI, MN 56619</td>
<td>47-2472035</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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</tr>
</thead>
</table>
| 1 | NAMER NOT NUMBERS INC  
90 LAURE HILL TERRACE SUITE 6 NEW YORK, NY | 47-4719936 | 501 (C) 3 | 10,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | NAMI  
4301 WILSON BLVD STE 300 ARLINGTON, VA 2220 | 43-1201653 | 501 (C) 3 | 1,613,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | NAMI CALIFORNIA  
1851 HERITAGE LN STE 150 SACRAMENTO, CA 958 | 94-2676057 | 501 (C) 3 | 12,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | NAMI OF DUFFAGE COUNTY ILLINOIS  
115 N COUNTY FARM RD WHEATON, IL 60187 | 36-3412057 | 501 (C) 3 | 17,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | NAMI SANTA CLARA COUNTY  
1150 S BASCOM AVE STE 24 SAN JOSE, CA 95128 | 94-2430956 | 501 (C) 3 | 55,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | NAMI SEATTLE  
802 NW 70TH ST SEATTLE, WA 98117 | 91-1043712 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | NANTUCKET BOYS & GIRLS CLUB INC  
PO BOX 269 NANTUCKET, MA 2554 | 04-6114678 | 501 (C) 3 | 12,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | NANTUCKET CONSERVATION FOUNDATION INC  
PO BOX 13 NANTUCKET, MA 2554 | 04-2373794 | 501 (C) 3 | 29,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | NANTUCKET GOLF CLUB FOUNDATION INC  
PO BOX 313 SIASCONSET, MA 2564 | 46-0468973 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | NANTUCKET HISTORICAL ASSOCIATION  
PO BOX 1016 NANTUCKET, MA 2554 | 04-6003451 | 501 (C) 3 | 5,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | NANTUCKET INTERFAITH COUNCIL  
2 MADAKET RD NANTUCKET, MA 2554 | 04-3194441 | 501 (C) 3 | 21,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | NANTUCKET LAND COUNCIL INC  
PO BOX 502 NANTUCKET, MA 2554 | 51-0180597 | 501 (C) 3 | 21,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▲ Attach to Form 990.

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### General Information on Grants and Assistance

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   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1. NANTUCKET MARIA MITCHELL ASSOC</td>
<td>04-2129139</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2. NANTUCKET PARTNERSHIP FOR CHILDREN INC</td>
<td>22-2957434</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>3. NANTUCKET SHELLFISH ASSOCIATION INC</td>
<td>06-1684351</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. NABUBHAI EDUCATION FOUNDATION INC</td>
<td>34-2046949</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5. NAPA COUNTY LAND TRUST</td>
<td>94-2315096</td>
<td>501 (C) 3</td>
<td>10,924.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>6. NAPERVILLE PRESBYTERIAN CHURCH</td>
<td>36-3333516</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. NAPPA CONSUMER EDUCATION FOUNDATION</td>
<td>20-2025908</td>
<td>501 (C) 3</td>
<td>11,165.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. NAPLES BOTANICAL GARDEN INC</td>
<td>65-0511429</td>
<td>501 (C) 3</td>
<td>36,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. NAPLES CHILDREN AND EDUCATION</td>
<td>65-1001650</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10. NAPLES SENIOR CENTER AT JFCS INC</td>
<td>45-3980909</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>11. NAPLES UNITED CHURCH OF CHRIST</td>
<td>59-1555020</td>
<td>501 (C) 3</td>
<td>113,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12. NAPLES WOMANS CLUB</td>
<td>59-0907298</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) NARAL PRO-CHOICE AMERICA FOUNDATION</td>
<td>1725 I ST NW STE 900 WASHINGTON, DC 20006</td>
<td>52-1100361</td>
<td>501 (C) 3</td>
<td>140,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) NARAL PRO-CHOICE OHIO FOUNDATION</td>
<td>11811 SHAKER BLVD STE 210 CLEVELAND, OH 441</td>
<td>31-1212322</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) NARIXA</td>
<td>3155 KEARNEY ST STE 190 FREMONT, CA 94538</td>
<td>94-3162871</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) NAROPA UNIVERSITY</td>
<td>2130 ARAPAHOE AVE BOULDER, CO 80302</td>
<td>84-1029228</td>
<td>501 (C) 3</td>
<td>27,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) NARSAD RESEARCH INSTITUTE INC</td>
<td>747 3RD AVE FL 33 NEW YORK, NY 10017</td>
<td>11-3401438</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) NASD EDUCATION FOUNDATION</td>
<td>401 N WHITEHALL RD NORRISTOWN, PA 19403</td>
<td>20-3592215</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) NASHOBRA BROOKS SCHOOL OF CONCORD</td>
<td>200 STRAWBERRY HILL RD CONCORD, MA 1742</td>
<td>04-2103947</td>
<td>501 (C) 3</td>
<td>128,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) NASHOBRA LEARNING GROUP INC</td>
<td>10 OAK PARK DR BEDFORD, MA 1730</td>
<td>01-0672424</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) NASHUA CHILDREN'S HOME</td>
<td>125 AMHERST ST NASHUA, NH 3064</td>
<td>02-0222162</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) NASHUA COMMUNITY ARTS</td>
<td>PO BOX 970 NASHUA, NH 3061</td>
<td>84-2160999</td>
<td>501 (C) 3</td>
<td>38,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) NASHUA SOUP KITCHEN AND SHELTER INCORPORATE</td>
<td>PO BOX 3116 NASHUA, NH 3061</td>
<td>02-0359239</td>
<td>501 (C) 3</td>
<td>25,700</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) NASHVILLE CLASSICAL</td>
<td>2000 GREENWOOD AVE NASHVILLE, TN 37206</td>
<td>45-1137291</td>
<td>501 (C) 3</td>
<td>77,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>NASHVILLE CONFlict RESOLUTION CENTER</td>
<td>4732 WEST LONGDALE DRIVE NASHVILLE, TN 3721</td>
<td>62-1828238</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>NASHVILLE PUBLIC LIBRARY FOUNDATION</td>
<td>615 CHURCH ST NASHVILLE, TN 37219</td>
<td>62-1681766</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>NASHVILLE PUBLIC RADIO</td>
<td>630 MAINSTREAM DR NASHVILLE, TN 37228</td>
<td>62-1631652</td>
<td>501 (C) 3</td>
<td>28,700.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>NASHVILLE RESCUE MISSION</td>
<td>639 LAFAYETTE ST NASHVILLE, TN 37203</td>
<td>45-2424130</td>
<td>501 (C) 3</td>
<td>33,363.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>NASHVILLE SAFE HAVEN FAMILY SHELTER</td>
<td>1234 3RD AVE S NASHVILLE, TN 37210</td>
<td>62-1807653</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>NASHVILLE SYMPHONY ASSOCIATION</td>
<td>1 SYMPHONY PL NASHVILLE, TN 37201</td>
<td>62-0550979</td>
<td>501 (C) 3</td>
<td>28,300.</td>
<td>FMV</td>
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<td>7</td>
<td>NASHVILLE ZOO INC</td>
<td>3777 NOLENSVILLE FRANKLIN AVENUE NASHVILLE, TN 37211</td>
<td>62-1411210</td>
<td>501 (C) 3</td>
<td>252,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>NASSA'S PLACE</td>
<td>PO BOX 833 EAST ORANGE, NJ 7019</td>
<td>27-3755941</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>9</td>
<td>NASSAU COUNTY POLICE DEPARTMENT FOUNDATION</td>
<td>FOUNDATION INC 734 FRANKLIN AVENUE GARDEN CITY</td>
<td>35-2351865</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
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<td>10</td>
<td>NASSAU PRESBYTERIAN CHURCH</td>
<td>C/O LINDA GILMORE 127 ROSS STEVENSON CIR PR</td>
<td>21-0634470</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>11</td>
<td>NASSAU SUFFOLK SERVICES FOR THE AUTISTIC</td>
<td>80 HAUPPAUGE RD COMMACK, NY 11725</td>
<td>11-2669753</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>12</td>
<td>NATALIA MENTAL HEALTH FOUNDATION INC</td>
<td>2665 S BAYSHORE DR STE 715 MIAMI, FL 33133</td>
<td>81-1060938</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>NATHAN ADELSON HOSPICE INC</td>
<td>88-0161009</td>
<td>501 (c) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL ABILITY CENTER</td>
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<td>501 (c) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL ABORTION FEDERATION</td>
<td>43-1097957</td>
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<td>13,500. FMV</td>
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<td>13-1628183</td>
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<td>NATIONAL ACADEMY OF ENGINEERING FUND</td>
<td>23-7284092</td>
<td>501 (c) 3</td>
<td>128,000. FMV</td>
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<td>NATIONAL ACADEMY OF SCIENCES</td>
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<td>501 (c) 3</td>
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<td>501 (c) 3</td>
<td>6,500. FMV</td>
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<td>NATIONAL ALLIANCE FOR RESEARCH ON SCHIZOPHHR</td>
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<td>135,500. FMV</td>
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<td>NATIONAL ALLIANCE ON MENTAL ILLNESS HAWAI</td>
<td>99-0272540</td>
<td>501 (c) 3</td>
<td>10,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL ALLIANCE ON MENTAL ILLNESS OF MASS</td>
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<td>13,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL ALLIANCE ON MENTAL ILLNESS OF NEW</td>
<td>13-3077692</td>
<td>501 (c) 3</td>
<td>9,500. FMV</td>
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<td>NATIONAL ALOPECIA AREATA FOUNDATION</td>
<td>94-2780249</td>
<td>501 (c) 3</td>
<td>15,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
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</table>
| (1)   | NATIONAL ARBOR DAY FOUNDATION  
211 N 12TH ST LINCOLN, NE 68508 | 23-7169265 | 501 (C) 3 | 33,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2)   | NATIONAL ASIAN PACIFIC AMERICAN WOMENS FORU  
PO BOX 13255 CHICAGO, IL 60613 | 36-4799986 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3)   | NATIONAL ASSOCIATION FOR CHILDREN OF ALCOHOL  
10920 CONNECTICUT AVE STE 100 KENSINGTON, M | 94-2865311 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4)   | NATIONAL ASSOCIATION FOR OLIMTED PARKS  
1200 18TH ST NW STE 700 WASHINGTON, DC 2003 | 13-3052765 | 501 (C) 3 | 610,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5)   | NATIONAL ASSOCIATION OF BLACK JOURNALISTS  
1100 KNIGHT HALL SUITE 3100 COLLEGE PARK, M | 52-1266959 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6)   | NATIONAL ASSOCIATION OF POLICE ORGANIZATION  
317 S PATRICK ST ALEXANDRIA, VA 22314 | 16-1619872 | 501 (C) 3 | 100,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7)   | NATIONAL ASSOCIATION OF SCHOLARS INC  
12 E 46TH ST FL 6 NEW YORK, NY 10017 | 11-2741900 | 501 (C) 3 | 25,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8)   | NATIONAL AUDUBON SOCIETY INC  
225 VARICK ST FL 7 NEW YORK, NY 10014 | 13-1624102 | 501 (C) 3 | 572,650. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9)   | NATIONAL BLACK FARMERS ASSOCIATION INCORPOR  
68 WIND RD BASKERVILLE, VA 23915 | 47-2081033 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10)  | NATIONAL BLACK JUSTICE COALITION INC  
PO BOX 71395 WASHINGTON, DC 20024 | 20-0667808 | 501 (C) 3 | 13,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11)  | NATIONAL BLACK TRANS ADVOCACY COALITION  
PO BOX 118282 CARROLLTON, TX 75011 | 94-1947403 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12)  | NATIONAL BLACK WOMENS HEALTH PROJECT INC  
100 M ST SE STE 600 WASHINGTON, DC 20003 | 58-1557556 | 501 (C) 3 | 45,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

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<tr>
<td>NATIONAL BRAIN TUMOR SOCIETY INC</td>
<td>55 CHAPEL ST STE 200 NEWTON, MA 2458</td>
<td>04-3068130</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL BREAST CANCER COALITION FUND</td>
<td>1010 VERMONT AVE NW STE 900 WASHINGTON, DC</td>
<td>52-1782065</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL BUILDING MUSEUM</td>
<td>401 F ST NW WASHINGTON, DC 20001</td>
<td>52-1050999</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL CANCER INSTITUTE</td>
<td>BUILDING 31 ROOM 11A-16 9000 ROCKVILLE PIK</td>
<td>52-0858115</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>NATIONAL CATHOLIC REPORTER PUBLISHING COMPANY</td>
<td>115 E ARMOUR BLVD KANSAS CITY, MO 64111</td>
<td>43-0815211</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL CENTER FOR CHILDREN AND FAMILIES</td>
<td>6301 GREENTREE RD BLDG 1 BETHESDA, MD 20817</td>
<td>52-0591586</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL CENTER FOR LAW AND ECONOMIC JUSTICE</td>
<td>275 7TH AVE FL 15 NEW YORK, NY 10001</td>
<td>23-7311208</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<td>NATIONAL CENTER FOR LESBIAN RIGHTS</td>
<td>870 MARKET ST STE 370 SAN FRANCISCO, CA 94188</td>
<td>94-3086885</td>
<td>501 (C) 3</td>
<td>606,500.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL CENTER FOR PUBLIC POLICY RESEARCH</td>
<td>20 F ST NW STE 700 WASHINGTON, DC 20001</td>
<td>52-1226614</td>
<td>501 (C) 3</td>
<td>17,500.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NATIONAL CENTER FOR TRANSGENDER EQUALITY</td>
<td>1032 15TH STREET NW 199 WASHINGTON, DC 2000</td>
<td>41-2090291</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>NATIONAL CHAPLAINS ASSOCIATION INC</td>
<td>728 PARK AVE S LAKEWOOD, NJ 8701</td>
<td>45-4031492</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
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<td>NATIONAL CHILDREN’S ADVOCACY CENTER INC</td>
<td>210 PRATT AVE NE HUNTSVILLE, AL 35801</td>
<td>63-0891512</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>NATIONAL CHRISTIAN CHARITABLE FOUNDATION IN</td>
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<td>58-1493949</td>
<td>501 (C) 3</td>
<td>1,544,251.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL CHRISTIAN CHARITABLE FOUNDATION IN</td>
<td>4545 POST OAK PLACE DR HOUSTON, TX 77027</td>
<td>20-8780315</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>N/A</td>
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<td>NATIONAL COALITION AGAINST DOMESTIC VIOLENCE</td>
<td>1 N BROADWAY STE 2108 DENVER, CO 80203</td>
<td>91-1081344</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL COAST GUARD MUSEUM ASSOCIATION INC</td>
<td>78 HOWARD ST STE A NEW LONDON, CT 6320</td>
<td>06-1621858</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL COLLEGE ADVISING CORPS INC</td>
<td>301 W BARBEE CHAPEL RD STE 210 CHAPEL HILL,</td>
<td>46-1192687</td>
<td>501 (C) 3</td>
<td>85,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COMMITTEE ON UNITED STATES CHINA R</td>
<td>6 E 43RD ST FL 24 NEW YORK, NY 10017</td>
<td>13-2566973</td>
<td>501 (C) 3</td>
<td>125,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL CONFERENCE FOR COMMUNITY AND JUSTI</td>
<td>713 N GREENE ST GREENSBORO, NC 27401</td>
<td>06-1753756</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL CONFERENCE ON CITIZENSHIP</td>
<td>1920 L ST NW # 450 WASHINGTON, DC 20036</td>
<td>52-0698385</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL CONSORTIUM FOR GRADUATE DGRS MINOR</td>
<td>1430 DUKE ST ALEXANDRIA, VA 22314</td>
<td>31-0898802</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>NATIONAL CONSTITUTION CENTER</td>
<td>525 ARCH ST PHILADELPHIA, PA 19106</td>
<td>23-2434447</td>
<td>501 (C) 3</td>
<td>109,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COUNCIL OF JEWISH WOMEN INCORPORAT</td>
<td>241 W 72ND ST NEW YORK, NY 10023</td>
<td>13-1624132</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COUNCIL OF JEWISH WOMEN INCORPORAT</td>
<td>26055 EMERY ROAD CLEVELAND, OH 44128</td>
<td>36-0714651</td>
<td>501 (C) 3</td>
<td>7,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**SCHEDULE I**  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I** General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1401 WHITIERS RD GROSSE POINTE PARK, MI 48221</td>
<td>38-1420154</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COUNCIL OF THE UNITED STATES SOCIETY</td>
<td>62 GREEN ST BROOKLINE, NJ 7512</td>
<td>04-6006480</td>
<td>501 (C) 3</td>
<td>11,100.</td>
<td>FMV</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>195 RT 46 W STE 11 TOTOWA, NJ 7666</td>
<td>27-4106614</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>868 PERRY LN TEANECK, FL 33154</td>
<td>22-3237571</td>
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<td>26,948.</td>
<td>FMV</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>4502 HENRY HUDSON PKWY BRONX, NY 10528</td>
<td>91-1902501</td>
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<td>12,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>91 UNION AVE HARRISON, NY 11423</td>
<td>13-3360582</td>
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<td>25,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
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<td>9,500.</td>
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<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>8310 188TH ST HOLLIS, WA 2446</td>
<td>11-2518593</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>9580 ABBOTT AVE SURFSIDE, NY 10804</td>
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<td>26,690.</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>7200 PALMETTO CIR N BOCA RATON, CA 90211</td>
<td>65-0049343</td>
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<td>7,760.</td>
<td>FMV</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>8383 WILSHIRE BLVD STE 830 BEVERLY HILLS, F 95-4394879</td>
<td>501 (C) 3</td>
<td>8,270.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>NATIONAL COUNCIL OF YOUNG ISRAEL</td>
<td>100 W HARRISON N TOWER SEATTLE, WA 98119</td>
<td>91-1255818</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>(a)</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<tr>
<td>(b)</td>
<td>23-2888152</td>
</tr>
<tr>
<td>(c) IRC section (if applicable)</td>
<td>501 (C) 3</td>
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<td>(d) Amount of cash grant</td>
<td>16,500.</td>
</tr>
<tr>
<td>(e) Amount of non-cash assistance</td>
<td>FMV</td>
</tr>
<tr>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>N/A</td>
</tr>
<tr>
<td>(g) Description of noncash assistance</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(h) Purpose of grant or assistance</td>
<td></td>
</tr>
<tr>
<td>(1) NATIONAL DANCE INSTITUTE INC</td>
<td>217 W 147TH ST NEW YORK, NY 10039</td>
</tr>
<tr>
<td>(2) NATIONAL DANCE INSTITUTE NEW MEXICO INC</td>
<td>1140 ALTO ST SANTA FE, NM 87501</td>
</tr>
<tr>
<td>(3) NATIONAL DAY OF PRAYER TASK FORCE</td>
<td>3710 SINTON RD STE 220 COLORADO SPRINGS, CO</td>
</tr>
<tr>
<td>(4) NATIONAL DIAPER BANK NETWORK</td>
<td>155 EAST ST # 101 NEW HAVEN, CT 6511</td>
</tr>
<tr>
<td>(5) NATIONAL DIGITAL INCLUSION ALLIANCE</td>
<td>745 S CASSINGHAM RD COLUMBUS, OH 43209</td>
</tr>
<tr>
<td>(6) NATIONAL DISASTER SEARCH DOG FOUNDATION INC</td>
<td>6800 WHEELER CANYON RD SANTA PAULA, CA 9306</td>
</tr>
<tr>
<td>(7) NATIONAL DOMESTIC VIOLENCE HOTLINE</td>
<td>PO BOX 90249 AUSTIN, TX 78709</td>
</tr>
<tr>
<td>(8) NATIONAL DOMESTIC WORKERS ALLIANCE INC</td>
<td>45 BROADWAY STE 320 NEW YORK, NY 10006</td>
</tr>
<tr>
<td>(9) NATIONAL DOWN SYNDROME SOCIETY</td>
<td>8 E 41ST STREET 8TH FLOOR NEW YORK, NY 1001</td>
</tr>
<tr>
<td>(10) NATIONAL DUNCAN GLASS SOCIETY INC</td>
<td>100 RIDGE AVE WASHINGTON, PA 15301</td>
</tr>
<tr>
<td>(11) NATIONAL EATING DISORDERS ASSOCIATION</td>
<td>1500 BROADWAY STE 1101 NEW YORK, NY 10036</td>
</tr>
<tr>
<td>(12) NATIONAL FISH AND WILDLIFE FOUNDATION</td>
<td>1133 15TH ST NW STE 1000 WASHINGTON, DC 200</td>
</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
( Form 990 )

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>NATIONAL FOREST FOUNDATION</td>
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<td>501 (C) 3</td>
<td>109,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL FOUNDATION FOR CELIAC AWARENESS</td>
<td>90-0108854</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>NATIONAL FOUNDATION FOR ECTODERMAL DYSPLASIA</td>
<td>37-1112496</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>NATIONAL FOUNDATION FOR FACIAL RECONSTRUCTI</td>
<td>13-6013760</td>
<td>501 (C) 3</td>
<td>10,081.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL FOUNDATION FOR RESCUED ANIMALS</td>
<td>17552 FM 14 TYLER, TX 7506</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL FOUNDATION FOR THE CTIS FOR DISEASE</td>
<td>600 PEACHTREE ST NE STE 1000 ATLANTA, GA 30</td>
<td>501 (C) 3</td>
<td>196,500.</td>
<td>FMV</td>
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<tr>
<td>NATIONAL GALLERY OF ART</td>
<td>53-6001666</td>
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<td>NATIONAL GEOGRAPHIC SOCIETY</td>
<td>1145 17TH ST NW WASHINGTON, DC 20036</td>
<td>501 (C) 3</td>
<td>45,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NATIONAL GHOST RANCH FOUNDATION INC</td>
<td>23-7188767</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>NATIONAL HOUSING &amp; COMMUNITY DEVELOPMENT LA</td>
<td>1663 MISSION ST STE 460 SAN FRANCISCO, CA 94103</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL HUMANITIES CENTER</td>
<td>59-1735367</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIONAL IMMIGRATION LAW CENTER</td>
<td>4345 WILSHIRE BLVD STE 1600 # 213-6 LOS ANG</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NATIONAL IMMIGRATION PROJECT OF THE NATIONA</td>
<td>2201 WISCONSIN AVE NW STE 200 WASHINGTON, D</td>
<td>95-2926663</td>
<td>501 (C) 3</td>
<td>41,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>NATIONAL INSTITUTE FOR LABOR RELATIONS RESE</td>
<td>5211 PORT ROYAL RD # 510 SPRINGFIELD, VA 22</td>
<td>52-1303565</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>NATIONAL INSTITUTE FOR REPRODUCTIVE HEALTH</td>
<td>14 WALL ST STE 3B NEW YORK, NY 10005</td>
<td>13-3030257</td>
<td>501 (C) 3</td>
<td>46,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>NATIONAL INSTITUTE OF SOCIAL SCIENCES</td>
<td>PO BOX 405 NEW YORK, NY 10163</td>
<td>13-6001542</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>NATIONAL JEWISH HEALTH</td>
<td>1400 JACKSON ST DENVER, CO 80206</td>
<td>74-2044647</td>
<td>501 (C) 3</td>
<td>189,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>NATIONAL JEWISH OUTREACH PROGRAM INC</td>
<td>1345 AVENUE OF THE AMERICAS FL 2 NEW YORK,</td>
<td>13-2881809</td>
<td>501 (C) 3</td>
<td>44,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>NATIONAL JUSTICE FOR OUR NEIGHBORS</td>
<td>7630 LITTLE RIVER TPKE STE 90 ANNANDALE, VA</td>
<td>45-4044201</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>NATIONAL KIDNEY FOUNDATION INC</td>
<td>33 E 33RD ST NEW YORK, NY 10016</td>
<td>13-1673104</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>NATIONAL LAWYERS GUILD FOUNDATION INC</td>
<td>PO BOX 1266 NEW YORK, NY 10009</td>
<td>13-3336640</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>NATIONAL LEAGUE OF CITIES INSTITUTE INC</td>
<td>660 N CAPITOL ST NW # 4 WASHINGTON, DC 2000</td>
<td>52-6055762</td>
<td>501 (C) 3</td>
<td>101,439</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>NATIONAL LEGAL &amp; POLICY CENTER</td>
<td>107 PARK WASHINGTON CT FALLS CHURCH, VA 220</td>
<td>52-1750188</td>
<td>501 (C) 3</td>
<td>36,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>NATIONAL MARITIME HISTORICAL SOCIETY</td>
<td>5 JOHN MALSH BLVD FEEKERSIL, NY 10566</td>
<td>52-6054798</td>
<td>501 (C) 3</td>
<td>100,500</td>
<td>FMV</td>
<td>N/A</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | NATIONAL MILL DOG RESCUE  
PO BOX 88468 COLORADO SPRINGS, CO 80908 | 26-0574783 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | NATIONAL MULTIPLE SCLEROSIS SOCIETY  
733 THIRD AVE 3RD FLOOR NEW YORK, NY 10017 | 13-5661935 | 501 (C) 3 | 415,178 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY  
101 S INDEPENDENCE MALL E PHILADELPHIA, PA | 22-3739280 | 501 (C) 3 | 199,250 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | NATIONAL MUSEUM OF MATHEMATICS  
134 W 26TH ST RM 4E NEW YORK, NY 10001 | 27-1450809 | 501 (C) 3 | 7,458 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | NATIONAL MUSEUM OF MEXICAN ART  
1852 W 19TH ST CHICAGO, IL 60608 | 36-3225519 | 501 (C) 3 | 25,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | NATIONAL MUSEUM OF RACING INC  
191 UNION AVE SARATOGA SPRINGS, NY 12866 | 14-1421321 | 501 (C) 3 | 12,700 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | NATIONAL MUSEUM OF WOMEN IN THE ARTS INC  
1250 NEW YORK AVE NW WASHINGTON, DC 20005 | 52-1238810 | 501 (C) 3 | 93,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | NATIONAL NETWORK OF ABORTION FUNDS  
PO BOX 7569 NEW YORK, OR 97008 | 06-1610849 | 501 (C) 3 | 5,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | NATIONAL NETWORK OF ABORTION FUNDS  
1153 EASTFIELD AVE AUSTIN, OR 97042 | 74-3008249 | 501 (C) 3 | 8,440 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | NATIONAL NETWORK OF ABORTION FUNDS  
9450 SW GEMINI DR FMH 16009 BEAVERTON, TX 7 | 04-3236982 | 501 (C) 3 | 30,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | NATIONAL NETWORK OF ABORTION FUNDS  
4325 COMMERCE ST ST 111 # 433 EUGENE, OR 1 | 72-1553703 | 501 (C) 3 | 14,750 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | NATIONAL NURSE-LED CARE CONSORTIUM  
1500 MARKET ST PHILADELPHIA, PA 19102 | 01-0560081 | 501 (C) 3 | 250,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tr>
<th>Number</th>
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</tr>
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<tbody>
<tr>
<td>1</td>
<td>NATIONAL ORGANIZATION FOR MARRIAGE EDUCATION</td>
<td>934 N MAIN ST ROCKFORD, IL 61103</td>
<td>20-7472471</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>NATIONAL OUTDOOR LEADERSHIP SCHOOL</td>
<td>284 LINCOLN ST Lander, WY 82520</td>
<td>83-0204184</td>
<td>501 (C) 3</td>
<td>48,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>NATIONAL PARK FOUNDATION</td>
<td>1500 K ST NW STE 700 WASHINGTON, DC 20005</td>
<td>52-1086761</td>
<td>501 (C) 3</td>
<td>376,334.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>NATIONAL PARK TRUST INC</td>
<td>401 E JEFFERSON ST STE 207 ROCKVILLE, MD 20</td>
<td>52-1691924</td>
<td>501 (C) 3</td>
<td>35,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>NATIONAL PARKS CONSERVATION ASSOCIATION</td>
<td>777 6TH ST NW STE 700 WASHINGTON, DC 20001</td>
<td>53-0225165</td>
<td>501 (C) 3</td>
<td>145,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES</td>
<td>1875 CONNECTICUT AVE NW WASHINGTON, DC 2000</td>
<td>23-7124915</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>NATIONAL PEACE CORPS ASSOCIATION</td>
<td>1825 CONNECTICUT AVE NW STE 8 WASHINGTON, D</td>
<td>58-1431113</td>
<td>501 (C) 3</td>
<td>27,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>NATIONAL PEDIATRIC CANCER FOUNDATION INC</td>
<td>5550 W EXECUTIVE DR STE 20 TAMPA, FL 33609</td>
<td>59-3097333</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>NATIONAL PHILANTHROPIC TR</td>
<td>165 TOWNSHIP LINE RD STE 1200 JENKRINTOWN, P</td>
<td>23-7825575</td>
<td>501 (C) 3</td>
<td>165,725,209.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>NATIONAL PHILHARMONIC ORCHESTRA &amp; CHORALE O</td>
<td>5301 TUCKERMAN LN ROCKVILLE, MD 20852</td>
<td>52-1361650</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>NATIONAL PKU ALLIANCE INC</td>
<td>2809 E HAMILTON AVE # 311 EAU CLAIRE, WI 54</td>
<td>26-2849140</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>NATIONAL PKU NEWS</td>
<td>PO BOX 43552 MONTCLAIR, NJ 7043</td>
<td>94-3098601</td>
<td>501 (C) 3</td>
<td>72,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>NATIONAL PSORIASIS FOUNDATION 6600 SW 92ND AVE STE 300 PORTLAND, OR 97223</td>
<td>93-0571472</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>NATIONAL PUBLIC RADIO INC 1111 N CAPITOL ST NE WASHINGTON, DC 20002</td>
<td>52-0907625</td>
<td>501 (C) 3</td>
<td>436,781</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>NATIONAL RAMAH COMMISSION INC 3080 BROADWAY NEW YORK, NY 10027</td>
<td>13-616110</td>
<td>501 (C) 3</td>
<td>27,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>NATIONAL REDISTRICTING FOUNDATION 700 13TH ST NW STE 600 WASHINGTON, DC 20005</td>
<td>82-0757693</td>
<td>501 (C) 3</td>
<td>339,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>NATIONAL REHABILITATION HOSPITAL INC 10980 GRANTCHESTER WAY COLUMBIA, MD 21044</td>
<td>52-1369749</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>NATIONAL REPERTORY ORCHESTRA INC COLORADO SPRINGFIELD 111 S MAIN ST BRECKENRIDGE, CO 80424</td>
<td>84-0566793</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>NATIONAL REVIEW INSTITUTE 19 W 44TH ST NEW YORK, NY 10036</td>
<td>13-3649537</td>
<td>501 (C) 3</td>
<td>127,700</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8</td>
<td>NATIONAL RIGHT TO LIFE EDUCATIONAL FOUNDATION 1446 DUKE ST ALEXANDRIA, VA 22314</td>
<td>73-1010913</td>
<td>501 (C) 3</td>
<td>21,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9</td>
<td>NATIONAL RIGHT TO WORK LEGAL DEFENSE &amp; EDUC 8001 BRADDOCK RD # 600 SPRINGFIELD, VA 2216</td>
<td>59-1588825</td>
<td>501 (C) 3</td>
<td>274,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>NATIONAL SOCIETY OF COLONIAL DAMES OF AMERICA 2645 GOUGH ST SAN FRANCISCO, CA 94123</td>
<td>94-1415312</td>
<td>501 (C) 3</td>
<td>41,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>11</td>
<td>NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA 2715 Q ST NW WASHINGTON, DC 20007</td>
<td>53-0224364</td>
<td>501 (C) 3</td>
<td>52,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12</td>
<td>NATIONAL SOCIETY OF THE DAUGHTERS OF THE AMERICA 1776 D ST NW WASHINGTON, DC 20006</td>
<td>53-0205923</td>
<td>501 (C) 3</td>
<td>23,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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3. Enter total number of other organizations listed in the line 1 table: 

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Names of the organization

### Part I

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</thead>
<tbody>
<tr>
<td>(1)</td>
<td>NATIONAL SPIRITUAL ASSEMBLY OF THE BAHAI O</td>
<td>36-3981492</td>
<td>501 (c) 3</td>
<td>173,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>NATIONAL SPORTING LIBRARY INCORPORATED</td>
<td>54-6053662</td>
<td>501 (c) 3</td>
<td>25,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>NATIONAL STEINBECK CENTER</td>
<td>77-0006320</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4)</td>
<td>NATIONAL STORYTELLING ASSOCIATION</td>
<td>62-1014756</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td>NATIONAL SUMMER LEARNING ASSOC INC</td>
<td>1701 PENNSYLVANIA AVE NW STE 200 WASHINGTON</td>
<td>26-3356271</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td>NATIONAL TAIWAN UNIV SCHL OF PHARM ALUMNI A</td>
<td>12 IROQUOIS AVE DOYLESTOWN, PA 18901</td>
<td>52-1227868</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>NATIONAL TAIWAN UNIVERSITY ACADEMIC DEVELOP</td>
<td>38 RIDGEFIELD LN WILLOWBROOK, IL 60527</td>
<td>36-4221899</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>NATIONAL TAIWAN UNIVERSITY MEDICAL COLLEGE</td>
<td>225 W WASHINGTON ST STE 1300 CHICAGO, IL 60606</td>
<td>36-3994468</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>NATIONAL TAXPAYERS UNION FOUNDATION</td>
<td>122 C ST NW STE 650 WASHINGTON, DC 20001</td>
<td>52-1122683</td>
<td>30,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>NATIONAL TROPICAL BOTANICAL GARDEN</td>
<td>3530 PAPALINA RD KALALOA, HI 96741</td>
<td>52-6057064</td>
<td>39,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>NATIONAL TRUST FOR HISTORIC PRESERVATION IN</td>
<td>2600 VIRGINIA AVENUE NW WASHINGTON, DC 20005</td>
<td>53-0210807</td>
<td>53,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>NATIONAL TUBEROUS SCLEROSIS ASSOCIATION INC</td>
<td>8737 COLESVILLE RD STE 400 SILVER SPRING, MD 20906</td>
<td>95-3018799</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3 Enter total number of other organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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</thead>
<tbody>
<tr>
<td>NATIONAL URBAN LEAGUE INC</td>
<td>13-1840489</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL URBAN TECHNOLOGY CENTER INC</td>
<td>13-3826279</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL VACCINE INFORMATION CENTER</td>
<td>54-1951769</td>
<td>501 (C) 3</td>
<td>507,016.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIONAL VOTE AT HOME INSTITUTE</td>
<td>82-5515680</td>
<td>501 (C) 3</td>
<td>170,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL WELLNESS ALLIANCE NON PROFIT INC</td>
<td>84-2836476</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL WILDLIFE FEDERATION</td>
<td>53-0204616</td>
<td>501 (C) 3</td>
<td>91,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL WILDLIFE REFUGE ASSOCIATION</td>
<td>23-7447365</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL WOMENS HEALTH NETWORK INC</td>
<td>52-1081261</td>
<td>501 (C) 3</td>
<td>21,700.</td>
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<td>NATIONAL WOMENS LAW CENTER</td>
<td>52-1213010</td>
<td>501 (C) 3</td>
<td>202,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>NATIONAL WORLD WAR II MUSEUM INC</td>
<td>945 MAGAZINE ST NEW ORLEANS, LA 70130</td>
<td>501 (C) 3</td>
<td>93,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>NATIONAL YIDDISH BOOK CENTER INC</td>
<td>11 DUFONT CIR NW STE 800 WASHINGTON, DC 200</td>
<td>501 (C) 3</td>
<td>464,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIONAL YOUNG FARMERS COALITION</td>
<td>1021 WEST ST AMHERST, MA 1002</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

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

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Number</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NATIONALITIES SERVICE CENTER OF PHILADELPHI</td>
<td>23-1352336</td>
<td>501 (C) 3</td>
<td>177,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>NATIONAL-LOUIS UNIVERSITY</td>
<td>36-2167804</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>NATIONS OF COACHES INC</td>
<td>14-1927543</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>NATIONWIDE CHILDREN'S HOSPITAL FOUNDATION</td>
<td>31-1036370</td>
<td>501 (C) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>NATIONWIDE CHILDREN'S HOSPITAL INC</td>
<td>31-1036372</td>
<td>501 (C) 3</td>
<td>96,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>NATIVE AMERICAN HERITAGE ASSOCIATION</td>
<td>46-0414390</td>
<td>501 (C) 3</td>
<td>102,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>NATIVE AMERICAN RIGHTS FUND</td>
<td>84-0611876</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>NATIVE HEALTH</td>
<td>94-2540194</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<tr>
<td>9</td>
<td>NATIVE MEMORY PROJECT</td>
<td>82-5020472</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>NATIVE PLANT SOCIETY OF TEXAS</td>
<td>74-2697896</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>NATIVE PLANT TRUST INC</td>
<td>04-2104768</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>NATIVE WELLNESS INSTITUTE</td>
<td>20-2570037</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>NATIVITY ACADEMY AT ST BONIFACE INC 529 E LIBERTY ST LOUISVILLE, KY 40202</td>
<td>51-0450314</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIVITY JESUIT ACADEMY INC 1515 S 29TH ST MILWAUKEE, WI 53215</td>
<td>39-1741141</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIVITY LUTHERAN CHURCH 3312 SILVER LAKE RD NE MINNEAPOLIS, MN 55418</td>
<td>41-0903528</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIVITY LUTHERAN CHURCH 60850 BROSTERHOUS RD BEND, MN 55418</td>
<td>93-0825808</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIVITY OF OUR LORD CATHOLIC PARISH IN BRO 900 W MIDWAY BLVD BROOKFIELD, IL 60520</td>
<td>84-0514655</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NATIVITY OF THE BLESSED VIRGIN MARY 152 MAIN ST BROCKPORT, NY 14420</td>
<td>16-0782038</td>
<td>501 (C) 3</td>
<td>21,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIVITY PREP ACADEMY OF SAN DIEGO 6126 ADELAIDE AVE SAN DIEGO, CA 92115</td>
<td>33-0886247</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIVITY PREPARATORY ACADEMY OF ROCHESTER 15 WHALIN ST ROCHESTER, NY 14620</td>
<td>46-4539758</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIVITY PREPARATORY SCHOOL 1515 LINDEN ST WILMINGTON, DE 19805</td>
<td>22-3884703</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATIVITY-BOSTON INC 39 LAMARTINE ST JAMAICA PLAIN, MA 2130</td>
<td>04-3063140</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATURAL DHARMA FELLOWSHIP 123 WESTON RD LINCOLN, MA 1773</td>
<td>26-3898758</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NATURAL HISTORY MUSEUM OF THE ADIRONACKS 45 MUSEUM DR TUPPER LAKE, NY 12986</td>
<td>14-1811534</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) NATURAL LANDS TRUST INCORPORATED</td>
<td>23-6272818</td>
<td>501 (C) 3</td>
<td>157,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1031 PALMERS MILL RD MEDIA, PA 19063</td>
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<tr>
<td>(2) NATURAL RESOURCES COUNCIL INC</td>
<td>01-0270690</td>
<td>501 (C) 3</td>
<td>19,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 WADE ST AUGUSTA, ME 4330</td>
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<tr>
<td>(3) NATURAL RESOURCES DEFENSE COUNCIL INC</td>
<td>13-2654926</td>
<td>501 (C) 3</td>
<td>1,340,845.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>40 WEST 20TH STREET NEW YORK, NY 10011</td>
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<tr>
<td>(4) NATURE AND CULTURE INTERNATIONAL</td>
<td>33-0773524</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1400 MAIDEN LN DEL MAR, CA 92014</td>
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<td>(5) NATURE COLLECTIVE</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>777 S HIGHWAY 101 STE 112 SOLANA BEACH, CA</td>
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<td>(6) NATURE CONSERVANCY</td>
<td>53-0242652</td>
<td>501 (C) 3</td>
<td>6,662,052.</td>
<td>FMV</td>
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<tr>
<td>4245 FAIRFAX DR ARLINGTON, VA 22203</td>
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<tr>
<td>(7) NATUREBRIDGE</td>
<td>94-2145930</td>
<td>501 (C) 3</td>
<td>36,250.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1033 FORT CRONKHITE SAUSALITO, CA 94965</td>
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<tr>
<td>(8) NAVAJO NATION</td>
<td>86-0092335</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>P.O. BOX 3150 OFFICE OF THE CONTROLLER WIND</td>
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<tr>
<td>(9) NAVAL AVIATION MUSEUM FOUNDATION INC</td>
<td>59-6178237</td>
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<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 33104 FENSCOLA, FL 32508</td>
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<td>(10) NAVY SEAL FOUNDATION INC</td>
<td>31-1728910</td>
<td>501 (C) 3</td>
<td>39,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1619 D ST VIRGINIA BEACH, VA 23455</td>
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<tr>
<td>(11) NAVY-MARINE CORPS RELIEF SOCIETY</td>
<td>53-0204618</td>
<td>501 (C) 3</td>
<td>19,300.</td>
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<tr>
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<tr>
<td>(12) NAZARETH ACADEMY</td>
<td>36-4106561</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1209 W OGDEN AVE LA GRANGE PARK, IL 60526</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table..................................................................................................................................................

**3** Enter total number of other organizations listed in the line 1 table.............................................................................................................................................................................

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Schedule I (Form 990) 2020

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JSA
OE1288 1.000

18674H 1467

V 20-7.21
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) NAZARETH FARM INC 665 NAZARETH FARM RD SALEM, WV 26426 | 55-0739518 | 501 (C) 3 | 70,000 | FMV | N/A | FOR RECIPIENT'S EXEM
| (2) NAZARETH LUTHERAN CHURCH 7401 UNIVERSITY AVE CEDAR FALLS, IA 50613 | 23-7260976 | 501 (C) 3 | 18,900 | FMV | N/A | FOR RECIPIENT'S EXEM
| (3) NBCC 324 E CARRILLO ST STE C SANTA BARBARA, CA 9 | 77-0556795 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM
| (4) NC STATE ENGINEERING FOUNDATION INC NCSU BOX 7207 RALEIGH, NC 27695 | 56-6046987 | 501 (C) 3 | 171,855 | FMV | N/A | FOR RECIPIENT'S EXEM
| (5) NCGA FOUNDATION PO BOX 1157 PEBBLE BEACH, CA 93953 | 94-3108575 | 501 (C) 3 | 17,500 | FMV | N/A | FOR RECIPIENT'S EXEM
| (6) NCH HEALTHCARE SYSTEMS INC PO BOX 413029 NAPLES, FL 34101 | 59-2314655 | 501 (C) 3 | 59,000 | FMV | N/A | FOR RECIPIENT'S EXEM
| (7) NDN COLLECTIVE INC 317 MAIN ST STE 1 RAPID CITY, SD 57701 | 82-3776329 | 501 (C) 3 | 8,560 | FMV | N/A | FOR RECIPIENT'S EXEM
| (8) NEADS INC 305 REDEMPTION ROCK TRL S PRINCETON, MA 154 | 23-7281887 | 501 (C) 3 | 64,750 | FMV | N/A | FOR RECIPIENT'S EXEM
| (9) NEAL CASAL MUSIC FOUNDATION INC 39 MUSE RD WOODSTOCK, NY 12498 | 84-4531209 | 501 (C) 3 | 250,000 | FMV | N/A | FOR RECIPIENT'S EXEM
| (10) NEAR & FAR AID ASSOCIATION INC PO BOX 717 SOUTHPORT, CT 6890 | 23-7036523 | 501 (C) 3 | 29,240 | FMV | N/A | FOR RECIPIENT'S EXEM
| (11) NEAR NORTH MONTESSORI SCHOOL 1434 W DIVISION ST CHICAGO, IL 60642 | 36-2535895 | 501 (C) 3 | 6,000 | FMV | N/A | FOR RECIPIENT'S EXEM
| (12) NEAR WEST THEATRE 6702 DETROIT AVE CLEVELAND, OH 44102 | 36-1881815 | 501 (C) 3 | 8,000 | FMV | N/A | FOR RECIPIENT'S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. NEAR WEST VINEYARD CHURCH  
3514 S WASHTENAW AVE CHICAGO, IL 60632  
26-1711591  
501 (c) 3  
33,000. FMV N/A FOR RECIPIENT'S EXEM | 2. NEBRASKA APPLESEED CENTER FOR LAW IN THE PU  
PO BOX 83163 LINCOLN, NE 68501  
47-0798343  
501 (c) 3  
10,500. FMV N/A FOR RECIPIENT'S EXEM | 3. NEBRASKA COMMUNITY FOUNDATION  
PO BOX 83107 LINCOLN, NE 68501  
47-0769903  
501 (c) 3  
1,041,400. FMV N/A FOR RECIPIENT'S EXEM | 4. NEBRASKA FOUNDATION FOR VISUALLY IMPAIRED C  
123 N HAPPY HOLLOW BLVD OMAHA, NE 68132  
47-0456975  
501 (c) 3  
16,500. FMV N/A FOR RECIPIENT'S EXEM | 5. NEBRASKA METHODIST HOSPITAL FOUNDATION  
825 S 169TH ST OMAHA, NE 68118  
47-0595345  
501 (c) 3  
20,000. FMV N/A FOR RECIPIENT'S EXEM | 6. NEBRASKA PEACE FOUNDATION  
PO BOX 83466 LINCOLN, NE 68501  
36-3347131  
501 (c) 3  
25,000. FMV N/A FOR RECIPIENT'S EXEM | 7. NECO FOUNDATION  
208 COLUMBINE DR HERCULES, CA 94547  
27-3067897  
501 (c) 3  
18,000. FMV N/A FOR RECIPIENT'S EXEM | 8. NEEDLES EYE MINISTRIES INC  
104 BERRINGTON CT RICHMOND, VA 23221  
54-1057092  
501 (c) 3  
7,500. FMV N/A FOR RECIPIENT'S EXEM | 9. NEEMA PROJECT  
2 KEVA DR EXTON, PA 19341  
37-1751940  
501 (c) 3  
6,500. FMV N/A FOR RECIPIENT'S EXEM | 10. NEEMAN FOUNDATION USA  
18 HAZELTON RD NEWTON CENTER, MA 2459  
47-3438072  
501 (c) 3  
10,000. FMV N/A FOR RECIPIENT'S EXEM | 11. NEHEMIAH CENTER INC  
5015 FANNIN ST HOUSTON, TX 77004  
76-0437157  
501 (c) 3  
20,500. FMV N/A FOR RECIPIENT'S EXEM | 12. NEIGHBOR TO NEIGHBOR INC  
248 E PUTNAM AVE GREENWICH, CT 6830  
06-6071605  
501 (c) 3  
31,000. FMV N/A FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** □ **No** □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>2</td>
<td>NEIGHBORHOOD HEALTH</td>
<td>91-0893287</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>3</td>
<td>NEIGHBORHOOD BIBLE CHURCH INC</td>
<td>45-4955811</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>NEIGHBORHOOD COALITION FOR SHELTER INC</td>
<td>13-3176586</td>
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<td>FMV</td>
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<td>5</td>
<td>NEIGHBORHOOD GARDENS TRUST</td>
<td>22-2741750</td>
<td>501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
<td>NEIGHBORHOOD HEALTH CARE INCORPORATED</td>
<td>34-1300581</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
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<td>7</td>
<td>NEIGHBORHOOD HEALTH CLINIC INC</td>
<td>59-3546884</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
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<td>8</td>
<td>NEIGHBORHOOD Homework House</td>
<td>95-4713600</td>
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<td>30,000.</td>
<td>FMV</td>
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<td>9</td>
<td>NEIGHBORHOOD HOUSE</td>
<td>41-0693916</td>
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<td>15,773.</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>NEIGHBORHOOD HOUSE CHARTER SCHOOL FOUNDATIO</td>
<td>04-3462888</td>
<td>501 (C) 3</td>
<td>81,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>NEIGHBORHOOD HOUSE OF MILWAUKEE</td>
<td>39-0806269</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>NEIGHBORHOOD MUSIC SCHOOL INC</td>
<td>06-0662152</td>
<td>501 (C) 3</td>
<td>131,985.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>13</td>
<td>NEIGHBORHOOD SERVICE CENTER INC</td>
<td>52-0982396</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Schedule I (Form 990) 2020

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Part II</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>NEIGHBORHOOD TRUST FINANCIAL PARTNERS INC</td>
<td>530 W 166TH ST FL 4 NEW YORK, NY 10032</td>
<td>13-3849263</td>
<td>501 (C) 3</td>
<td>52,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>NEIGHBORIMPACT</td>
<td>2303 SW 1ST ST REDMOND, OR 97756</td>
<td>93-0884929</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>NEIGHBORS BUILDING NEIGHBORHOODS INC</td>
<td>207 N 2ND ST MUKRooKEE, OK 74401</td>
<td>72-1600003</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>NEIGHBORS INC</td>
<td>222 GRAND AVENUE SOUTH SAINT PAUL, MN 55075</td>
<td>41-1360294</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>NEIGHBORS PLACE INC</td>
<td>745 SCOTT ST WAUSAU, WI 54403</td>
<td>39-1640241</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>NEILOM FOUNDATION INC</td>
<td>8824 BURNING TREE RD BETHESDA, MD 20817</td>
<td>46-4177070</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>NELSON GALLERY FOUNDATION</td>
<td>4525 OAK ST KANSAS CITY, MO 64111</td>
<td>46-6012977</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>NEMA FOUNDATION INC</td>
<td>PO BOX 337 TALLULAH FALLS, GA 30573</td>
<td>27-4357830</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>NEO PHILANTHROPY</td>
<td>45 WEST 36TH STREET 6TH FLOOR NEW YORK, NY 13-3191113</td>
<td>13-3191113</td>
<td>501 (C) 3</td>
<td>220,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>NEPAL YOUTH FOUNDATION</td>
<td>1016 LINCOLN BLVD STE 222 SAN FRANCISCO, CA 68-0224596</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>NESKOWIN COAST FOUNDATION</td>
<td>56605 SITKA DR OTIS, OR 97368</td>
<td>23-7087718</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>NESKOWIN VALLEY SCHOOL</td>
<td>10005 SLAB CREEK RD NESKOWIN, OR 97149</td>
<td>23-7207991</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

JSA  
OE1288 1.000  
18674H 1467  
V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
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<tr>
<td>(1)</td>
<td>NETWORK 20 20 INC</td>
<td>34-1983612</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
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<tr>
<td>(2)</td>
<td>NETWORK FOR NEW MUSIC</td>
<td>22-2629436</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>NETWORK FOR RESPONSIBLE PUBLIC POLICY</td>
<td>27-5362982</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>NETWORK FOR TEACHING ENTREPRENEURSHIP</td>
<td>13-3408731</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>NETWORK OF COMMUNITY MINISTRIES INC</td>
<td>75-2060900</td>
<td>501 (C) 3</td>
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<tr>
<td>(6)</td>
<td>NETWORK ON WOMEN IN PRISON</td>
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<td>(9)</td>
<td>NEURO-ACUPUNCTURE INSTITUTE INC</td>
<td>47-4648623</td>
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<td>(11)</td>
<td>NEUROSURGERY RESEARCH AND EDUCATION FOUNDATION</td>
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<td>27,516.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
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<tr>
<td>NEVADA COALITION AGAINST THE DEATH PENALTY</td>
<td>88-0498453</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NEVADA DISCOVERY MUSEUM</td>
<td>61-1474845</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEVADA HUMANE SOCIETY INC</td>
<td>88-0072720</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEVADA POLICY RESEARCH INSTITUTE</td>
<td>88-0276314</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEVADA PUBLIC RADIO</td>
<td>23-7441306</td>
<td>501 (C) 3</td>
<td>9,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEVERTHIRST INC</td>
<td>45-0594639</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW ALBANY EVANGELICAL FREE CHURCH</td>
<td>31-1586415</td>
<td>501 (C) 3</td>
<td>35,400.</td>
<td>FMV</td>
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<td>NEW ALBANY UNITED METHODIST CHURCH</td>
<td>31-0949979</td>
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<td>38,000.</td>
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<td>N/A</td>
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<tr>
<td>NEW ALTERNATIVES FOR LGBT HOMELESS YOUTH INC</td>
<td>27-2151000</td>
<td>501 (C) 3</td>
<td>40,000.</td>
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<td>83-3328307</td>
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<td>NEW BEGINNINGS</td>
<td>91-1005916</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>NEW BEGINNINGS COMMUNITY CHURCH OF THE BAY</td>
<td>46-4868006</td>
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<td>PO BOX 51650 PALO ALTO, CA 94303</td>
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<td>8163 SW CITRUS BLVD PALM CITY, FL 34990</td>
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<td>45,500.</td>
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<td>NEW CANAAN VOLUNTEER AMBULANCE CORPS INC</td>
<td>23-7300265</td>
<td>501 (C) 3</td>
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<tr>
<td>PO BOX 27085 OAKLAND, CA 94602</td>
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<td>299 LEROI RD PITTSBURGH, PA 15208</td>
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<td>ATTN: DONATIONS 47 OLD SCHOOLHOUSE ROAD NEW</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

### General Information on Grants and Assistance

- 1. Name and address of organization or government
- 2. Employer identification number
- 3. IRC section (if applicable)
- 4. Amount of cash grant
- 5. Amount of non-cash assistance
- 6. Method of valuation (book, FMV, appraisal, other)
- 7. Description of noncash assistance
- 8. Purpose of grant or assistance

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>Employer identification number</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>NEW CITY NEIGHBORS 1226 UNION AVE NE GRAND RAPIDS, MI 49505</td>
<td>20-8058756</td>
<td>501 (C) 3</td>
<td>102,500</td>
<td>FMV</td>
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<tr>
<td>NEW CITY PRESBYTERIAN CHURCH 4400 FLORAL AVENUE NORWOOD, OH 45212</td>
<td>27-0618054</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW CLASSROOMS INNOVATION PARTNERS INC 1250 BROADWAY FL 30 NEW YORK, NY 10001</td>
<td>45-2736163</td>
<td>501 (C) 3</td>
<td>185,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW COLLEGE FOUNDATION INCORPORATED 5800 BAY SHORE RD SARASOTA, FL 34243</td>
<td>59-0911744</td>
<td>501 (C) 3</td>
<td>20,050</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW COMMUNITY BAPTIST CHURCH 1250 W MIDDLEFIELD RD MOUNTAIN VIEW, CA 94025</td>
<td>94-3175455</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW COMMUNITY CHURCH 1100 MIDDLE AVE MENLO PARK, WA 98038</td>
<td>94-1207708</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW COMMUNITY CHURCH 21401 244TH AVE SE MAPLE VALLEY, CA 94025</td>
<td>91-1874927</td>
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<td>30,995</td>
<td>FMV</td>
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<tr>
<td>NEW COMMUNITY FOUNDATION INC 614 S ST NW WASHINGTON, DC 20001</td>
<td>31-1775226</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW COMMUNITY PROJECT 117 NATURE RD BLUE RIDGE, VA 24064</td>
<td>20-0092584</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW CONSERVATORY 25 VAN NESS AVE LOWR LV SAN FRANCISCO, CA 94110</td>
<td>94-2778856</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW COVENANT BIBLE CHURCH 3090 N CENTER POINT RD CEDAR RAPIDS, IA 52401</td>
<td>51-0139200</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<td>NEW COVENANT BIBLE CHURCH 40780 RANDALL RD SAINT CHARLES, IL 60175</td>
<td>36-2884380</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) NEW COVENANT PRESBYTERIAN CHURCH 526 HITCHCOCK PKWY AIKEN, SC 29801</td>
<td>57-0765929</td>
<td>501 (C) 3</td>
<td>86,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) NEW DAY CHURCH INC 310 W 106TH ST KANSAS CITY, MO 64114</td>
<td>03-0574502</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) NEW DESTINY HOUSING CORPORATION 12 W 37TH ST FL 7 NEW YORK, NY 10018</td>
<td>13-3798489</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) NEW DOOR VENTURES 3221 20TH ST SAN FRANCISCO, CA 94110</td>
<td>94-2780274</td>
<td>501 (C) 3</td>
<td>100,817.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) NEW ENGLAND AQUARIUM CORPORATION CENTRAL WHARF BOSTON, MA 2110</td>
<td>04-2297514</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(6) NEW ENGLAND CONSERVATORY OF MUSIC 290 HUNTINGTON AVE BOSTON, MA 2115</td>
<td>23-7225104</td>
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<td>(7) NEW ENGLAND FORESTRY FOUNDATION INC 32 FOSTER ST LITTLETON, MA 1460</td>
<td>04-2024022</td>
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<td>100,500.</td>
<td>FMV</td>
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<td>(8) NEW ENGLAND GRASSROOTS ENVIRONMENT FUND INC PO BOX 611 NEWMARKET, NH 3857</td>
<td>03-0364677</td>
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<td>17,500.</td>
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<td>(9) NEW ENGLAND HISTORIC GENEALOGICAL SOCIETY I 99 NEWBURY ST # 101 BOSTON, MA 2116</td>
<td>04-2104757</td>
<td>501 (C) 3</td>
<td>7,600.</td>
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<td>(10) NEW ENGLAND INTERNATIONAL DONORS INC P.O. BOX 24 WATERTOWN, MA 2116</td>
<td>84-2081722</td>
<td>501 (C) 3</td>
<td>6,500.</td>
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<td>(11) NEW ENGLAND KURN HATTIN HOMES 708 KURN HATTIN RD WESTMINSTER, VT 5158</td>
<td>03-0179306</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>(12) NEW ENGLAND LIFE FLIGHT INC 150 HANSCOM DR BEDFORD, MA 1730</td>
<td>22-2582060</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
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<tbody>
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<td><strong>1</strong></td>
<td><strong>(a)</strong> Name and address of organization or government</td>
<td><strong>(b)</strong> EIN</td>
<td><strong>(c)</strong> IRC section (if applicable)</td>
<td><strong>(d)</strong> Amount of cash grant</td>
<td><strong>(e)</strong> Amount of non-cash assistance</td>
<td><strong>(f)</strong> Method of valuation (book, FMV, appraisal, other)</td>
<td><strong>(g)</strong> Description of noncash assistance</td>
</tr>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>(2)</strong></td>
<td>NEW ENGLAND THEOLOGICAL SEMINARY</td>
<td>03-0365063</td>
<td>501 (C) 3</td>
<td>11,050.</td>
<td>FMV</td>
<td>N/A</td>
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<td><strong>(3)</strong></td>
<td>NEW ENGLAND YEARLY MEETING OF FRIENDS</td>
<td>05-6002914</td>
<td>501 (C) 3</td>
<td>5,900.</td>
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<td><strong>(4)</strong></td>
<td>NEW EYES FOR THE NEEDY INC</td>
<td>22-1539720</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td><strong>(5)</strong></td>
<td>NEW FLORIDA MAJORITY EDUCATION FUND INC</td>
<td>45-3956785</td>
<td>501 (C) 3</td>
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<td><strong>(6)</strong></td>
<td>NEW FRONTIER MINISTRIES INC</td>
<td>46-2783798</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td><strong>(7)</strong></td>
<td>NEW FUTURES</td>
<td>52-2180378</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td><strong>(8)</strong></td>
<td>NEW GEORGIA PROJECT INCORPORATED</td>
<td>82-1348307</td>
<td>501 (C) 3</td>
<td>254,875.</td>
<td>FMV</td>
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<td><strong>(9)</strong></td>
<td>NEW GROUP INC</td>
<td>13-3613115</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td><strong>(10)</strong></td>
<td>NEW HAMPSHIRE BOAT MUSEUM</td>
<td>02-0464218</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td><strong>(11)</strong></td>
<td>NEW HAMPSHIRE CATHOLIC CHARITIES INC</td>
<td>02-0222163</td>
<td>501 (C) 3</td>
<td>79,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td><strong>(12)</strong></td>
<td>NEW HAMPSHIRE CHARITABLE FOUNDATION</td>
<td>02-6005625</td>
<td>501 (C) 3</td>
<td>108,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1)</td>
<td>NEW HAMPSHIRE HISTORICAL SOCIETY</td>
<td>02-0233250</td>
<td>501 (C) 3</td>
<td>7,200</td>
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<td>(2)</td>
<td>NEW HAMPSHIRE LAKES ASSOCIATION INC</td>
<td>22-2668396</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>NEW HAMPSHIRE LODGING &amp; RESTAURANT ASSOCIATION</td>
<td>59-3799099</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>(4)</td>
<td>NEW HAMPSHIRE PRESERVATION ALLIANCE</td>
<td>22-2630277</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
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<td>(5)</td>
<td>NEW HAMPSHIRE PUBLIC RADIO INC</td>
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<td>(6)</td>
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<td>NEW HAMPTON SCHOOL</td>
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<td>(8)</td>
<td>NEW HARTFORD LAND CONSERVATION TRUST INC</td>
<td>23-7325477</td>
<td>501 (C) 3</td>
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<td>NEW HARVEST INC</td>
<td>20-1425438</td>
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<td>NEW HAVEN UNITED REFORMED CHURCH INC</td>
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<td>(11)</td>
<td>NEW HEIGHTS CHURCH</td>
<td>46-1868109</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(12)</td>
<td>NEW HEIGHTS CHURCH</td>
<td>73-1612212</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
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<th>1(d) Amount of cash grant</th>
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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) NEW HILLEL ACADEMY 4737 DEERFIELD PL VESTAL, NY 13850 15-0624960 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(2) NEW HOPE EVANGELICAL CHURCH 20080 FINEBROOK BLVD BEND, OR 97702 93-0942103 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(3) NEW HOPE FOR WOMEN INC PO BOX A ROCKLAND, ME 04841 01-0377246 501 (C) 3 5,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(4) NEW HOPE MINISTRIES INC 99 W CHURCH ST DILLSBURG, PA 17019 23-2223120 501 (C) 3 35,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(5) NEW HOPE OF ORANGE COUNTY 13 RACING WIND IRVINE, CA 92614 84-4633211 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(6) NEW HOPE REFORMED CHURCH REFORMED CHURCH IN 4739 POWELL RD POWELL, OH 43065 31-1121312 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(7) NEW HOPE RESEARCH FOUNDATION INC 6 CHARLEY LAKE CT SAINT PAUL, MN 55127 87-0790903 501 (C) 3 168,287. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(8) NEW HORIZONS OF SOUTHWEST 25300 BERNWOOD DR STE 1 BONITA SPRINGS, FL 11-3678086 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(9) NEW HORIZONS RANCH AND CENTER INC 147 SAYLES BLVD ABILENE, TX 79605 75-1530340 501 (C) 3 14,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(10) NEW ISRAEL FUND 2100 M ST NW STE 619 WASHINGTON, DC 20037 94-2607722 501 (C) 3 199,025. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) NEW JERSEY AUDUBON SOCIETY 9 HARDSCRABBLE RD BERNARDSVILLE, NJ 7924 22-1539642 501 (C) 3 11,900. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(12) NEW JERSEY CENTER FOR JUDAIC STUDIES 415 6TH ST LAKENWOOD, NJ 08701 22-2388999 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>NEW JERSEY CENTER FOR VISUAL ARTS A NEW JER</td>
<td>68 ELM ST SUMMIT, NJ 7901</td>
<td>22-6046896</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>NEW JERSEY COMMUNITY DEVELOPMENT CORPORATION</td>
<td>32 SPRUCE STREET 3RD FLOOR PATerson, NJ 750</td>
<td>22-3282526</td>
<td>501 (C) 3</td>
<td>1,000,000</td>
<td>FMV</td>
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<td>3</td>
<td>NEW JERSEY CONSERVATION FOUNDATION</td>
<td>170 LONGVIEW RD FAR HILLS, NJ 7931</td>
<td>22-6065456</td>
<td>501 (C) 3</td>
<td>12,750</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>NEW JERSEY FEDERATION OF YNG MENS HEBREW AS</td>
<td>21 PLYMOUTH ST FAIRFIELD, NJ 7004</td>
<td>22-1487266</td>
<td>501 (C) 3</td>
<td>25,000</td>
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<td>5</td>
<td>NEW JERSEY HIGHLANDS COALITION</td>
<td>508 MAIN ST BOONTON, NJ 7005</td>
<td>68-0636424</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>6</td>
<td>NEW JERSEY INSTITUTE OF TECHNOLOGY FOUNDATION</td>
<td>UNIVERSITY HEIGHTS NEWARK, NJ 7102</td>
<td>22-1714037</td>
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<td>112,000</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW JERSEY PERFORMING ARTS CENTER CORPORATI</td>
<td>1 CENTER ST NEWARK, NJ 7102</td>
<td>22-2889703</td>
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<td>35,400</td>
<td>FMV</td>
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<td>8</td>
<td>NEW JERSEY SEEDS INC</td>
<td>494 BROAD ST STE 105 NEWARK, NJ 7102</td>
<td>22-3181507</td>
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<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>NEW JERSEY SYMPHONY ORCHESTRA</td>
<td>60 PARK PL STE 900 NEWARK, NJ 7102</td>
<td>22-1559422</td>
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<td>36,000</td>
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<td>10</td>
<td>NEW JOURNEY COMMUNITY OUTREACH INC</td>
<td>138 S 6TH ST READING, PA 19602</td>
<td>46-3623955</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>NEW LEAF-NEW LIFE INC</td>
<td>1010 S WALNUT ST STE H BLOOMINGTON, IN 4740</td>
<td>20-3168603</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>NEW LIFE ASSEMBLY</td>
<td>899 BROAD ST SUMMERSVILLE, WV 26651</td>
<td>27-1676597</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1.</td>
<td>NEW LIFE CHURCH 11025 VOYAGER PKE COLORADO SPRINGS, CO 809</td>
<td>74-2364530</td>
<td>501 (C) 3</td>
<td>63,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2.</td>
<td>NEW LIFE CHURCH OF ARKANSAS INC 633 S COUNTRY CLUB RD CONWAY, AR 72034</td>
<td>71-0846598</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>NEW LIFE CHURCH OF PHILADELPHIA 425 E ROOSEVELT BLVD PHILADELPHIA, PA 19120</td>
<td>23-2281863</td>
<td>501 (C) 3</td>
<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4.</td>
<td>NEW LIFE CHURCH OF THE NAZARENE 5900 CHERRY GLEN RD VACAVILLE, CA 95688</td>
<td>23-7369610</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5.</td>
<td>NEW LIFE COMMUNITY CHURCH OF ASHEVILLE NEW LIFE COMMUNITY CHURCH OF ASHEV ASHEVILLE</td>
<td>56-2060311</td>
<td>501 (C) 3</td>
<td>96,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>NEW LIFE FOR YOUTH INC PO BOX 13526 RICHMOND, VA 23225</td>
<td>23-7225441</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7.</td>
<td>NEW LIFE IN CHRIST BAPTIST CHURCH INC PO BOX 140099 DENVER, CO 80214</td>
<td>84-0747743</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8.</td>
<td>NEW LIFE MINISTRIES 12201 LAKE CENTER DR STE 100 LAKE FOREST, C</td>
<td>75-2785010</td>
<td>501 (C) 3</td>
<td>129,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>NEW LIFE MINISTRIES INC PO BOX 2096 WAKE FOREST, NC 27588</td>
<td>56-1177254</td>
<td>501 (C) 3</td>
<td>8,635.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10.</td>
<td>NEW LIFE MISSION OF SEVENTH-DAY ADVENTIST I</td>
<td>73-1503915</td>
<td>501 (C) 3</td>
<td>12,321.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>NEW LIFE ORPHANAGES INTERNATIONAL INC PO BOX 2754 HAINES CITY, FL 33845</td>
<td>20-3531914</td>
<td>501 (C) 3</td>
<td>14,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12.</td>
<td>NEW LIFE PRESBYTERIAN CHURCH OF ORANGE COUN 1430 E ORANGTHORPE AVE FULLERTON, CA 92831</td>
<td>84-21731849</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
</tr>
<tr>
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<td>1</td>
<td>NEW LIFE SOLUTIONS INC</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2</td>
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<td>4</td>
<td>NEW MEXICO CENTER ON LAW AND POVERTY INC</td>
<td>85-0437960</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
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<td>5</td>
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<td>93-0792163</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>6</td>
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<td>8</td>
<td>NEW MEXICO STATE BAR FOUNDATION</td>
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<td>501 (C) 3</td>
<td>20,000.</td>
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<td>9</td>
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<td>10</td>
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<td>11</td>
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<td>12</td>
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<td>36-3265804</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>NEW MUSEUM OF CONTEMPORARY ART</td>
<td>13-2986881</td>
<td>501 (C) 3</td>
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<td>235 BOWERY NEW YORK, NY 10002</td>
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<td>NEW NARRATIVE</td>
<td>93-0685734</td>
<td>501 (C) 3</td>
<td>7,900</td>
<td>FMV</td>
<td>N/A</td>
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<td>NEW NORTH CHURCH INC</td>
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<tr>
<td>355 GELLERT BLVD STE 140 DALY CITY, CA 9401</td>
<td>82-1170173</td>
<td>501 (C) 3</td>
<td>18,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>NEW ORLEANS BAPTIST THEOLOGICAL SEMINARY</td>
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<tr>
<td>3939 GENTILLY BLVD NEW ORLEANS, LA 70126</td>
<td>72-0494592</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NEW ORLEANS JAZZ &amp; HERITAGE FOUNDATION INC</td>
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<td>1205 N RAMPART ST NEW ORLEANS, LA 70116</td>
<td>72-0692744</td>
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<td>FMV</td>
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<tr>
<td>NEW ORLEANS MUSEUM OF ART</td>
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<td>1 COLLINS DIBOLL CIR NEW ORLEANS, LA 70124</td>
<td>72-6000331</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>NEW ORLEANS MUSICIANS ASSISTANCE FOUNDATION</td>
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<tr>
<td>1525 LOUISIANA AVE NEW ORLEANS, LA 70115</td>
<td>20-8139539</td>
<td>501 (C) 3</td>
<td>31,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>NEW PALESTINE BAPTIST CHURCH</td>
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<td>2336 PALESTINE RD PICAYUNE, MS 39466</td>
<td>64-0439815</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NEW PROFIT INC</td>
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<td>225 FRANKLIN ST STE 350 BOSTON, MA 2110</td>
<td>04-3396766</td>
<td>501 (C) 3</td>
<td>205,750</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>703 WEST BROADWAY AVENUE MARYVILLE, TN 3780</td>
<td>62-0475838</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NEW REACH INC</td>
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<td>269 PECK ST NEW HAVEN, CT 6513</td>
<td>22-3037451</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>NEW RIVER CHURCH COMMUNITY INC</td>
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<td>670 LINCOLN AVE STE 200 SAN JOSE, CA 95126</td>
<td>45-0567399</td>
<td>501 (C) 3</td>
<td>17,775</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  
**General Information on Grants and Assistance**  
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
|1  | NEW RIVER LAND TRUST  
PO BOX K BLACKSBURG, VA 24063                  | 54-2053383 | 501 (C) 3                     | 13,500.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|2  | NEW ROADS SCHOOL                                   | 95-4823489 | 501 (C) 3                     | 23,888.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|3  | NEW SCHOOL OF LANCASTER                           | 23-2611314 | 501 (C) 3                     | 320,000.                 | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|4  | NEW STORY INC                                     | 47-2529408 | 501 (C) 3                     | 375,000.                 | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|5  | NEW SUFFOLK WATERFRONT FUND INC                  | 20-4437085 | 501 (C) 3                     | 5,500.                   | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|6  | NEW THAI VERSION FOUNDATION                      | 84-3311893 | 501 (C) 3                     | 90,000.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|7  | NEW VENTURE FUND                                  | 20-5806345 | 501 (C) 3                     | 940,000.                 | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|8  | NEW VISION CHURCH OF NORTHERN CALIFORNIA           | 77-0063866 | 501 (C) 3                     | 19,000.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|9  | NEW VISIONS FOR PUBLIC SCHOOLS INC                | 13-3538961 | 501 (C) 3                     | 91,000.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|10 | NEW VOCATION RACEHORSE ADOPTION PROGRAM           | 31-1681380 | 501 (C) 3                     | 8,500.                   | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|11 | NEW WORLD SYMPHONY INC                           | 59-2809056 | 501 (C) 3                     | 61,500.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |
|12 | NEW WORLD UNITY CHURCH                            | 54-1875683 | 501 (C) 3                     | 48,000.                  | FMV                           | N/A                               | FOR RECIPIENT'S EXEM            |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tr>
<td>NEW YIDDISH REPERTORY THEATER INC</td>
<td>26-2263099</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>NEW YORK AND PRESBYTERIAN HOSPITAL</td>
<td>13-3957095</td>
<td>501 (C) 3</td>
<td>129,500.</td>
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<td>N/A</td>
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<td>NEW YORK APPLEGROVE INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>NEW YORK ASIAN WOMENS CENTER INC</td>
<td>13-3286250</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW YORK BOARD OF RABBIS INC</td>
<td>13-1809283</td>
<td>501 (C) 3</td>
<td>49,540.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW YORK BOTANICAL GARDEN</td>
<td>13-1693134</td>
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<td>60,100.</td>
<td>FMV</td>
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<tr>
<td>NEW YORK BULLY CREW</td>
<td>27-4846322</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW YORK CARES INC</td>
<td>13-3444193</td>
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<td>FMV</td>
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<td>NEW YORK CATHOLIC FOUNDATION INC</td>
<td>20-4763501</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW YORK CITY AUDUBON SOCIETY INC</td>
<td>13-3057954</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NEW YORK CITY BALLET, INC.</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<tr>
<td>NEW YORK CITY GAY AND LESBIAN ANTI-VIOLENCE</td>
<td>164 NASSAU ST NEW YORK, NY 10038</td>
<td>13-3149200</td>
<td>501 (C) 3</td>
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<td>NEW YORK CITY HEALTH AND HOSPITALS CORPORAT</td>
<td>50 WATER ST FL 3 NEW YORK, NY 10004</td>
<td>13-2655001</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEW YORK CITY MISSION SOCIETY</td>
<td>646 MALCOLM X BLVD NEW YORK, NY 10037</td>
<td>13-5562301</td>
<td>501 (C) 3</td>
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<tr>
<td>NEW YORK CITY RELIEF INC</td>
<td>295 WALNUT ST ELIZABETH, NJ 7201</td>
<td>11-2974154</td>
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<td>27,500.</td>
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<td>NEW YORK CITY RESCUE MISSION</td>
<td>355 LEXINGTON AVE FL 19 NEW YORK, NY 10017</td>
<td>13-5596794</td>
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<td>NEW YORK CONSOLIDATED</td>
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<td>NEW YORK FESTIVAL OF SONG INC</td>
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<td>NEW YORK FOUNDATION FOR THE ARTS INC</td>
<td>20 JAY ST STE 740 BROOKLYN, NY 11201</td>
<td>23-7129564</td>
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<td>NEW YORK HALL OF SCIENCE</td>
<td>4701 111TH ST CORONA, NY 11368</td>
<td>11-2104059</td>
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<td>174,500.</td>
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<td>NEW YORK HARBOR FOUNDATION INC</td>
<td>10 SOUTH ST BUILDING SLIP 7 NEW YORK, NY 10011</td>
<td>27-2918478</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. NEW YORK HISTORICAL SOCIETY</td>
<td>13-1624124</td>
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<td>2. NEW YORK IMMIGRATION COALITION INC</td>
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<td>3. NEW YORK JUNIOR TENNIS LEAGUE INC</td>
<td>23-7442256</td>
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<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4. NEW YORK LAWYERS FOR THE PUBLIC INTEREST IN</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5. NEW YORK MEDICAL COLLEGE</td>
<td>13-1099420</td>
<td>501 (C) 3</td>
<td>13,508.</td>
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<td>6. NEW YORK OPERA SOCIETY INC</td>
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<td>8. NEW YORK PUBLIC RADIO</td>
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<td>501 (C) 3</td>
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<td>9. NEW YORK ROAD RUNNERS INC</td>
<td>13-2949483</td>
<td>501 (C) 3</td>
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<td>10. NEW YORK SCHOOL OF INTERIOR DESIGN</td>
<td>13-1662715</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11. NEW YORK SHAKESPEARE FESTIVAL</td>
<td>13-1844852</td>
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<tr>
<td>12. NEW YORK SKI EDUCATION FOUNDATION INC</td>
<td>14-1577846</td>
<td>501 (C) 3</td>
<td>24,722.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

## Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>NEW YORK SOCIETY FOR THE RELIEF OF RUPTURED</td>
<td>13-1624135</td>
<td>501 (c) 3</td>
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<tr>
<td>2</td>
<td>NEW YORK SOCIETY LIBRARY TRUSTEES</td>
<td>13-1635307</td>
<td>501 (c) 3</td>
<td>318,010</td>
<td>FMV</td>
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<td>3</td>
<td>NEW YORK STATE YOUTH LEADERSHIP COUNCIL INC</td>
<td>26-3599242</td>
<td>501 (c) 3</td>
<td>6,500</td>
<td>FMV</td>
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<td>4</td>
<td>NEW YORK STEM CELL FOUNDATION INC</td>
<td>20-2905531</td>
<td>501 (c) 3</td>
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<tr>
<td>5</td>
<td>NEW YORK THEATRE WORKSHOP INC</td>
<td>13-3131491</td>
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<td>8</td>
<td>NEW YORK WOMENS FOUNDATION</td>
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<td>9</td>
<td>NEW YORK YACHT CLUB FOUNDATION</td>
<td>20-8288446</td>
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<td>20-8452673</td>
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<td>11</td>
<td>NEW YORKERS AGAINST GUN VIOLENCE EDUCATION</td>
<td>13-3808186</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>12</td>
<td>NEW YORKERS FOR CHILDREN INC</td>
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<td>33,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   
   Yes [X]  
   
   No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

### Part II

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>22-6042838</td>
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<td>NEW YORK-PRESBYTERIAN FUND INC</td>
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<td>NEW YORK-PRESBYTERIAN LAWRENCE HOSPITAL</td>
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<td>NEW ZOOLOGICAL SOCIETY INC</td>
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<td>NEWARK MENTORING MOVEMENT INC</td>
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<td>NEWARK MUSEUM ASSOCIATION</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NEWARK PUBLIC RADIO INC</td>
<td>22-2137728</td>
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<td>NEWSDAY CHRISTIAN SEVENTH-DAY ADVENTIST CHURCH</td>
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<td>NEWLIFE CHURCH INC.</td>
<td>42-1517631</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations,**
**Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2. NEWLONSBURG PRESBYTERIAN CHURCH</td>
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<td>3. NEWMAN CATHOLIC STUDENT CENTER, UNIVERSITY</td>
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<td>5. NEWMAN CENTER</td>
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<td>6. NEWPORT CENTER UNITED METHODIST CHURCH</td>
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<td>7. NEWPORT PRESBYTERIAN CHURCH</td>
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</tr>
<tr>
<td>8. NEWVIEW OKLAHOMA INC</td>
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</tr>
<tr>
<td>9. 1000 COMMONWEALTH AVE NEWTON CENTER, MA 245</td>
<td></td>
<td></td>
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<tr>
<td>11. NEWTON FOOD PANTRY INC</td>
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<tr>
<td>12. NEWS LITERACY PROJECT INC</td>
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</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

---

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) NEXT FOR AUTISM INC</td>
<td>57-1136147</td>
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<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>8TH FLOOR NEW YORK, NY 10018</td>
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<td>(2) NEXT GEN PERSONAL FINANCE</td>
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<td>FMV</td>
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<td>510 WAVERLEY ST PALO ALTO, CA 94301</td>
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<td>4447 REDONDO BEACH BLVD LAWNDALE, CA 90260</td>
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<td>(4) NEXTTALK</td>
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<tr>
<td>PO BOX 160111 SAN ANTONIO, TX 78280</td>
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<td>(7) NICKS NETWORK OF HOPE NFP</td>
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<td>FMV</td>
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<td>952 WATERCRESS DR NAPERVILLE, IL 60540</td>
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<td>(8) NICOLAYSEN ART MUSEUM</td>
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<td>10,000.</td>
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<td>400 E COLLINS DR CARPER, KY 82601</td>
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<td>(9) NIGHT MINISTRY</td>
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<td>154,775.</td>
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<td>N/A</td>
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<td>4711 N RAVENSWOOD AVE CHICAGO, IL 60640</td>
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<td>(10) NIGHTINGALE-BAMFORD SCHOOL</td>
<td>13-1106710</td>
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<td>28,500.</td>
<td>FMV</td>
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<tr>
<td>20 E 92ND ST NEW YORK, NY 10128</td>
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<tr>
<td>(11) NILE SWIM CLUB OF YEADON</td>
<td>23-1548879</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>513 SOUTH UNION AVE LANSDOWNE, PA 19050</td>
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<tr>
<td>(12) NINETEENTH STREET BAPTIST CHURCH</td>
<td>53-0186726</td>
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<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>4606 16TH ST NW WASHINGTON, DC 20011</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NISGUA</td>
<td>337 17TH ST STE 212 OAKLAND, CA 94612</td>
<td>52-1650978</td>
<td>501 (C) 3</td>
<td>5,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>NISHIMACHI FOUNDATION</td>
<td>THE CORP TRUST COMPANY 1209 ORANGE ST WILMING</td>
<td>51-0257671</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>NK MISSIONS INC</td>
<td>5109 FIRETHORNE CT FAIRFAX, VA 22030</td>
<td>47-2061182</td>
<td>501 (C) 3</td>
<td>8,500</td>
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<tr>
<td>4</td>
<td>N-LOREM FOUNDATION</td>
<td>2888 LOKER AVE E CARLSBAD, CA 92010</td>
<td>84-3288113</td>
<td>501 (C) 3</td>
<td>500,000</td>
<td>FMV</td>
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<tr>
<td>5</td>
<td>NO LIMITS CAFE</td>
<td>418 STATE ROUTE 35 RED BANK, NJ 7701</td>
<td>82-2795043</td>
<td>501 (C) 3</td>
<td>5,850</td>
<td>FMV</td>
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<td>6</td>
<td>NO MEANS NO WORLDWIDE</td>
<td>1765 GREENSBORO STATION PL STE 900 MC LEAN,</td>
<td>46-4183160</td>
<td>501 (C) 3</td>
<td>350,000</td>
<td>FMV</td>
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<td>7</td>
<td>NO ONE LEFT BEHIND INC</td>
<td>PO BOX 3641 MERRIFIELD, VA 22116</td>
<td>47-1251659</td>
<td>501 (C) 3</td>
<td>31,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>NO PENNY OPERA</td>
<td>937 SHOTWELL ST SAN FRANCISCO, CA 94110</td>
<td>94-3184802</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>NO US WITHOUT YOU LA</td>
<td>768 S BOYLE AVE LOS ANGELES, CA 90023</td>
<td>85-0878455</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>NOAHS ARK SPCA-HUMANE SOCIETY</td>
<td>PO BOX 405 GAINESVILLE, TX 76241</td>
<td>75-3060874</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>NOAHS ARKS RESCUE</td>
<td>4084 SPRING IS OKATIE, SC 29909</td>
<td>26-2553174</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
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<td>12</td>
<td>NOANK BAPTIST CHURCH</td>
<td>18 CATHEDRAL HTS GROTON, CT 6340</td>
<td>06-0776996</td>
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<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<tbody>
<tr>
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<td>NOBELITY PROJECT</td>
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<td>2</td>
<td>NOBLE AND GREENOUGH SCHOOL</td>
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<td>NOBLE NETWORK OF CHARTER SCHOOLS</td>
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<td>501 (C) 3</td>
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<td>4</td>
<td>NOBLE WARRIORS INC</td>
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<td>FMV</td>
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<td>5</td>
<td>NOLAN RYAN FOUNDATION</td>
<td>76-0290880</td>
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<td>47-1085042</td>
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<td>FMV</td>
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## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2. NORD CENTER</td>
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<td>54-0551901</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>4. NORFOLK BOTANICAL GARDEN INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>5. NORFOLK CHRISTIAN SCHOOLS</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6. NORFOLK SOCIETY FOR THE PREVENTION OF CRUEL</td>
<td>54-0515759</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. NORMAN &amp; LEVENTHAL MAP &amp; EDUCATION CENTER I</td>
<td>26-0887197</td>
<td>501 (C) 3</td>
<td>25,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. NORMAN PARK FOUNDATION INC</td>
<td>73-1230600</td>
<td>501 (C) 3</td>
<td>15,798.00</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. NORMANDALE EVANGELICAL LUTHER CHURCH OF E</td>
<td>41-0838961</td>
<td>501 (C) 3</td>
<td>57,500.00</td>
<td>FMV</td>
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<td>10. NORMANDALE HOUSING CORPORATION</td>
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<td>11. NORMANDY INSTITUTE</td>
<td>47-4866124</td>
<td>501 (C) 3</td>
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<td>12. NOROTON PRESBYTERIAN CHURCH</td>
<td>06-0646751</td>
<td>501 (C) 3</td>
<td>75,500.00</td>
<td>FMV</td>
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</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>NORRIS FERRY COMMUNITY CHURCH</td>
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<td>NORTH AMERICAN BAPTIST SEMINARY</td>
<td>2100</td>
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<td>NORTH AMERICAN MISSION BOARD OF THE SOUTHER</td>
<td>4200</td>
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<td>FMV</td>
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<tr>
<td>NORTH AND SOUTH RIVERS WATERSHED ASSOCIATION</td>
<td>4000</td>
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<td>FMV</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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### General Information on Grants and Assistance

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   - No

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>NORTH BROADWAY UNITED METHODIST CHURCH</td>
<td>31-4379522</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH BY NORTHEAST COMMUNITY HEALTH CENTER</td>
<td>714 NE ALBERTA ST PORTLAND, OR 97211</td>
<td>501 (c) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NORTH CAROLINA ASIAN AMERICANS TOGETHER</td>
<td>81-3125435</td>
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<td>20,000.</td>
<td>FMV</td>
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<td>NORTH CAROLINA CENTER FOR THE CARE OF HUNTED</td>
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<td>26,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH CAROLINA COASTAL LAND TRUST</td>
<td>3 PINE VALLEY DR WILMINGTON, NC 28412</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH CAROLINA COMMUNITY FOUNDATION INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH CAROLINA PERFORMING ARTS CENTER AT CH</td>
<td>58-1791724</td>
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<td>NORTH CAROLINA SCHOOL OF SCIENCE &amp; MATHEMAT</td>
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<td>NORTH CAROLINA STATE UNIVERSITY ALUMNI ASSO</td>
<td>56-6035544</td>
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<td>56-6049503</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Part I  General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [x]  No  

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tbody>
<tr>
<td>NORTH CAROLINA SUSTAINABLE ENERGY ASSOCIATION</td>
<td>58-1342588</td>
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<td>NORTH CAROLINA SYMPHONY SOCIETY INC</td>
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<tr>
<td>NORTH CASCADES INSTITUTE</td>
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<td>FMV</td>
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<td>FMV</td>
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<tr>
<td>NORTH COAST LAND CONSERVANCY INC</td>
<td>93-0957815</td>
<td>501 (c) 3</td>
<td>103,000.</td>
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<td>NORTH COAST REPERTORY THEATRE A NON PROFIT</td>
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<td>FMV</td>
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<tr>
<td>NORTH COUNTRY ANIMAL LEAGUE INC</td>
<td>03-0344067</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tbody>
<tr>
<td>NORTH COUNTRY SCHOOL INC</td>
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<td>14-1430542</td>
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<td>22,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NORTH COUNTY CHRIST THE KING COMMUNITY CHURCH</td>
<td>1816 18TH ST LYNDEN, WA 98264</td>
<td>91-2079920</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH COUNTY IMMIGRATION AND CITIZENSHIP CE</td>
<td>120 STEVENS AVE SOLANA BEACH, CA 92075</td>
<td>46-2522640</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4254 COLONIAL AVE ROANOKE, VA 24018</td>
<td>54-0699572</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH DAKOTA STATE UNIVERSITY FOUNDATION</td>
<td>1241 UNIVERSITY DR N FARGO, ND 58102</td>
<td>23-7120898</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NORTH DALLAS SHARED MINISTRIES INC</td>
<td>2875 MERRELL RD DALLAS, TX 75229</td>
<td>75-1908563</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH DALLAS UNITED PENTECOSTAL CHURCH</td>
<td>18610 MARSH LANE DALLAS, TX 75287</td>
<td>75-1942346</td>
<td>501 (C) 3</td>
<td>12,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTH EAST PARK BAPTIST CHURCH</td>
<td>3737 IST ST NE SAINT PETERSBURG, FL 33704</td>
<td>59-0479138</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>NORTH EASTERN STRATEGIC ALLIANCE INC</td>
<td>PO BOX 100547 FLORENCE, SC 29502</td>
<td>30-0128034</td>
<td>501 (C) 3</td>
<td>33,333.</td>
<td>FMV</td>
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<td>NORTH FULTON COMMUNITY CHARITIES INC</td>
<td>11270 ELKINS RD ROSWELL, GA 30076</td>
<td>58-1521088</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
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<tr>
<td>NORTH GEORGIA CAMP AND RETREAT MINISTRIES I</td>
<td>690 CAMP GLISSON RD DAHLONEGA, GA 30033</td>
<td>58-0633975</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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(Form 990)

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

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<tr>
<td>1</td>
<td>NORTH HARRIS MONTGOMERY COMMUNITY COLLEGE D</td>
<td>76-0336902</td>
<td>501 (C) 3</td>
<td>120,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>NORTH IDAHO COLLEGE FOUNDATION INC</td>
<td>82-0337334</td>
<td>501 (C) 3</td>
<td>23,020.</td>
<td>FMV</td>
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<td>3</td>
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<td>82-0337334</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>4</td>
<td>NORTH LITTLETON PROMISE</td>
<td>26-0125179</td>
<td>501 (C) 3</td>
<td>10,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>NORTH METRO CHURCH - MARIETTA, GA</td>
<td>58-2412956</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
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<td>6</td>
<td>NORTH NAPLES UNITED METHODIST CHURCH</td>
<td>6874H-0E1288</td>
<td>501 (C) 3</td>
<td>39,100.</td>
<td>FMV</td>
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<td>7</td>
<td>NORTH OKLAHOMA COUNTY MENTAL HEALTH CENTER</td>
<td>2617 GENERAL FERSHING BLVD OKLAHOMA CITY, OK</td>
<td>73-1134099</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>NORTH PENN VOLUNTEER FIRE CO</td>
<td>141 S MAIN ST NORTH WALES, PA</td>
<td>23-0922523</td>
<td>6,470.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>NORTH POINT MINISTRIES FOUNDATION INC</td>
<td>20-5420008</td>
<td>501 (C) 3</td>
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<tr>
<td>4350 Nポイント キャンパス アルファレッタ、GA 30022</td>
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<td>NORTH POINT MINISTRIES INC.</td>
<td>58-2203569</td>
<td>501 (C) 3</td>
<td>99,403.</td>
<td>FMV</td>
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<td>NORTH RIDGE COMMUNITY CHURCH SPRING BROOK</td>
<td>26-2813591</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>SPRING BROOK DR JOHNSON CITY, TN 37601</td>
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<td>NORTH SCOTTSDALE UNITED METHODIST CHURCH</td>
<td>86-0333830</td>
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<td>FMV</td>
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<td>NORTH SHORE ANIMAL LEAGUE AMERICA INC</td>
<td>11-1666852</td>
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<td>14,750.</td>
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<td>9 HART ST BEVERLY, MA 1915</td>
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<td>NORTH SHORE COMMUNITY DEVELOPMENT COALITION</td>
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<td>FMV</td>
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<td>96 LAFAYETTE ST SALMA, MA 1970</td>
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<td>NORTH SHORE COUNTRY DAY SCHOOL</td>
<td>36-1558460</td>
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<td>16,275.</td>
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<td>310 GREEN BAY RD WINNETKA, IL 60093</td>
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<tr>
<td>PO BOX 65O YOSTER BAY, NY 11771</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ✔ Yes  ❌ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th></th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>NORTH SHORE UNITARIAN CHURCH 2100 HALF DAY RD DEERFIELD, IL 60015</td>
<td>36-6009529</td>
<td>501 (C) 3</td>
<td>6,675.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>NORTH SHORE UNIVERSITY HOSPITAL 972 BRUSH HOLLOW RD FL 5 WESTBURY, NY 11590</td>
<td>11-1562701</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>NORTH STAR FUND INC 520 8TH AVE NEW YORK, NY 10018</td>
<td>13-2950801</td>
<td>501 (C) 3</td>
<td>262,500.</td>
<td>FMV</td>
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<td>4</td>
<td>NORTH SUBURBAN EMERGENCY ASSISTANCE RESPONSES 5209 W BROADWAY AVE MINNEAPOLIS, MN 55429</td>
<td>41-1279766</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>NORTH SUBURBAN SYNAGOGUE BETH EL 1175 SHERIDAN RD HIGHLAND PARK, IL 60035</td>
<td>36-2229590</td>
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<td>24,259.</td>
<td>FMV</td>
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<td>6</td>
<td>NORTH SUBURBAN YOUNG MENS CHRISTIAN ASSOCIATION 2705 TECHNY RD NORTHBROOK, IL 60062</td>
<td>36-2546842</td>
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<td>6,000.</td>
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<td>7</td>
<td>NORTH TEXAS FAMILY HEALTH FOUNDATION 6657 VIRGINIA FFMF STE 600 MCKINNEY, TX 750</td>
<td>81-4126222</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>8</td>
<td>NORTH TEXAS FOOD BANK 3677 MAPLESHADE LN PLANO, TX 75075</td>
<td>75-1785357</td>
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<td>247,307.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>NORTH TEXAS PUBLIC BROADCASTING INC 3000 HARRY HINES BLVD DALLAS, TX 75201</td>
<td>75-2084961</td>
<td>501 (C) 3</td>
<td>47,755.</td>
<td>FMV</td>
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<td>10</td>
<td>NORTH UNITED METHODIST CHURCH INC 3808 N MERIDIAN ST INDIANAPOLIS, IN 46208</td>
<td>26-3385426</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>NORTH YELLOWSTONE EDUCATION FOUNDATION PO BOX 166 GARDINER, MT 59030</td>
<td>82-3070065</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>NORTHCOTT NEIGHBORHOOD HOUSE 2460 N 6TH ST MILWAUKEE, WI 53212</td>
<td>39-0984002</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3 Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

[Attach to Form 990.](https://www.irs.gov/Form990) 

Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

---

## Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [x] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>NORTHCROSS LUTHERAN CHURCH</td>
<td>19400 IPAVA AVE LAKEVILLE, MN 55044</td>
<td>42-1652453</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>NORTHEAST ANIMAL SHELTER INC</td>
<td>347 HIGHLAND AVE SALEM, MA 1970</td>
<td>51-0183474</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>NORTHEAST CHRISTIAN OF JEFFERSON CO INC</td>
<td>9900 BROWNSBORO RD LOUISVILLE, KY 40241</td>
<td>61-0941327</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>NORTHEAST CHURCH OF CHRIST</td>
<td>12020 SOUTHWICK LN CINCINNATI, OH 45241</td>
<td>31-0903875</td>
<td>501 (C) 3</td>
<td>8,860.</td>
<td>FMV</td>
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<td>5</td>
<td>NORTHEAST CINCINNATI ROTARY CLUB FOUNDATION</td>
<td>PO BOX 428844 CINCINNATI, OH 45242</td>
<td>31-1415238</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>NORTHEAST GEORGIA HISTORY CENTER AT BRENNAU</td>
<td>PO BOX 1451 GAINESVILLE, GA 30503</td>
<td>58-1443900</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>NORTHEAST HARBOR LIBRARY</td>
<td>PO BOX 279 NORTHEAST HARBOR, ME 4662</td>
<td>01-0220091</td>
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<td>37,000.</td>
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<td>85 HERRICK ST BEVERLY, MA 1915</td>
<td>04-2121317</td>
<td>501 (C) 3</td>
<td>11,500.</td>
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<td>9</td>
<td>NORTHEAST MINNEAPOLIS TOOL LIBRARY</td>
<td>1620 CENTRAL AVE NE STE 126 MINNEAPOLIS, MN</td>
<td>47-1051712</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>NORTHEAST OHIO FOUNDATION FOR PATRIOTISM</td>
<td>169 KENSINGTON OVAL ROCKY RIVER, OH 44116</td>
<td>27-3277678</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>NORTHEAST OHIO MEDICAL UNIVERSITY FOUNDATIO</td>
<td>PO BOX 95 ROOTSTOWN, OH 44272</td>
<td>34-1264220</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>N/A</td>
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<td>NORTHEAST PRESBYTERIAN CHURCH</td>
<td>601 POLO RD COLUMBIA, SC 29223</td>
<td>57-0703501</td>
<td>501 (C) 3</td>
<td>24,300.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

---

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

---

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

Schedule I (Form 990) 2020
**Pro Forma Entry**

### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [ ]
   - No [ ]

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>NORTHEAST WASHINGTON COUNTY COMMUNITY HEALTH</td>
<td>03-0240129</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>NORTHEAST WILDERNESS TRUST</td>
<td>01-0729039</td>
<td>501 (C) 3</td>
<td>1,196,500</td>
<td>FMV</td>
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<td>01-0743018</td>
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<td>15,500</td>
<td>FMV</td>
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<td>NORTHEASTERN UNIVERSITY</td>
<td>04-1679980</td>
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<tr>
<td>NORTHEASTERN UNIVERSITY</td>
<td>01-1484966</td>
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<tr>
<td>NORTHERN ARIZONA UNIVERSITY FDN INC</td>
<td>06-0193726</td>
<td>501 (C) 3</td>
<td>11,008</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTHERN CALIFORNIA VIPASSANA CENTER</td>
<td>08-0426714</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTHERN COMMUNITY RADIO</td>
<td>41-0989515</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NORTHERN ILLINOIS FOOD BANK</td>
<td>36-3203648</td>
<td>501 (C) 3</td>
<td>293,625</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>NORTHERN ILLINOIS UNIVERSITY FOUNDATION</td>
<td>36-6086819</td>
<td>501 (C) 3</td>
<td>65,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>
### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. NORTHERN JAGUAR PROJECT INC</td>
<td>2114 W GRANT RD # 121 TUCSON, AZ 85745</td>
<td>42-1554992</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2. NORTHERN KENTUCKY SYMPHONY INC</td>
<td>PO BOX 72810 NEWPORT, KY 41072</td>
<td>31-1190635</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. NORTHERN KENTUCKY UNIVERSITY FOUNDATION INC</td>
<td>LUCAS ADMINISTRATIVE CENTER NEWPORT, KY 410</td>
<td>22-7116528</td>
<td>501 (C) 3</td>
<td>107,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. NORTHERN LIGHT SCHOOL</td>
<td>3710 DORISA AVE OAKLAND, CA 94605</td>
<td>94-3097690</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. NORTHERN LIGHTS CHURCH OF CHRIST</td>
<td>P.O. BOX 73393 FAIRBANKS, AK 99707</td>
<td>80-0971906</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. NORTHERN MINNESOTA PUBLIC TELEVISION</td>
<td>108 GRANT AVE NE BEMIDJI, MN 56601</td>
<td>41-1265701</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. NORTHERN NEVADA HIV OUTPATIENT PROGRAM EDUC</td>
<td>580 W 5TH ST RENO, NV 89503</td>
<td>86-0865357</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. NORTHERN NEW YORK COMMUNITY FOUNDATION INC</td>
<td>131 WASHINGTON ST WATERTOWN, NY 13601</td>
<td>15-6020989</td>
<td>501 (C) 3</td>
<td>15,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9. NORTHERN PALM BEACH COUNTY JEWISH COMMUNITY</td>
<td>4657 RODD RD PALM BEACH GARDENS, FL 33418</td>
<td>51-0164241</td>
<td>501 (C) 3</td>
<td>6,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. NORTHERN STATE UNIVERSITY FOUNDATION</td>
<td>620 15TH AVE SE BECKMAN BLDG ABERDEEN, SD 5</td>
<td>23-7002214</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. NORTHERN VIRGINIA REGIONAL PARK AUTHORITY</td>
<td>5400 OX ROAD FAIRFAX STATION, VA 22039</td>
<td>54-0715585</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. NORTHERN WESTCHESTER HOSPITAL CENTER FOUNDATION</td>
<td>972 BRUSH HOLLOW RD WESTBURY, NY 11590</td>
<td>13-4067064</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NORTHFIELD CHURCH 2100 NASHVILLE PIKE GALLATIN, TN 37066</td>
<td>47-2097464</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>NORTHFIELD MOUNT HERMON SCHOOL 1 LAMPLIGHTER WAY MOUNT HERMON, MA 1354</td>
<td>04-2109865</td>
<td>501 (C) 3</td>
<td>134,621.</td>
<td>FMV</td>
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<td>3</td>
<td>NORTHLAND BAPTIST CHURCH, INC. 7101 NW MAUKOMIS DR KANSAS CITY, MO 64151</td>
<td>43-1534893</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>NORTHLAND COLLEGE 1411 ELLIS AVE ASHLAND, WI 54806</td>
<td>39-0806428</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>NORTH-MAR CHURCH OF CHRISTIAN &amp; MISSIONARY 3855 E MARKET ST WARREN, OH 44484</td>
<td>34-1119387</td>
<td>501 (C) 3</td>
<td>12,740.</td>
<td>FMV</td>
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<td>6</td>
<td>NORTHMINSTER PRESBYTERIAN CHURCH 3730 N. CENTER ST. HICKORY, IL 60201</td>
<td>56-0891147</td>
<td>501 (C) 3</td>
<td>8,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>NORTHMINSTER PRESBYTERIAN CHURCH 2515 CENTRAL PARK AVENUE EVANSTON, NC 28601</td>
<td>36-2182080</td>
<td>501 (C) 3</td>
<td>17,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>NORTHPOINTE COMMUNITY CHURCH 505 K WEBB DR DENNIT, MI 49820</td>
<td>38-6108003</td>
<td>501 (C) 3</td>
<td>11,660.</td>
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<td>N/A</td>
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<td>9</td>
<td>NORTHRIDGE CHURCH 49555 N TERRITORIAL RD PLYMOUTH, MI 48170</td>
<td>38-1415416</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10</td>
<td>NORTHRIDGE PREPARATORY SCHOOL INC 8320 W BALLARD RD NILES, IL 60714</td>
<td>80-0597509</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>11</td>
<td>NORTHRISE UNIVERSITY INITIATIVE PO BOX 4441 SCOTTSDALE, AZ 85261</td>
<td>95-4749034</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>NORTHSHORE UNIVERSITY HEALTHSYSTEM 1301 CENTRAL ST EVANSTON, IL 60201</td>
<td>36-2167060</td>
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<td>501,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table
**SCHEDULE I**  
*Grants and Other Assistance to Organizations, Governments, and Individuals in the United States*

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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<table>
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<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
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<tr>
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</tr>
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<td>2</td>
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**Name of the organization**  
VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**  
23-2888152

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**NORTHSHIRE ACHIEVEMENT ZONE**  
2123 W BROADWAY AVE STE 100 MINNEAPOLIS, MN  
30-0238807 501 (C) 3 49,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHSIDE BAPTIST CHURCH INC OF LEXINGTON S**  
4347 SUNSET BLVD LEXINGTON, SC 29072  
57-6007606 501 (C) 3 9,600.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHSIDE CHRISTIAN CHURCH**  
1300 GEORGE WASHINGTON MEMORIAL HWY YORKTOW  
54-6020165 501 (C) 3 20,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHVIEW CHRISTIAN LIFE CHURCH INC**  
12900 HAZEL DELL PKWY CARMEL, IN 46033  
31-1064174 501 (C) 3 27,500.. FMV N/A FOR RECIPIENT'S EXEM

**NORTNWAY CHRISTIAN CHURCH**  
7202 W NW HWY DALLAS, TX 75225  
75-0966890 501 (C) 3 10,050.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWELL HEALTH FOUNDATION**  
972 BRUSH HOLLOW RD FL 5 WESTBURY, NY 11590  
11-2965575 501 (C) 3 566,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ARKANSAS COMMUNITY COLLEGE FOUNDATION**  
1 COLLEGE DR BENTONVILLE, AR 72712  
71-0697377 501 (C) 3 6,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ARKANSAS LAND TRUST**  
1725 S SMOKEHOUSE TRL FAYETTEVILLE, AR 7270  
58-1916568 501 (C) 3 9,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ASCENDING CAMPAIGN**  
PO BOX 6711 ROSEMEAD, CA 91770  
20-8505297 501 (C) 3 10,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ASSISTANCE MINISTRIES**  
1555 S KUYKENDAL RO HOUSTON, TX 77090  
76-0088702 501 (C) 3 5,200.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST BIBLE CHURCH**  
8505 DOUGLAS AVE DALLAS, TX 75225  
75-0964577 501 (C) 3 25,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST BIBLE CHURCH**  
5503 FELLOWSHIP LN SPRING, TX 77379  
74-1906006 501 (C) 3 24,500.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ASCENDING CAMPAIGN**  
PO BOX 6711 ROSEMEAD, CA 91770  
20-8505297 501 (C) 3 10,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST ASSISTANCE MINISTRIES**  
1555 S KUYKENDAL RO HOUSTON, TX 77090  
76-0088702 501 (C) 3 5,200.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST BIBLE CHURCH**  
8505 DOUGLAS AVE DALLAS, TX 75225  
75-0964577 501 (C) 3 25,000.. FMV N/A FOR RECIPIENT'S EXEM

**NORTHWEST BIBLE CHURCH**  
5503 FELLOWSHIP LN SPRING, TX 77379  
74-1906006 501 (C) 3 24,500.. FMV N/A FOR RECIPIENT'S EXEM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3 Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

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<table>
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<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
<td></td>
<td></td>
<td></td>
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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

<p>| | | | | |</p>
<table>
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<tr>
<th></th>
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<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
</tr>
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<td>2</td>
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<td>Purpose of grant or assistance</td>
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</tr>
<tr>
<td>3</td>
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<td></td>
<td></td>
<td></td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
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Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>NORTHWEST IMMIGRANTS RIGHTS PROJECT</td>
<td>91-1393082</td>
<td>501 (C) 3</td>
<td>32,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NORTHWEST JUSTICE PROJECT</td>
<td>91-1687791</td>
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<td>22,250</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>NORTHWEST KIDNEY CENTERS</td>
<td>91-6057438</td>
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<td>10,500</td>
<td>FMV</td>
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<td>NORTHWEST LOUISIANA FOOD BANK</td>
<td>72-1328890</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>NORTHWEST NAZARENE UNIVERSITY INC</td>
<td>82-020907</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
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<td>NORTHWEST PHILADELPHIA INTERFAITH HOSPITALI</td>
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<td>NORTHWEST PILOT PROJECT INC</td>
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<td>501 (C) 3</td>
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<td>NORTHWEST PREGNANCY CENTER INC</td>
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<td>501 (C) 3</td>
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<td>NORTHWEST PRESBYTERIAN CHURCH - ATLANTA, GA</td>
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<td>FMV</td>
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<td>NORTHWEST YISHIVA HIGH SCHOOL</td>
<td>91-1045815</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>NORTHWESTERN COLLEGE</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .........................................................

3 Enter total number of other organizations listed in the line 1 table .........................................................

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
</table>
| 1. | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | Yes [x] No [

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
</tr>
<tr>
<td>(1)</td>
<td>NORTHWESTERN MICHIGAN COLLEGE FOUNDATION</td>
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<td>(2)</td>
<td>NORTHWESTERN UNIVERSITY</td>
</tr>
<tr>
<td>(3)</td>
<td>NORTHWESTERN UNIVERSITY SETTLEMENT</td>
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<td>(4)</td>
<td>NORTHWOOD SCHOOL</td>
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<tr>
<td>(5)</td>
<td>NORTHWOODS WOMEN'S SHELTER INC</td>
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<tr>
<td>(6)</td>
<td>NORTHWOODS COMMUNITY CHURCH</td>
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<td>(7)</td>
<td>NORTHWOODS STEWARDSHIP CENTER</td>
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<tr>
<td>(8)</td>
<td>NORTHWOODS WOMEN INC</td>
</tr>
<tr>
<td>(9)</td>
<td>NORTON MUSEUM OF ART INC</td>
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<tr>
<td>(10)</td>
<td>NORWALK COMMUNITY COLLEGE FOUNDATION</td>
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<tr>
<td>(11)</td>
<td>NORWALK HOSPITAL FOUNDATION INC</td>
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<tr>
<td>(12)</td>
<td>NORWAY HOUSE</td>
</tr>
</tbody>
</table>

Enter total number of organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table
## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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---

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>PO BOX 236 NORWICH, VT 5055</td>
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<td>(2) NORWICH UNIVERSITY</td>
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<td>FMV</td>
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<td>158 HARMON DR NORTHFIELD, VT 5663</td>
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<td>(3) NORWOOD FONTBONNE ACADEMY</td>
<td>22-1352678</td>
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<td>8891 GERMANTOWN AVE PHILADELPHIA, PA 19118</td>
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<td>(4) NORWOOD SCHOOL INC</td>
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<td>8821 RIVER RD BETHESDA, MD 20817</td>
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<td>(5) NOS AMIS-OUR FRIENDS INC</td>
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<td>2554 LINCOLN BLVD STE 522 VENICE, CA 90291</td>
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<td>(6) NOT ANOTHER CHILD INCORPORATED</td>
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<td>359 TALL TREE CT JACKSON, NJ 8527</td>
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<td>(7) NOTRE DAME ACADEMY</td>
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<td>1699 HILTON DR COVINGTON, KY 41011</td>
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<td>(8) NOTRE DAME ACADEMY</td>
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<td>18,300.</td>
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<td>610 MARYHILL Dr GREEN BAY, WI 54303</td>
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<td>(9) NOTRE DAME ACADEMY HIGH SCHOOL</td>
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<td>64 NORFOLK AVE CLARENDON HILLS, IL 60514</td>
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<td>(11) NOTRE DAME CRISTO REY HIGH SCHOOL INC</td>
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<td>203 LAWRENCE ST METHUEN, MA 1844</td>
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<td>(12) NOTRE DAME HIGH SCHOOL</td>
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<td>1 NOTRE DAME WAY WEST HAVEN, OH 45662</td>
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<td></td>
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</tbody>
</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes  No

2  Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>NOTRE DAME HIGH SCHOOL</td>
<td>2220 SUNRISE AVE PORTSMOUTH, CT 6516</td>
<td>31-4395524</td>
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<td>2</td>
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<td>1418 S LAYTON BLVD MILWAUKEE, WI 53215</td>
<td>39-1850760</td>
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<td>6,500.</td>
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<td>3</td>
<td>NOTRE DAME SISTERS</td>
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<td>47-0408244</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
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<td>322 W 108TH ST NEW YORK, NY 10025</td>
<td>95-3992053</td>
<td>501 (C) 3</td>
<td>4,000,000.</td>
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<td>5</td>
<td>NOURISH NOW FOUNDATION INC</td>
<td>1111 TAFT ST ROCKVILLE, MD 20850</td>
<td>45-2404503</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>NOURISH PIERCE COUNTY</td>
<td>1702 S 72ND ST STE E TACOMA, WA 98408</td>
<td>91-1198391</td>
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<tr>
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<td>11 E 40TH ST KANSAS CITY, MO 64111</td>
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<td>8,000.</td>
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<td>8</td>
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<td>54-1427388</td>
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<td>9</td>
<td>NOVO MISSION INC</td>
<td>1240 N LAKEVIEW AVE STE 120 ANAHEIM, CA 928</td>
<td>95-3523150</td>
<td>501 (C) 3</td>
<td>50,700.</td>
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<td>10</td>
<td>NOWNZAD</td>
<td>2770 MAIN ST STE 161 FRISCO, TX 75033</td>
<td>46-0536511</td>
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<td>15,000.</td>
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<tr>
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<td>NPH-USA</td>
<td>134 N LA SALLE ST STE 500 CHICAGO, IL 60602</td>
<td>65-1229309</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>NPR FOUNDATION</td>
<td>1111 N CAPITOL ST NE WASHINGTON, DC 20002</td>
<td>52-1795789</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3  Enter total number of other organizations listed in the line 1 table.

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>Line</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
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<tr>
<td>1</td>
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<td>23-2888152</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
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<td>2</td>
<td><a href="#">NRA CIVIL RIGHTS DEFENSE FUND</a></td>
<td>52-1136665</td>
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<td>3</td>
<td><a href="#">NS2 SERVICES</a></td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12</td>
<td><a href="#">NURSES EDUCATIONAL FUNDS INC</a></td>
<td>13-6122744</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I**  
**General Information on Grants and Assistance**
- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
  - **Yes**
  - **No**

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. NURSES FOR NEWBORN</td>
<td>43-1610129</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. NURTURING MINDS INC</td>
<td>20-8870624</td>
<td>501 (C) 3</td>
<td>120,015.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3. NURU INTERNATIONAL</td>
<td>26-1250716</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4. NUS AMERICA FOUNDATION INC</td>
<td>20-2368621</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1. NUTRITION COALITION</td>
<td>81-4498321</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<td>N/A</td>
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<tr>
<td>1. NUTRITIONAL DEVELOPMENT SERVICES</td>
<td>23-1903647</td>
<td>501 (C) 3</td>
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<td>05-0559626</td>
<td>501 (C) 3</td>
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<td>1. NUYORICAN POETS CAFE INC</td>
<td>51-0139390</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>1. NW CHILDRENS FOUNDATION</td>
<td>91-1314318</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>1. NW SARCOMA FOUNDATION A NON-PROFIT CORPORAT</td>
<td>91-1717600</td>
<td>501 (C) 3</td>
<td>10,900.</td>
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<tr>
<td>1. NXTHVN INC</td>
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<tr>
<td>1. NYACK COLLEGE</td>
<td>13-1740285</td>
<td>501 (C) 3</td>
<td>107,762.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>NYACK HOMELESS PROJECT LTD PO BOX 164 NYACK, NY 10960</td>
<td>41-2188728</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>NYAYA INC 2970 E LAKE LANSING RD EAST LANSING, MI 488</td>
<td>35-2153719</td>
<td>501 (C) 3</td>
<td>38,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>NYAKA INC 99 WALL ST # 4100 NEW YORK, NY 10005</td>
<td>20-3055055</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
<tr>
<td>NYU LANGONE HEALTH SYSTEM 550 FIRST AVENUE MSB 153 NEW YORK, NY 10016</td>
<td>47-2613531</td>
<td>501 (C) 3</td>
<td>331,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>NYU LANGONE HOSPITALS 550 1ST AVE NEW YORK, NY 10016</td>
<td>13-3971298</td>
<td>501 (C) 3</td>
<td>72,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>O C INTERNATIONAL INC 5801 N UNION BLVD COLORADO SPRINGS, CO 8091</td>
<td>94-1501634</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>O S U CHABAD HOUSE INC 6220 E DUBLIN GRANVILLE RD NEW ALBANY, OH 4</td>
<td>31-1427001</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<tr>
<td>OAK GROVE BAPTIST CHURCH 2829 OAK GROVE CHURCH RD CARRROLLTON, GA 301</td>
<td>58-1551420</td>
<td>501 (C) 3</td>
<td>8,400</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OAK GROVE UNITED METHODIST CHURCH 1722 OAK GROVE RD DECATOR, GA 30033</td>
<td>58-0865171</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OAK HARBOR II FOURSQUARE CHURCH 490 NW CROSBY AVE OAK HARBOR, WA 98277</td>
<td>91-1899654</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>OAK HILL FOUNDATION INC 170 HOLCOMB ST HARTFORD, CT 6112</td>
<td>86-1169503</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OAK HILL SCHOOL 4815 FRANKLIN PIKE NASHVILLE, TN 37220</td>
<td>62-0793592</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
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<table>
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<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
</tr>
<tr>
<td>(1) OAK HILL SCHOOL OF CALIFORNIA</td>
<td>300 SUNNY HILLS DRIVE 6 SAN ANSELMO, CA 94949</td>
</tr>
<tr>
<td>(2) OAK HILLS CHURCH-CHRISTIAN REFORMED</td>
<td>2800 NW 153RD AVE BEAVERTON, OR 97006</td>
</tr>
<tr>
<td>(3) OAK PARK AND RIVER FOREST HIGH ALUMNI ASSOC</td>
<td>201 N SCOVILLE AVE OAK PARK, IL 60302</td>
</tr>
<tr>
<td>(4) OAK PARK AND RIVER FOREST INFANT WELFARE SO</td>
<td>320 LAKE ST OAK PARK, IL 60302</td>
</tr>
<tr>
<td>(5) OAK PARK-RIVER FOREST COMMUNITY FOUNDATION</td>
<td>1049 LAKE ST OAK PARK, IL 60301</td>
</tr>
<tr>
<td>(6) OAK TREE MINISTRIES</td>
<td>6517 KIMBERLY AVE BIRMINGHAM, AL 35212</td>
</tr>
<tr>
<td>(7) OAKBROOK PREPARATORY SCHOOL</td>
<td>190 LINCOLN SCHOOL RD SPARTANBURG, SC 29301</td>
</tr>
<tr>
<td>(8) OAKCLIFF SAILING INCORPORATED</td>
<td>4 SOUTH ST OYSTER BAY, NY 11771</td>
</tr>
<tr>
<td>(9) OAKHURST UNITED METHODIST CHURCH</td>
<td>13400 PARK BLVD SEMINOLE, FL 33776</td>
</tr>
<tr>
<td>(10) OAKLAND CITY CHURCH A CONGREGATION OF THE R</td>
<td>PO BOX 3010 OAKLAND, CA 94609</td>
</tr>
<tr>
<td>(11) OAKLAND HEBREW DAY SCHOOL</td>
<td>5500 REDWOOD RD OAKLAND, CA 94619</td>
</tr>
<tr>
<td>(12) OAKLAND HERITAGE ALLIANCE</td>
<td>444 17TH ST OAKLAND, CA 94612</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ..............................................................................................................................................

3 Enter total number of other organizations listed in the line 1 table. ..............................................................................................................................................

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## Part I

### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [ ]
   - No [X] Yes

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>(1) OAKLAND LACROSSE CLUB</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) OAKLAND MUSEUM OF CALIFORNIA</td>
<td>45-3138892</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) OAKLAND PRESBYTERIAN CHURCH</td>
<td>59-0806974</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) OAKLAND PROMISE</td>
<td>54-2103707</td>
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<td>23,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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<td>38-1714400</td>
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<tr>
<td>(6) OAKRIDGE SCHOOL INC</td>
<td>75-1658802</td>
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<td>FMV</td>
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<td>(7) OAKS ACADEMY INC</td>
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<td>(8) OAKWOOD SCHOOL</td>
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<td>(10) OAKSEED MINISTRIES INTERNATIONAL</td>
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<tr>
<td>(11) OAKWOOD FRIENDS SCHOOL INC</td>
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<td>(12) OAKWOOD SCHOOL</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>OASIS FOR ORPHANS 38635 N BURR OAK LN WADSWORTH, IL 60083</td>
<td>20-3653846</td>
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<td>10,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OASIS LEGAL SERVICES 1900 ADDISON ST STE 100 BERKELEY, CA 94704</td>
<td>82-0696739</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OASIS UNITED INC 1063 VIA ALTA BURBANK, CA 91501</td>
<td>95-4505599</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OAKACA STREET CHILDREN GRASSROOTS INC PO BOX 102 IDAHO SPRINGS, CO 80452</td>
<td>35-1988669</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OBERLIN COLLEGE 173 W LORAIN ST OBERLIN, OH 44074</td>
<td>34-0714363</td>
<td>501 (C) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OBJECTIVIST CENTER LTD 2510 LINCOLN BLVD TRACY, CA 95376</td>
<td>13-3554791</td>
<td>501 (C) 3</td>
<td>92,167.</td>
<td>FMV</td>
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<tr>
<td>OBLATES OF ST FRANCIS DESALES 2200 KENTMERE FMW WILMINGTON, DE 19806</td>
<td>51-0076848</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OBON SOCIETY PO BOX 282 ASTORIA, OR 97103</td>
<td>47-1775267</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<tr>
<td>OCCIDENTAL COLLEGE 1600 CAMPUS RD LOS ANGELES, CA 90041</td>
<td>95-1667177</td>
<td>501 (C) 3</td>
<td>671,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OCCUPY MADISON INC PO BOX 949 MADISON, WI 53701</td>
<td>46-1581696</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OCEAN ALLIANCE INC 32 HORTON ST GLOUCESTER, MA 1930</td>
<td>22-2573677</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>OCEAN CLEANUP NORTH PACIFIC FOUNDATION 100 WALL ST FL NEW NEW YORK, NY 10005</td>
<td>81-5132355</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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</table>
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
<th>(h)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and address of organization or government</td>
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<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
</tr>
<tr>
<td>OCEAN COMMUNITY UNITED THEATRE INC</td>
<td>5 CANAL ST WESTERLY, RI 2891</td>
<td>46-3579526</td>
<td>501 (C) 3</td>
<td>$100,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>OCEAN COMMUNITY YMCA</td>
<td>95 HIGH STREET WESTERLY, RI 2891</td>
<td>05-0268126</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OCEAN CONSERVANCY INC</td>
<td>1300 19TH ST NW STE 800 WASHINGTON, DC 2003</td>
<td>23-7245152</td>
<td>501 (C) 3</td>
<td>$600,550</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OCEAN FILM FEST INC</td>
<td>PO BOX 6600 KAMUELA, HI 96743</td>
<td>27-2815996</td>
<td>501 (C) 3</td>
<td>$25,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>OCEAN FIRE COMPANY NUMBER ONE</td>
<td>PO BOX 1765 PT PLEASANT BEACH, NJ 8742</td>
<td>23-7190093</td>
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<tr>
<td>OCEAN FOUNDATION</td>
<td>1320 19TH ST NW STE 500 WASHINGTON, DC 2003</td>
<td>71-0863908</td>
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<td>$12,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OCEAN INSTITUTE</td>
<td>24200 DANA POINT HARBOR DR DANA POINT, CA 9</td>
<td>33-0203488</td>
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<td>$5,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>OCEAN REEF CHAPEL FOUNDATION INC</td>
<td>32 OCEAN REEF DR KEY LARGO, FL 33037</td>
<td>65-0486471</td>
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<td>OCEAN REEF FOUNDATION INC</td>
<td>35 OCEAN REEF DR KEY LARGO, FL 33037</td>
<td>65-0501255</td>
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<td>$20,733</td>
<td>FMV</td>
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<td>OCEANA INC</td>
<td>1025 CONNECTICUT AVENUE NW NO 20 WASHINGTON</td>
<td>51-0401308</td>
<td>501 (C) 3</td>
<td>$81,050</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OCEANIC SOCIETY EXPEDITIONS</td>
<td>PO BOX 844 ROSS, CA 94067</td>
<td>94-3105570</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OCEANSIDE CHRISTIAN FOUNDATION INC</td>
<td>343 CORAL CIR EL SEGUNDO, CA 90245</td>
<td>94-3042090</td>
<td>501 (C) 3</td>
<td>$8,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

**Schedule I (Form 990) 2020**
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- **SCHEDULE I**
- **Form 990**
- Department of the Treasury
- Internal Revenue Service

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>OCEANSIDE IVEY RANCH PARK ASSOCIATION</td>
<td>110 RANCHO DEL ORO DR OCEANSIDE, CA 92057</td>
<td>95-3775136 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>OCHSNER CLINIC FOUNDATION</td>
<td>1514 JEFFERSON HWY NEW ORLEANS, LA 70121</td>
<td>72-0502505 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>OCONEE PERFORMING ARTS SOCIETY INC</td>
<td>4980 CAREY STATION RD STE A GREENSBORO, GA</td>
<td>26-0848843 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ODEA HIGH SCHOOL</td>
<td>802 TERRY AVE SEATTLE, WA 98104</td>
<td>91-0905301 501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ODESSA COLLEGE FOUNDATION INCORPORATED</td>
<td>201 W UNIVERSITY BLVD ODESSA, TX 79764</td>
<td>75-2655037 501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>OFF THE STREET CLUB</td>
<td>25 N KARLOV AVE CHICAGO, IL 60624</td>
<td>36-2169162 501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>OFFICE OF CATHOLIC EDUCATION</td>
<td>222 N 17TH ST FL 5 PHILADELPHIA, PA 19103</td>
<td>23-1355131 501 (C) 3</td>
<td>536,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>OFICINA LEGAL DEL PUEBLO UNIDO INC</td>
<td>1405 MONTOPOLIS DR AUSTIN, TX 78741</td>
<td>74-1995879 501 (C) 3</td>
<td>83,250.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>OPHB INTERNATIONAL INC</td>
<td>3926 LEE ST AYDEN, NC 28513</td>
<td>56-1121836 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>OGLALA LAKOTA COLLEGE</td>
<td>PO BOX 490 KYLE, SD 57752</td>
<td>23-7135915 501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>OGLE SOCIETY INC</td>
<td>1262 BRANDYWINE LN SE DECATUR, AL 35601</td>
<td>82-5372100 501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>OGLEBAY FOUNDATION INC</td>
<td>OGLEBAY PARK RT 88 NORTH WHEELING, WV 26003</td>
<td>55-0750128 501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
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<th>(h) Purpose of grant or assistance</th>
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<td>OGLETORPE UNIVERSITY INC</td>
<td>4484 PEACHTREE RD NE BROOKHAVEN, GA 30319</td>
<td>58-0568698</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OAHAL ADOPTIONS INCORPORATED</td>
<td>122 CONCEPTION RD BARRIGADA, GU 96913</td>
<td>66-0933674</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OHEL IAACOV FOUNDATION INC</td>
<td>6100 HOLLYWOOD BLVD STE 212 HOLLYWOOD, FL 3</td>
<td>20-2339591</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OHIO CITIZEN ACTION EDUCATION FUND</td>
<td>1511 BROOKPARK RD CLEVELAND, OH 44109</td>
<td>34-1208940</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OHIO ENVIRONMENTAL COUNCIL</td>
<td>1145 CHESAPEAKE AVE STE I COLUMBUS, OH 4321</td>
<td>31-0805578</td>
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<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OHIO JUSTICE AND POLICY CENTER</td>
<td>215 E 9TH ST STE 601 CINCINNATI, OH 45202</td>
<td>31-1319172</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<td>OHIO NORTHERN UNIVERSITY</td>
<td>525 S MAIN ST ADA, OH 45810</td>
<td>34-4429091</td>
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<td>OHIO STATE UNIVERSITY FOUNDATION</td>
<td>2200 OLENTANGY RIVER RD COLUMBUS, OH 43210</td>
<td>31-1145986</td>
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<td>OHIO VALLEY VOICES INC</td>
<td>6642 BRANCH HILL GUINEA PIKE LOVELAND, OH 4</td>
<td>31-1639795</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>OHIO WESLEYAN UNIVERSITY</td>
<td>61 S SANDUSKY ST DELAWARE, OH 43015</td>
<td>31-4379585</td>
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<td>81,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OHIO WILDERNESS BOYS CAMP</td>
<td>44642 ZERGER QUARRY RD SUMMERFIELD, OH 4378</td>
<td>26-0472588</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OHIOHEALTH CORPORATION</td>
<td>3430 OHIO HEALTH PKWY COLUMBUS, OH 43202</td>
<td>23-7446919</td>
<td>501 (C) 3</td>
<td>12,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
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<td>OHOLEI YOSEF YITZCHAK LUBAVITCH 14100 W 9 MILE RD OAK PARK, MI 48237</td>
<td>38-3253099</td>
<td>501 (C) 3</td>
<td>5,521.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>OHOLEI TORAH KODESH CONGREGATION 8300 MEADOBROOK LN CHEVY CHASE, MD 20815</td>
<td>52-0613672</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>OHOLEI NOSSON INC 40 12TH ST LAKEMOON, NJ 8701</td>
<td>22-3640057</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>OHOLEI TORAH STONE INSTITUTIONS OF ISR AEL 49 W 45TH ST STE 701 NEW YORK, NY 10036</td>
<td>13-3275531</td>
<td>501 (C) 3</td>
<td>293,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>OIKONOS-ECOSYSTEM KNOWLEDGE PO BOX 1918 KAILUA, HI 96734</td>
<td>03-0385067</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>OJAI FESTIVALS LTD 201 S SIGNAL STREET OJAI, CA 93023</td>
<td>95-2122508</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>OJAI VALLEY COMMUNITY HOSPITAL FOUNDATION 1301 MARICOPA HWY OJAI, CA 93023</td>
<td>20-1982135</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>OKIZU FOUNDATION 83 HAMILTON DR STE 200 NOVATO, CA 94949</td>
<td>68-0291178</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>OKLAHOMA BAPTIST HOMES FOR CHILDREN INC 3800 N MAY AVE OKLAHOMA CITY, OK 73112</td>
<td>73-1435473</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>OKLAHOMA BAPTIST UNIVERSITY 500 W UNIVERSITY ST # 61207 SHAWNEE, OK 748</td>
<td>73-0579264</td>
<td>501 (C) 3</td>
<td>525,700.</td>
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<tr>
<td>11</td>
<td>OKLAHOMA CITY FAMILY JUSTICE CENTER INC 1140 N HUNSON AVE OKLAHOMA CITY, OK 73103</td>
<td>47-5502128</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>OKLAHOMA CITY UNIVERSITY 2501 N BLACKWELDER AVE OKLAHOMA CITY, OK 73</td>
<td>73-0579265</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.  

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>OKLAHOMA COUNCIL OF PUBLIC AFFAIRS INC</td>
<td>73-1436375</td>
<td>501 (c) 3</td>
<td>16,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 2320 OKLAHOMA CITY, OK 73101</td>
<td>30-0026859</td>
<td>501 (c) 3</td>
<td>11,000</td>
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<td>501 (c) 3</td>
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<tr>
<td>OKLAHOMANS FOR CRIMINAL JUSTICE REFORM INC</td>
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<td>OLD CUTLER PRESBYTERIAN CHURCH INC</td>
<td>59-6195452</td>
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<td>OLD DARTMOUTH HISTORICAL SOCIETY</td>
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<td>FMV</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) OLD DOMINION ATHLETIC FOUNDATION</td>
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<td>(2) OLD DOMINION UNIVERSITY EDUCATIONAL FOUNDATION</td>
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<td>FMV</td>
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<td>(4) OLD GLOBE THEATRE</td>
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<td>(5) OLD NEWSBOYS GOODFELLOW FUND OF DETROIT</td>
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<td>PO BOX 44444 DETROIT, MI 48244</td>
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<td>(6) OLD ROARING RIVER BAPTIST CHURCH</td>
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<td>FMV</td>
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<td>P. O. BOX 126 JONESVILLE, NC 28685</td>
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<td>(7) OLD SAINT MARYS CHURCH</td>
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<td>(8) OLD SALAM INCORPORATED</td>
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<tr>
<td>(9) OLD SOUTH CHURCH IN BOSTON</td>
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<td>11,000</td>
<td>FMV</td>
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<tr>
<td>645 BOYLSTON ST BOSTON, MA 2116</td>
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<td>(10) OLD ST MARYS PARISH 4 SCHOOL</td>
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<td>59,000</td>
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<td>1500 S MICHIGAN AVE CHICAGO, IL 60605</td>
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<td>(11) OLD ST PATRICKS CHURCH</td>
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<td>711 W MONROE ST CHICAGO, IL 60661</td>
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<tr>
<td>(12) OLD TOWN SCHOOL OF FOLK MUSIC INC</td>
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<td>FMV</td>
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<tr>
<td>4544 N LINCOLN AVE CHICAGO, IL 60625</td>
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</tr>
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## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
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<tr>
<td>1500 GLENCOE RD SPARKS GLENCOE, MD 21152</td>
<td>52-0591645</td>
<td>501 (C) 3</td>
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<td>4 GRACE ST BERLIN, MD 21811</td>
<td>45-4115570</td>
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<tr>
<td>PO BOX 1519 OXFORD, NC 38655</td>
<td>64-0474850</td>
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<tr>
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<td>95-2877102</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>1100 TAYLOR ST COLUMBIA, SC 29201</td>
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<td>ATTN: DONATIONS AND COLLECTIONS 2100 BAINBR</td>
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<tr>
<td>PO BOX 701864 SAN ANTONIO, TX 78270</td>
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<td>21,100.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table
Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.  Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>OLYMPIC COMMUNITY ACTION PROGRAMS</td>
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<td>FMV</td>
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<td>OMAHA SYMPHONY ASSOCIATION</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>ONE AND ALL CHURCH 1404 W COVINA BLVD SAN DIMAS, CA 91773</td>
<td>95-6006335</td>
<td>501 (C) 3</td>
<td>135,930.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONE CALL FOR ALL PO BOX 10487 BAINBRIDGE ISLAND, WA 98110</td>
<td>91-0782393</td>
<td>501 (C) 3</td>
<td>6,750.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ONE CITY SCHOOLS INC 2012 FISHER ST MADISON, WI 53713</td>
<td>47-1490574</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ONE COLLECTIVE NFP 2155 POINT BLVD STE 200 ELGIN, IL 60123</td>
<td>36-6069820</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ONE FAIR WAGE INC 7510 HILLMONT DR OAKLAND, CA 94605</td>
<td>85-0692228</td>
<td>501 (C) 3</td>
<td>20,500.</td>
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<td>FMV</td>
<td>N/A</td>
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<td>ONE FAMILY FUND 1029 TEANECK RD TEANECK, NJ 7666</td>
<td>11-3585917</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FMV</td>
<td>N/A</td>
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<td>ONE FAMILY MEMPHIS 915 E MCLEMORE AVE MEMPHIS, TN 38106</td>
<td>82-3068886</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ONE FIFTY PARKER STREET SCHOOL 150 PARKER AVE SAN FRANCISCO, CA 94118</td>
<td>94-1691549</td>
<td>501 (C) 3</td>
<td>17,900.</td>
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<td>FMV</td>
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<td>ONE FOR ISRAEL 1300 CLADE RD COLLEYVILLE, TX 76034</td>
<td>61-1901718</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONE HEART FOR WOMEN AND CHILDREN INC 2040 N RIO GRANDE AVE ORLANDO, FL 32804</td>
<td>30-0584360</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ONE HOUSE AT A TIME 411 SUSQUERANNA RD AMBLER, PA 19002</td>
<td>23-3046871</td>
<td>501 (C) 3</td>
<td>15,500.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONE LIFE NETWORK INC PO BOX 5082 EVANSVILLE, IN 47716</td>
<td>20-8973283</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

### 1. Name and address of organization or government

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) ONE MIND INSTITUTE</td>
<td>1570 BELLA OAKS LANE RUTHERFORD, CA 94573</td>
<td>68-0359707 501 (C) 3</td>
<td>10,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ONE MISSION SOCIETY USA INC</td>
<td>PO BOX A GREENWOOD, IN 46142</td>
<td>95-1891575 501 (C) 3</td>
<td>14,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) ONE OAK CHURCH INC</td>
<td>121 S WILSON AVE ROYAL OAK, MI 48067</td>
<td>81-0953917 501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ONE PURSE INC</td>
<td>213 N MILLS AVE FL ORLANDO, FL 32801</td>
<td>45-2860786 501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ONE SIMPLE WISH</td>
<td>1977 N OLDEN AVENUE EXT STE 292 EWING, NJ 8</td>
<td>26-3128590 501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) ONE STONE INC</td>
<td>1151 W MILLER ST BOISE, ID 83702</td>
<td>26-3599715 501 (C) 3</td>
<td>30,500.</td>
<td>FMV</td>
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<tr>
<td>(7) ONE SUMMIT INC</td>
<td>4 HIGH ST NORTH ANDOVER, MA 1845</td>
<td>47-4659654 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ONE TO ONE LEARNING INC</td>
<td>175 ROUTE 340 SPARKILL, NY 10976</td>
<td>13-4112199 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) ONE TO WORLD INC</td>
<td>307 7TH AVE RM 2003 NEW YORK, NY 10001</td>
<td>13-3179151 501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ONE TREE PLANTED INC</td>
<td>145 PINE HAVEN SHORES RD SHELBURNE, VT 5482</td>
<td>46-4664562 501 (C) 3</td>
<td>42,268.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ONE UMMAH FOUNDATION IN MEMORY OF MUSTAFA S</td>
<td>7 WALKING WOODS DRI LAKE OSWEGO, OR 97035</td>
<td>93-1281392 501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) ONE VOICE INC</td>
<td>PO BOX 9241 CHARLOTTE, NC 28299</td>
<td>58-1979889 501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

### Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

### Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - **[X]** Yes  
   - **[ ]** No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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**1**

<table>
<thead>
<tr>
<th>Organization Name</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Method of valuation</th>
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<th>Purpose of grant or assistance</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>ONE22 INC</td>
<td>76-3104462</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONEDAY HEALTH INC</td>
<td>84-3730988</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONENIGHTY INC</td>
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<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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(Form 990)

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   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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</thead>
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<tr>
<td>ONESKY 2246 6TH ST STE B BERKELEY, CA 94710</td>
<td>95-4714047</td>
<td>501 (C) 3</td>
<td>80,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
<td></td>
</tr>
<tr>
<td>ONRAMP INC 312 AGATE DR COLLEGE STATION, TX 77845</td>
<td>81-5240446</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
<td></td>
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<tr>
<td>ONE FOUNDATION FOR CLINICAL RESEARCH AND ED 6 GREENWICH OFFICE PARK STE 100 GREENWICH,</td>
<td>26-1394760</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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</tr>
<tr>
<td>ONTARIO HIGH SCHOOL BOOSTER CLUB 1347 ARATA WAY ONTARIO, OR 97914</td>
<td>20-3108038</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
<td></td>
</tr>
<tr>
<td>ONWARD A LEGACY FOUNDATION PO BOX 26 CORTEZ, CO 81321</td>
<td>26-0045741</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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</tr>
<tr>
<td>ONWARD MINISTRIES, INC. P.O. BOX 681 FISHERS, IN 46038</td>
<td>38-3851688</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
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<td>FOR Recipient's Exem</td>
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<tr>
<td>OPEN ARTS ALLIANCE INC 16 FLETCHER AVE GREENWICH, CT 6831</td>
<td>45-3220208</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>FOR Recipient's Exem</td>
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<tr>
<td>OPEN DISCOURSE COALITION 824 WILDE AVE DREXEL HILL, PA 19026</td>
<td>84-3127210</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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<tr>
<td>OPEN DOOR LEGAL 60 OCEAN AVE SAN FRANCISCO, CA 94112</td>
<td>45-3360280</td>
<td>501 (C) 3</td>
<td>21,115</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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<tr>
<td>OPEN DOOR MISSION PO BOX 9356 HOUSTON, TX 77261</td>
<td>76-0146890</td>
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<td>70,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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<tr>
<td>OPEN DOOR MISSION INC 156 PLYMOUTH AVE N ROCHESTER, NY 14608</td>
<td>16-6050714</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
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<td>OPEN DOOR OF DELTA 104 MONROE ST DELTA, OH 43515</td>
<td>20-0592916</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR Recipient's Exem</td>
<td></td>
</tr>
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Schedule I (Form 990) 2020

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JSA 0E1288 1.000

18674H 1467 V 20-7.21
### Part I: General Information on Grants and Assistance

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<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>OPEN DOOR RECOVERY HOUSE 1107 FM 1431 RM 251 MARBLE FALLS, TX 78654</td>
<td>80-0229947</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>OPEN DOOR REPERTORY COMPANY 902 S RIDGEALD AVE OAK PARK, IL 60304</td>
<td>36-4242927</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>OPEN DOORS WITH BROTHER ANDREW INC PO BOX 27001 SANTA ANA, CA 92799</td>
<td>22-7275342</td>
<td>501 (C) 3</td>
<td>151,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>OPEN HEARTS AND HOMES FOR CHILDREN 1001 LACKAWANNA TRL CLARKS SUMMIT, PA 18411</td>
<td>27-4249561</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>OPEN HOUSE MINISTRIES INC 900 W 12TH ST VANCOUVER, WA 98660</td>
<td>94-3028685</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>OPEN MEDICINE FOUNDATION INC 29302 LARO DR AGUURA HILLS, CA 91301</td>
<td>26-4712664</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>OPEN MONTESSORI 480 NEW HOLLAND AVE STE 6205 LANCASTER, PA</td>
<td>84-4766185</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>OPEN PANTRY COMMUNITY SERVICE INC PO BOX 5123 SPRINGFIELD, MA 1101</td>
<td>52-1084599</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>OPEN SPACE INSTITUTE INC 1350 BROADWAY RM 201 NEW YORK, NY 10018</td>
<td>52-1053406</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>10</td>
<td>OPEN TABLE INC PO BOX 42 CONCORD, MA 1742</td>
<td>04-3048933</td>
<td>501 (C) 3</td>
<td>39,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>OPENCOLLECTIVE FOUNDATION 340 S LEMON AVE WALNUT, CA 91789</td>
<td>81-4004928</td>
<td>501 (C) 3</td>
<td>106,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>12</td>
<td>OPENHOUSENENYXORK INC CO ROGER PARTNERS 100 READE STREET NEW YORK, NY</td>
<td>02-0540261</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
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</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

## Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPENING DOORS</td>
<td>2100 ASBURY RD STE 8 DUBUQUE, IA 52001</td>
<td>42-1490364</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPENLANDS</td>
<td>25 E WASHINGTON ST CHICAGO, IL 60602</td>
<td>36-2649603</td>
<td>501 (C) 3</td>
<td>21,525.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERA AMERICA INC</td>
<td>330 SEVENTH AVENUE 8TH FLOOR NEW YORK, NY 1</td>
<td>20-3520577</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>OPERA BUFFS</td>
<td>902 INVERNESS DR RANCHO MIRAGE, CA 92270</td>
<td>95-3854105</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>OPERA DELAWARE INC</td>
<td>4 S POPLAR ST WILMINGTON, DE 19801</td>
<td>51-6018055</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>OPERA LAFAYETTE</td>
<td>921 PENNSYLVANIA AVE SE WASHINGTON, DC 2000</td>
<td>52-2001426</td>
<td>501 (C) 3</td>
<td>115,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERA PARALLELE</td>
<td>44 PAGE ST STE 400 SAN FRANCISCO, CA 94102</td>
<td>72-1584393</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERA PHILADELPHIA</td>
<td>1420 LOCUST ST STE 210 PHILADELPHIA, PA 191</td>
<td>23-1504706</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERA SAN JOSE INCORPORATED</td>
<td>2149 PARAGON DR SAN JOSE, CA 95131</td>
<td>77-0009773</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERA THEATRE OF SAINT LOUIS</td>
<td>210 HAZEL AVE SAINT LOUIS, MO 63119</td>
<td>43-0821958</td>
<td>501 (C) 3</td>
<td>27,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OPERATION AMERICA CARES</td>
<td>3245 AVENIDA REPOSO ESCONDIDO, CA 92029</td>
<td>27-4283172</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>OPERATION BLESSING INTERNATIONAL RELIEF &amp; D</td>
<td>977 CENTREVILLE TPKE VIRGINIA BEACH, VA 234</td>
<td>54-1382657</td>
<td>501 (C) 3</td>
<td>69,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes ☑️
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>OPERATION BOOTSTRAP-AFRICA 625 4TH AVE S STE 110 MINNEAPOLIS, MN 55415</td>
<td>41-6051952</td>
<td>501 (c) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>OPERATION BREAKTHROUGH INC 3039 TROGST AVE KANSAS CITY, MO 64109</td>
<td>43-0971560</td>
<td>501 (c) 3</td>
<td>33,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>OPERATION FIRST RESPONSE 20037 DOVE HILL RD CULPEPER, VA 22701</td>
<td>20-1622436</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>OPERATION FOOD SEARCH INC 1644 LOTSIE BLVD SAINT LOUIS, MO 63132</td>
<td>43-1241854</td>
<td>501 (c) 3</td>
<td>53,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>OPERATION GIVE BACK 10891 MILLINGTON CT BLUE ASH, OH 45242</td>
<td>90-0155844</td>
<td>501 (c) 3</td>
<td>17,670</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6</td>
<td>OPERATION GRATITUDE INC PO BOX 260257 ENCINO, CA 91426</td>
<td>20-0103575</td>
<td>501 (c) 3</td>
<td>11,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>OPERATION HELP INC 901 4TH ST STE 214 HUDSON, WI 54016</td>
<td>39-1711703</td>
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<td>75,000</td>
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<td>N/A</td>
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<tr>
<td>8</td>
<td>OPERATION HOMEFRONT INC 1355 CENTRAL Pkwy S # S SAN ANTONIO, TX 782</td>
<td>32-0033325</td>
<td>501 (c) 3</td>
<td>29,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>OPERATION HOPE OF FAIRFIELD INC 636 OLD POST RD FAIRFIELD, CT 06824</td>
<td>06-1193489</td>
<td>501 (c) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>OPERATION KINDNESS 3201 EARHART DR CARROLLTON, TX 75006</td>
<td>75-1553350</td>
<td>501 (c) 3</td>
<td>32,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>OPERATION MOBILIZATION PO BOX 444 TYRONE, GA 30290</td>
<td>22-2513811</td>
<td>501 (c) 3</td>
<td>36,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>OPERATION PATRIOTS FOB INC 23 NELIGH LN OKATIE, SC 29909</td>
<td>85-0894599</td>
<td>501 (c) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
# Schedule I (Form 990) 2020

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*Attach to Form 990.*

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of cash grant</th>
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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | OPERATION SHOESTRING INC  
PO BOX 11223 JACKSON, MS 39283 | 64-0471554 | 501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | OPERATION SMILE INC  
3641 FACULTY BLVD VIRGINIA BEACH, VA 23453 | 54-1460147 | 501 (C) 3 | 596,147. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | OPERATION STAND DOWN TENNESSEE  
1125 12TH AVE S NASHVILLE, TN 37203 | 62-1638832 | 501 (C) 3 | 9,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | OPERATION UNDERGROUND RAILROAD INC  
5121 S MURRAY BLVD MURRAY, UT 84123 | 46-3614979 | 501 (C) 3 | 77,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | OPERATION UNDERSTANDING OF THE DISTRICT OF  
3000 CONN AVE NW STE 335 WASHINGTON, DC 200 | 52-1822488 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | OPERATION WARM INC  
50 APPLIED BANK BLVD STE 204 GLEN MILLS, PA | 38-3663310 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | OPIOID SPOON PROJECT INC  
300 SUMMER ST WESTWOOD, MA 2090 | 83-4379142 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | OPPORTUNITY FUND COMMUNITY DEVELOPMENT  
111 W SAINT JOHN ST STE 800 SAN JOSE, CA 95 | 31-1719434 | 501 (C) 3 | 125,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | OPPORTUNITY HOUSE  
430 N 2ND ST READING, PA 19601 | 23-2536777 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | OPPORTUNITY INTERNATIONAL INC  
550 W VAN BUREN ST # ST200 CHICAGO, IL 6060 | 54-0907624 | 501 (C) 3 | 179,900. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | OPPORTUNITY JUNCTION INC  
3102 DELTA FAIR BLVD ANTIQUE, CA 94509 | 68-0459131 | 501 (C) 3 | 41,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | OPUS 118 HARLEM SCHOOL OF MUSIC  
129 W 6TH ST NEW YORK, NY 10023 | 13-3648982 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ORANGE CATHOLIC FOUNDATION</td>
<td>13280 CHAPMAN AVE GARDEN GROVE, CA 92840</td>
<td>33-0934571</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ORANGE COUNTY BIRD OF PREY CENTER</td>
<td>25422 TRABUCO RD # 150-541 LAKE FOREST, CA</td>
<td>33-0440942</td>
<td>501 (C) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) ORANGE COUNTY MUSEUM OF ART</td>
<td>1661 W SUNFLOWER AVE STE A1 SANTA ANA, CA 92847</td>
<td>95-1660847</td>
<td>501 (C) 3</td>
<td>1,101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ORANGE COUNTY RESCUE MISSION INC</td>
<td>1 HOPE DR TUSTIN, CA 92782</td>
<td>95-2479552</td>
<td>501 (C) 3</td>
<td>56,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ORANGEPARKS UNITED WAY</td>
<td>18012 MITCHELL S IRVINE, CA 92614</td>
<td>33-0047994</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) ORANGETOWN JEWISH CENTER</td>
<td>8 INDEPENDENCE AVENUE ORANGEBURG, NY 10962</td>
<td>13-6122898</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ORANGewood ACADEMY</td>
<td>13732 CLINTON ST GARDEN GROVE, CA 92843</td>
<td>95-1831091</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ORANGewood FOUNDATION</td>
<td>1575 E 17TH ST SANTA ANA, CA 92705</td>
<td>95-3616628</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) ORANGutan FOUNDATION INTERNATIONAL</td>
<td>824 WELLESLEY AVE LOS ANGELES, CA 90049</td>
<td>95-4412467</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) ORATORIO CHORALE</td>
<td>15 MIDDLE ST UNIT 304 PORTLAND, ME 4101</td>
<td>51-0166358</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ORATORIO SOCIETY OF NEW YORK</td>
<td>1140 AVENUE OF THE AMERICAS FL 9 NEW YORK,</td>
<td>13-1136460</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) ORATORY OF THE LITTLE WAY INCORPORATED</td>
<td>PO BOX 221 GAYLORDSVILLE, CT 6755</td>
<td>06-6079146</td>
<td>501 (C) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: __________________________

3. Enter total number of other organizations listed in the line 1 table: __________________________
**SCHEDULE I**

(501(c)(3) & Government Organizations and Individuals in the United States)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

*Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.*

---

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. **X** Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ORCAS ISLAND COMMUNITY FOUNDATION</td>
<td>91-1680527</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ORCAS ISLAND FOOD BANK</td>
<td>91-1255700</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) ORCHARD CHURCH OF GOD</td>
<td>32-0077553</td>
<td>501 (c) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) ORCHARD COVENANT CHURCH-INDIAN ORCHARD MA</td>
<td>04-3387622</td>
<td>501 (c) 3</td>
<td>9,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ORCHARD EVANGELICAL FREE CHURCH</td>
<td>36-2855668</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) ORCHARD HILL CHURCH</td>
<td>2551 BRANDT SCHOOL RD WEXFORD, PA 15090</td>
<td>501 (c) 3</td>
<td>9,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) ORCHARD VILLAGE</td>
<td>7660 GROSS POINT RD SKOKIE, IL 60077</td>
<td>501 (c) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ORDER OF ST BENEDICT IN PORTSMOUTH RHODE IS</td>
<td>285 CORYS LN PORTSMOUTH, RI 2871</td>
<td>05-0258947</td>
<td>59,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) ORDER OF ST BENEDICT INC</td>
<td>41-0693973</td>
<td>501 (c) 3</td>
<td>20,249.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ORDER OF ST BENEDICT OF NJ DELBARTON SCHOOL</td>
<td>230 MENDHAM RD MORRISTOWN, NJ 7960</td>
<td>22-1593525</td>
<td>126,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) OREGON CONFERENCE ADVENTIST CHURCHES</td>
<td>19800 OATFIELD RD GLADSTONE, OR 97027</td>
<td>30-0600040</td>
<td>53,540.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) OREGON CRIMINAL VICTIMS LAW CENTER</td>
<td>7412 SW BEAVERTON HILLSDALE HWY PORTLAND, OR 97021</td>
<td>26-4623843</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>OREGON ENVIRONMENTAL COUNCIL INC</td>
<td>93-0578714</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON FOOD BANK INC</td>
<td>93-0785786</td>
<td>501 (C) 3</td>
<td>336,931.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OREGON HEALTH AND SCIENCE UNIVERSITY FOUNDATION</td>
<td>23-7083114</td>
<td>501 (C) 3</td>
<td>175,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>OREGON HISTORICAL SOCIETY</td>
<td>93-0391599</td>
<td>501 (C) 3</td>
<td>126,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OREGON HUMANE SOCIETY</td>
<td>93-0386880</td>
<td>501 (C) 3</td>
<td>84,316.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON INSTITUTE FOR CREATIVE RESEARCH</td>
<td>47-4837503</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON MUSEUM OF SCIENCE AND INDUSTRY</td>
<td>93-0402877</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OREGON NATURAL RESOURCES COUNCIL FUND</td>
<td>93-7432820</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON PUBLIC BROADCASTING</td>
<td>93-814638</td>
<td>501 (C) 3</td>
<td>64,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON RIGHT TO LIFE EDUCATION FOUNDATION</td>
<td>51-0153335</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OREGON SHAKESPEARE FESTIVAL ASSOCIATION</td>
<td>93-0407022</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OREGON STATE UNIVERSITY FOUNDATION</td>
<td>93-6022772</td>
<td>501 (C) 3</td>
<td>221,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ![Yes/No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>OREGON SYMPHONY ASSOCIATION</td>
<td>93-0446527</td>
<td>501 (C) 3</td>
<td>169,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>OREGON TECH FOUNDATION INC</td>
<td>23-7056213</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>OREGON TRADESWOMEN INC</td>
<td>31-1655001</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>OREGON TRAIL COMMUNITY FOUNDATION</td>
<td>47-0596705</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ORGANIZATION FOR THE RESOLUTION OF AGUNOT I</td>
<td>81-0582070</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ORGANIZATION FOR TROPICAL STUDIES INC</td>
<td>56-2125831</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>ORIGINAL MUSIC WORKSHOP INC</td>
<td>27-2974840</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
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<td>8</td>
<td>ORINDA COMMUNITY FOUNDATION INC</td>
<td>27-2134212</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>ORINDA NETWORK FOR EDUCATION</td>
<td>94-2623617</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10</td>
<td>ORION COMMUNITIES INC</td>
<td>23-2074061</td>
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<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>ORLANDO HEALTH FOUNDATION INC</td>
<td>59-2244943</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ORLEANS CONSERVATION TRUST</td>
<td>23-7418072</td>
<td>501 (C) 3</td>
<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Part I
General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Name and address of organization or government</th>
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<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ORLEANS POND COALITION INC</td>
<td>203 S ORLEANS RD ORLEANS, MA 2653</td>
<td>14-1882175</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ORONO FOUNDATION FOR EDUCATION</td>
<td>PO BOX 211 LONG LAKE, MN 55356</td>
<td>41-1974305</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>ORPHAN CARE ETHIOPIA</td>
<td>PO BOX 151220 ORLEANS, VA 22030</td>
<td>82-1512200</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>ORPHAN GRAIN TRAIN INC</td>
<td>PO BOX 1466 NORFOLK, NE 68702</td>
<td>31-1614650</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>ORPHAN OUTREACH</td>
<td>2001 W PLANO PKWY STE 3700 PLANO, TX 75075</td>
<td>56-2623813</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>ORPHEUS CHAMBER ORCHESTRA INC</td>
<td>490 RIVERSIDE DR FL 11 NEW YORK, NY 10227</td>
<td>23-7362572</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>ORPHEUS CLUB OF PHILADELPHIA</td>
<td>254 S VAN FELT ST PHILADELPHIA, PA 19103</td>
<td>23-0934164</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8</td>
<td>ORT AMERICA INC</td>
<td>75 MAIDEN LN FL 10 NEW YORK, NY 10038</td>
<td>13-5562424</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>ORTHODOX CHRISTIAN MISSION CENTER INC</td>
<td>220 MASON MANATEE WAY SAINT AUGUSTINE, FL 3</td>
<td>59-3158396</td>
<td>501 (C) 3</td>
<td>12,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>ORTHODOX CHRISTIAN NETWORK INC</td>
<td>17070 COLLINS AVE STE 261 SUNNY ISLES BEACH</td>
<td>65-1105070</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ORTHOPAEDIC RESEARCH AND EDUCATION FOUNDATION</td>
<td>EDUCATION FOUNDATION 9400 W HIGGINS ROSEMONT</td>
<td>36-6009467</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>ORTHOPEDIC SOLUTIONS TO SURGICAL ACCESS INC</td>
<td>9 BRUCE RD MANCHESTER, CT 6040</td>
<td>81-2421831</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C)(3)</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ORTONVILLE BAPTIST CHURCH</td>
<td>173 N CHURCH ST ORTONVILLE, MI 48462</td>
<td>38-2092635</td>
<td>501 (C)(3)</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OSBORNE ASSOCIATION INC</td>
<td>809 WESTCHESTER AVE BRONX, NY 10455</td>
<td>13-5563028</td>
<td>501 (C)(3)</td>
<td>10,500</td>
<td>FMV</td>
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<td>OSP HEALTHCARE FOUNDATION</td>
<td>800 NE GLEN OAK AVE PEORIA, IL 61603</td>
<td>37-1259284</td>
<td>501 (C)(3)</td>
<td>32,000</td>
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<tr>
<td>OSHKOSH AREA COMMUNITY FOUNDATION CORPORATI</td>
<td>230 OHIO ST STE 100 OSHKOSH, WI 54902</td>
<td>39-2034571</td>
<td>501 (C)(3)</td>
<td>15,700</td>
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<td>OSHMAN FAMILY JEWISH COMMUNITY CENTER</td>
<td>3921 FABIAN WAY PALO ALTO, CA 94303</td>
<td>77-0185734</td>
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<td>22,600</td>
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<td>OSBORNIA UNIVERSITY MEDICAL ALUMNI ASSOCIATI</td>
<td>4622 PEbble BEach OR STOCKTON, CA 95219</td>
<td>52-1612092</td>
<td>501 (C)(3)</td>
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<td>FMV</td>
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<tr>
<td>OSWEGO COLLEGE FOUNDATION INC</td>
<td>219 SHELDON HALL SUNY OSWEGO OSWEGO, NY 131</td>
<td>15-0543477</td>
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<td>34,500</td>
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<td>OTTEY MEMORIAL PARISH</td>
<td>PO BOX 267 SEWANEE, TN 37375-0267</td>
<td>62-0598315</td>
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<td>7,800</td>
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<td>N/A</td>
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<tr>
<td>OTSEGO PUBLIC SCHOOLS FOUNDATION</td>
<td>PO BOX 251 OTSEGO, MI 49078</td>
<td>38-2690879</td>
<td>501 (C)(3)</td>
<td>100,000</td>
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<td>OTTERBEIN UNIVERSITY</td>
<td>1 S GROVE ST WESTERVILLE, OH 43081</td>
<td>31-4379532</td>
<td>501 (C)(3)</td>
<td>45,000</td>
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<td>OUR CALLING INC</td>
<td>PO BOX 140428 DALLAS, TX 75214</td>
<td>26-4430860</td>
<td>501 (C)(3)</td>
<td>30,000</td>
<td>FMV</td>
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<tr>
<td>OUR CHILDREN'S TRUST</td>
<td>PO BOX 5181 EUGENE, OR 97405</td>
<td>27-3094382</td>
<td>501 (C)(3)</td>
<td>131,000</td>
<td>FMV</td>
<td>N/A</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

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

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>OUR COMPANIONS DOMESTIC ANIMAL SANCTUARY IN MANCHESTER, CT 6045</td>
<td>41-2047734</td>
<td>501 (c) 3</td>
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<td>N/A</td>
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<td>OUR DAILY BREAD CINCINNATI, OH 45250</td>
<td>31-1126386</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>OUR DAILY BREAD FOOD PANTRY MARCO ISLAND, FL 34146</td>
<td>83-2956050</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR DAILY BREAD MINISTRIES FOUNDATION 3000 KRAFT AVE SE GRAND RAPIDS, MI 49512</td>
<td>38-3447967</td>
<td>501 (c) 3</td>
<td>157,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>OUR DAILY REST SENECA, SC 29679</td>
<td>20-2887881</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR FATHER LUTHERAN CHURCH HOLLY ST CENTENNIAL, CO 80121</td>
<td>84-0714954</td>
<td>501 (c) 3</td>
<td>30,934.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR FATHERS HOUSE SOUP KITCHEN INC PO BOX 668571 POMPANO BEACH, FL 33066</td>
<td>65-0150748</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>OUR GENERATION SPEAKS 415 S ST MS035 WALTHAM, MA 2453</td>
<td>83-1059970</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR HOSPICE OF SOUTH CENTRAL INDIANA INC 2626 17TH ST COLUMBUS, IN 47201</td>
<td>35-1479425</td>
<td>501 (c) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR HOUSE FOUNDATION INC FLORAL AVE NEW PROVIDENCE, NJ 7974</td>
<td>22-2856145</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR HOUSE INC PO BOX 34155 LITTLE ROCK, AR 72203</td>
<td>71-0653846</td>
<td>501 (c) 3</td>
<td>31,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR KIDS AT HEART 5909 REICHER DR AUSTIN, TX 78723</td>
<td>82-2206645</td>
<td>501 (c) 3</td>
<td>8,640.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .........................................................

3 Enter total number of other organizations listed in the line 1 table .................................................................

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## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) OUR LADY ASSUMPTION 3175 TELEGRAPH RD VENTURA, CA 93003</td>
<td>95-1816002</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) OUR LADY OF ANGELS CHURCH 1721 HILLSIDE DR BURLINGAME, CA 94010</td>
<td>94-1186160</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) OUR LADY OF CONSOLATION CHURCH 4865 11 MILE RD NE ROCKFORD, MI 49341</td>
<td>38-1989266</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) OUR LADY OF FATIMA RETREAT HOUSE INC 5353 E 56TH ST INDIANAPOLIS, IN 46226</td>
<td>45-0608082</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) OUR LADY OF GOOD COUNSEL 230 EAST 90TH STREET NEW YORK, NY 10128</td>
<td>13-1623950</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) OUR LADY OF GRACE 5071 EDEN AVE MINNEAPOLIS, MN 55436</td>
<td>41-0705765</td>
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<td>(7) OUR LADY OF GRACE CATHOLIC CHURCH 2203 WEST MARKET STREET GREENSBORO, NC 2740</td>
<td>56-0594574</td>
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<td>11,500.</td>
<td>FMV</td>
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<td>(8) OUR LADY OF GUADALUPE CATHOLIC CHURCH 17 HAWESBURY DR SAINT LOUIS, MO 63121</td>
<td>43-0708879</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>(9) OUR LADY OF GUADALUPE MONASTERY INC 142 JOSEPH BLANK RD SILVER CITY, NM 88061</td>
<td>85-0414686</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(10) OUR LADY OF GUADALUPE PARISH 5175 COLD SPRING CREAMERY RD DOYLESTOWN, PA</td>
<td>23-3046838</td>
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<td>63,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) OUR LADY OF LIGHT PARISH 19680 CYPRESS VIEW DR FORT MYERS, FL 33967</td>
<td>65-0196037</td>
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<td>11,100.</td>
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<tr>
<td>(12) OUR LADY OF LORETO CATHOLIC PARISH IN FOXFIELD 18000 E ARAPAHOE RD FOXFIELD, CO 80116</td>
<td>84-1489200</td>
<td>501 (C) 3</td>
<td>10,100.</td>
<td>FMV</td>
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</tbody>
</table>

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

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<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) OUR LADY OF LOURDES CATHOLIC CHURCH WASHING</td>
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<td>1014 MADISON AVE WASHINGTON, MO 63090</td>
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<td>(2) OUR LADY OF LOURDES OF ST. ANTHONY CHURCH</td>
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<td>1 LOURDES PL MINNEAPOLIS, MN 55414</td>
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<td>(3) OUR LADY OF MERCY ACADEMY</td>
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<td>(4) OUR LADY OF MERCY CHURCH &amp; SCHOOL</td>
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<td>20,600.</td>
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<tr>
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<td>1008 AUSTIN STREET PORTLAND, TX 78374</td>
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<td>(8) OUR LADY OF MOUNT CARMEL CATHOLIC CHURCH</td>
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<tr>
<td>P.O. BOX 301825 ST. THOMAS, VI 00831-0241</td>
<td>66-0480272</td>
<td>501 (C) 3</td>
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<tr>
<td>(9) OUR LADY OF MOUNT CARMEL CATHOLIC PARISH IN</td>
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<td>5620 S HICKORY CIR LITTLETON, CO 80120</td>
<td>84-1413015</td>
<td>501 (C) 3</td>
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<td>14598 OAK RIDGE RD CARMEL, IN 46032</td>
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<tr>
<td>(11) OUR LADY OF MT CARMEL SCHOOL</td>
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<td>59 E MAIN ST ELMSTOWN, NY 10523</td>
<td>13-2693064</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>(12) OUR LADY OF MT. CARMEL CATHOLIC CHURCH</td>
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</tr>
<tr>
<td>P.O. BOX 1097 OSPREY, FL 34229</td>
<td>36-4491957</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>OUR LADY OF PERPETUAL HELP</td>
<td>93-0415218</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>OUR LADY OF PERPETUAL HELP CATHOLIC SCHOOL</td>
<td>30-0439313</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>3</td>
<td>OUR LADY OF PERPETUAL HELP CHURCH</td>
<td>36-2170895</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>OUR LADY OF PERPETUAL HELP ROMAN CATHOLIC P</td>
<td>94-3455995</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>5</td>
<td>OUR LADY OF SORROWS</td>
<td>63-0366279</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>OUR LADY OF SORROWS CHURCH ADMIN</td>
<td>36-2182088</td>
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<td>13,000.</td>
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<td>8</td>
<td>OUR LADY OF THE ASSUMPTION</td>
<td>22-1520385</td>
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<td>9</td>
<td>OUR LADY OF THE ASSUMPTION</td>
<td>23-1501171</td>
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<td>OUR LADY OF THE ASSUMPTION CATHOLIC CHURCH</td>
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<tr>
<td>11</td>
<td>OUR LADY OF THE CEDARS MARONITE CATHOLIC CH</td>
<td>76-0324958</td>
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<td>12</td>
<td>OUR LADY OF THE GULF</td>
<td>74-1308468</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Part I - General Information on Grants and Assistance**

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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</tr>
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<tbody>
<tr>
<td>OUR LADY OF THE HAMPTONS SCHOOL 160 N MAIN ST SOUTHAMPTON, NY 11968</td>
<td>06-1066827</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY OF THE LAKE CATHOLIC CHURCH PO BOX 549 CHAFLN, TN 37077</td>
<td>57-0765343</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY OF JESUS CHURCH</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>OUR LADY OF THE LAKE CATHOLIC CHURCH PO BOX 279 HENDERSONVILLE, SC 29036</td>
<td>62-0652793</td>
<td>501 (C) 3</td>
<td>21,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>OUR LADY OF THE LAKE COMMUNITY 106 N 2ND AVE E ASHLAND, WI 54806</td>
<td>59-1676662</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>OUR LADY OF THE LAKE PARISH 24832 US 12 EAST EDWARDSBURG, MI 49112</td>
<td>38-1734760</td>
<td>501 (C) 3</td>
<td>5,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>OUR LADY OF THE PILLAR CATHOLIC CHURCH 401 S LINDBERGH BLVD SAINT LOUIS, MO 63131</td>
<td>43-0653395</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY OF THE RIVER CHURCH 28200 226TH STREET PL LE CLAIRE, IA 52753</td>
<td>42-6141685</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>OUR LADY OF VICTORY CHURCH 4105 N DIVISION ST DAVENPORT, IA 52806</td>
<td>42-0868097</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY OF WISDOM CATHOLIC CHURCH CATHOLIC STUDENT 501 E SAINT MARY BLVD LAFAYETTE, LA 70503</td>
<td>72-0542001</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY QUEEN OF ANGELS PARISH 2046 MAR VISTA DR NEWPORT BEACH, CA 92660</td>
<td>95-2848353</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR LADY QUEEN OF HEAVEN CHURCH 617 N CLAISE ST LAKE CHARLES, LA 70605</td>
<td>72-0549479</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>OUR LADY QUEEN OF PEACE PARISH 401 S OWEN DR MADISON, WI 53711</td>
<td>39-0824008</td>
<td>501 (C) 3</td>
<td>31,570.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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<td>1(a)</td>
<td>(a) Name and address of organization or government</td>
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<tr>
<td>(1)</td>
<td>OUR LADY STAR OF THE SEA CORPORATION</td>
</tr>
<tr>
<td>(2)</td>
<td>OUR LITTLE ROSES FOREIGN MISSION SOCIETY</td>
</tr>
<tr>
<td>(3)</td>
<td>OUR MILITARY KIDS INC</td>
</tr>
<tr>
<td>(4)</td>
<td>OUR MOTHER OF CONSOLATION PARISH SCHOOL</td>
</tr>
<tr>
<td>(5)</td>
<td>OUR NEXT GENERATION INC</td>
</tr>
<tr>
<td>(6)</td>
<td>OUR PLACE NASHVILLE</td>
</tr>
<tr>
<td>(7)</td>
<td>OUR PLACE OF NEW TRIER TOWNSHIP INC</td>
</tr>
<tr>
<td>(8)</td>
<td>OUR REDEEMER LUTHERAN CHURCH</td>
</tr>
<tr>
<td>(9)</td>
<td>OUR SAVIOR EVANGELICAL LUTHERAN CHURCH</td>
</tr>
<tr>
<td>(10)</td>
<td>OUR SAVIOR LUTHERAN CHURCH</td>
</tr>
<tr>
<td>(11)</td>
<td>OUR SAVIOR LUTHERAN CHURCH AUBURN</td>
</tr>
<tr>
<td>(12)</td>
<td>OUR SAVIORS LUTHERAN CHURCH</td>
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### General Information on Grants and Assistance

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   - No

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>OUR SAVIORS LUTHERAN CHURCH OF SIoux FALLS</td>
<td>46-0229996</td>
<td>501 (c) 3</td>
<td>18,500</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>OUR SAVIORS COMMUNITY SERVICES</td>
<td>20-0810105</td>
<td>501 (c) 3</td>
<td>8,000</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>OUR SAVIORS' EVANGELICAL LUTHERAN CHURCH OF</td>
<td>36-2684454</td>
<td>501 (c) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>OUR SHEPHERDS, OUR FUTURE</td>
<td>83-3605677</td>
<td>501 (c) 3</td>
<td>13,734</td>
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<td>N/A</td>
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<td>OUR UPSTATE-SC</td>
<td>45-1842000</td>
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<td>OUT AT THE MOVIES</td>
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<td>FMV</td>
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<td>OUT YOUTH AUSTIN</td>
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<td>OUTER BANKS RELIEF FOUNDATION INC</td>
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<td>FMV</td>
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<td>OUTER COAST</td>
<td>82-3228207</td>
<td>501 (c) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
<td>1</td>
<td>OUTLINC INC</td>
<td>211 N 14TH ST LINCOLN, NE 68508</td>
<td>27-1377612</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>OUTREACH COMMUNITY MINISTRIES INC</td>
<td>373 S SCHMALE RD STE 102 CAROL STREAM, IL 6</td>
<td>23-7265066</td>
<td>501 (C) 3</td>
<td>14,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>OUTREACH FOR WORLD HOPE INC</td>
<td>3099 TIMBER LN VERONA, WI 53593</td>
<td>20-2997559</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>OUTREACH FOUNDATION OF THE PRESBYTERIAN CHURCH</td>
<td>381 RIVERSIDE DR STE 110 FRANKLIN, TN 37064</td>
<td>58-1375506</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>OUTREACH UNITED RESOURCE CENTER INC</td>
<td>220 COLLYER ST LONGMONT, CO 80501</td>
<td>74-2448346</td>
<td>501 (C) 3</td>
<td>21,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>OUTRIGHT ACTION INTERNATIONAL</td>
<td>80 MAIDEN LANE NEW YORK, NY 10038</td>
<td>94-3139952</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>OUTSIDE IN</td>
<td>1132 SW 13TH AVE PORTLAND, OR 97205</td>
<td>93-0567549</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>OUTSIDE THE BOWL</td>
<td>1421 CALLE MARBELLA OCEANSIDE, CA 92056</td>
<td>26-4107618</td>
<td>501 (C) 3</td>
<td>120,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>OUTWARD BOUND CENTER FOR PEACEBUILDING</td>
<td>2946 NORTHERN BLVD LONG ISLAND CITY, NY 111</td>
<td>14-2012329</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>OUTWARD BOUND INC</td>
<td>1133 ROUTE 55 STE 10 LAGRANGEVILLE, NY 1254</td>
<td>04-2375956</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>OVARIAN CANCER RESEARCH FUND INC</td>
<td>225 W 34TH ST STE 2110 NEW YORK, NY 10122</td>
<td>13-3806788</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>OVERTON COUNTRY CHURCH</td>
<td>4131 N HIGH ST COLUMBUS, OH 43214</td>
<td>31-4405933</td>
<td>501 (C) 3</td>
<td>20,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table ..............................................................................................................
## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - X Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. OVERLAKE CHRISTIAN CHURCH 9900 WILLOWS RD NE REDMOND, WA 98052 91-0863908 501 (C) 3 86,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. OVERLAKE HOSPITAL FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004 91-1050325 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. OVERLAKE SCHOOL 20301 NE 108TH ST REDMOND, WA 98053 91-0814431 501 (C) 3 50,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. OVERLAKE SERVICE LEAGUE 302 BELLEVUE SQ FL 3 BELLEVUE, WA 98004 91-0658331 501 (C) 3 19,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>5. OVERLOOK FOUNDATION 46 BEAUVOIR AVE # 48 SUMMIT, NJ 7901 51-0194054 501 (C) 3 21,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6. OVERSEAS AND CONTINENTAL INDEPENDENT ASSOCIATION PO BOX 952 BLOOMFIELD HILLS, MI 48303 38-2225471 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. OVERSEAS RADIO &amp; TELEVISION INC PO BOX 118 SEATTLE, WA 98111 91-0741970 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. OVERTURE CENTER FOUNDATION INC 201 STATE ST MADISON, WI 53703 01-0645482 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td>9. OWL RESEARCH INSTITUTE INC PO BOX 39 CHARLO, MT 59824 81-0453479 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10. OWN YOUR FUTURE OUTREACH INC 231 E 34TH ST APT 5A NEW YORK, NY 10016 82-3936270 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. OXBOW PO BOX 216 SAUGATUCK, MI 49453 38-1081760 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. OXBOW SCHOOL 530 THIRD ST NAPA, CA 94559 94-3265708 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990) 2020**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1.</td>
<td>226 CAUSEWAY ST FL 5 BOSTON, MA 2114</td>
<td>23-7069110</td>
<td>501 (C) 3</td>
<td>1,084,926.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2.</td>
<td>OXFORD HOUSE INC</td>
<td>1010 WAYNE AVE STE 300 SILVER SPRING, MD 20</td>
<td>52-1582231</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3.</td>
<td>OXFORD-UNIVERSITY UNITED METHODIST CHURCH</td>
<td>424 SOUTH 10TH STREET OXFORD, MS 38655</td>
<td>64-0340757</td>
<td>501 (C) 3</td>
<td>94,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4.</td>
<td>OYATE GROUP</td>
<td>205 E 124TH ST NEW YORK, NY 10035</td>
<td>82-3644288</td>
<td>501 (C) 3</td>
<td>1,260,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5.</td>
<td>OZARK GUIDANCE CENTER INC</td>
<td>PO BOX 6430 SPRINGDALE, AR 72766</td>
<td>70-0416869</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6.</td>
<td>OZARK REGIONAL LAND TRUST</td>
<td>POC-104 E BROADWAY TL COLUMBIA, MO 65203</td>
<td>44-1304715</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7.</td>
<td>OZARKS FOOD HARVEST INC</td>
<td>2810 N CEDARBROOK AVE SPRINGFIELD, MO 65803</td>
<td>43-1426384</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8.</td>
<td>OZARKS REGIONAL YMCA</td>
<td>417 S JEFFERSON AVE SPRINGFIELD, MO 65806</td>
<td>44-0545283</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9.</td>
<td>OZARKS WASHINGTON LAND TRUST INC</td>
<td>PO BOX 917 WEST BEND, WI 53095</td>
<td>39-1741288</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10.</td>
<td>OZONE HOUSE INC</td>
<td>1600 N HURON DRIVE YPSILANTI, MI 48197</td>
<td>38-1916505</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11.</td>
<td>P E F ISRAEL ENDOWMENT FUNDS INC</td>
<td>630 3RD AVE RM 1501 NEW YORK, NY 10017</td>
<td>13-6104086</td>
<td>501 (C) 3</td>
<td>1,632,646.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12.</td>
<td>P E O FOUNDATION</td>
<td>3700 GRAND AVE DES MOINES, IA 50312</td>
<td>42-6094564</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
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<tr>
<td>1</td>
<td>P E R C INC</td>
<td>65-0870592</td>
<td>501 (C) 3</td>
<td>26,200</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>2</td>
<td>P4L</td>
<td>20-4235269</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>3</td>
<td>PA ALLIANCE FOUNDATION</td>
<td>82-3717563</td>
<td>501 (C) 3</td>
<td>532,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>4</td>
<td>PAAMONIM</td>
<td>20-5392216</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>5</td>
<td>PACER ACADEMY INC</td>
<td>58-0706812</td>
<td>501 (C) 3</td>
<td>19,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>PACER CENTER FOR GIRLS INC</td>
<td>59-2414492</td>
<td>501 (C) 3</td>
<td>91,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>7</td>
<td>PACER UNIVERSAL</td>
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<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>8</td>
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<td>FMV</td>
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<td>9</td>
<td>FACELLI CATHOLIC SCHOOLS INC</td>
<td>39-0914996</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>11</td>
<td>PACHAMAMA ALLIANCE</td>
<td>94-3249793</td>
<td>501 (C) 3</td>
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<td>12</td>
<td>PACHAMAMAS PATH INC</td>
<td>26-0389466</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

JSA

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<tr>
<td>PACIFIC CREST TRAIL ASSOCIATION</td>
<td>1331 GARDEN HIGHWAY SACRAMENTO, CA 95833</td>
<td>33-0051202</td>
<td>501 (c) 3</td>
<td>81,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PACIFIC ENVIRONMENT AND RESOURCES CENTER</td>
<td>473 PINE ST FL 3 SAN FRANCISCO, CA 94104</td>
<td>94-2628924</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PACIFIC FOREST TRUST INC</td>
<td>1001 OREILLY AVE STE A SAN FRANCISCO, CA 94</td>
<td>68-0292509</td>
<td>501 (c) 3</td>
<td>230,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PACIFIC GARDEN MISSION</td>
<td>1458 S CANAL ST CHICAGO, IL 60607</td>
<td>36-2445391</td>
<td>501 (c) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PACIFIC LEGAL FOUNDATION</td>
<td>930 G ST SACRAMENTO, CA 95814</td>
<td>94-2197343</td>
<td>501 (c) 3</td>
<td>202,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PACIFIC LINKS FOUNDATION</td>
<td>534 VALLEY WAY MILPITAS, CA 95035</td>
<td>94-3397768</td>
<td>501 (c) 3</td>
<td>503,414.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PACIFIC LUTHERAN UNIVERSITY INC</td>
<td>12180 PARK AVE S TACOMA, WA 98447</td>
<td>91-0565571</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PACIFIC NORTHWEST BALLETT ASSOCIATION</td>
<td>301 MERCER ST SEATTLE, WA 98109</td>
<td>81-0897129</td>
<td>501 (c) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PACIFIC NORTHWEST UNIVERSITY OF HEALTH SCIE</td>
<td>111 UNIVERSITY PKWY YAKIMA, WA 98901</td>
<td>06-1744054</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PACIFIC PUBLIC MEDIA</td>
<td>2601 4TH AVE STR 150 SEATTLE, WA 98121</td>
<td>81-1095651</td>
<td>501 (c) 3</td>
<td>37,900.</td>
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<td>PACIFIC RESEARCH INSTITUTE FOR PUBLIC POLIC</td>
<td>PO BOX 60485 PASADENA, CA 91116</td>
<td>94-2528433</td>
<td>501 (c) 3</td>
<td>27,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PACIFIC RESIDENT THEATRE ENSEMBLE</td>
<td>703 VENICE BLVD VENICE, CA 90029</td>
<td>95-4020232</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</thead>
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<td>93-0386892</td>
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<td>94-1347046</td>
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<td>8,400.</td>
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<td>5</td>
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<td>94-1527749</td>
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<td>PADS LAKE COUNTY INC</td>
<td>36-2948857</td>
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<td>12</td>
<td>PADS TO HOPE INC</td>
<td>36-3919018</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1)</td>
<td>PADMINA FRANCISCAN HIGH SCHOOL</td>
<td>6740 STATE ROAD PARMA, OH 44134-4598</td>
<td>34-1719465</td>
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<td>PAGE EDUCATION FOUNDATION</td>
<td>PO BOX 581254 MINNEAPOLIS, MN 55458</td>
<td>36-3605013</td>
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<td>19,200.</td>
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<td>(3)</td>
<td>PAGE SEVENTY THREE PRODUCTIONS INC</td>
<td>80 HANSON PL STE 305 BROOKLYN, NY 11217</td>
<td>13-4059276</td>
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<td>(4)</td>
<td>PAID IN FULL OREGON</td>
<td>5244 SE PINE ST HILLSBORO, OR 97123</td>
<td>81-5371204</td>
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<td>44,000.</td>
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<td>PAIDEIA SCHOOL INCORPORATED</td>
<td>1509 FOND D L AVE NE ATLANTA, GA 30307</td>
<td>23-7089522</td>
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<td>PAIGE HISTORICAL ASSOCIATION</td>
<td>PO BOX 143 PAIGE, TX 78659</td>
<td>74-2595194</td>
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<td>7,500.</td>
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<td>(7)</td>
<td>PAINTED BRIDE ART CENTER INC</td>
<td>230 VINE ST PHILADELPHIA, PA 19106</td>
<td>23-1946391</td>
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<td>15,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>PAJAMA PROGRAM INC</td>
<td>114 EAST 39TH STREET NEW YORK, NY 10016</td>
<td>02-0588068</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>PAJARO VALLEY LOAVES AND FISHES INC</td>
<td>150 2ND ST WATSONVILLE, CA 95076</td>
<td>77-0319247</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>PAJARO VALLEY UNIFIED SCHOOL DISTRICT</td>
<td>SUPERINTENDENTS OFFICE 294 GREEN VALLEY ROA</td>
<td>77-0375541</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>(11)</td>
<td>PALAVER STRINGS INCORPORATED</td>
<td>45 EXCHANGE ST STE 300K PORTLAND, ME 4101</td>
<td>47-4914834</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>PALESTINE CHILDREN'S RELIEF FUND</td>
<td>PO BOX 1926 KENT, OH 44240</td>
<td>93-1057665</td>
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<td>75,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. XXX Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) PALM BEACH ATLANTIC UNIVERSITY INC</td>
<td>901 S FLAGLER DR WEST PALM BEACH, FL 33401</td>
<td>59-1092732</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) PALM BEACH CIVIC ASSOCIATION INC</td>
<td>139 N COUNTY RD PALM BEACH, FL 33480</td>
<td>59-0542089</td>
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<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) PALM BEACH COUNTY FISHING FOUNDATION INC</td>
<td>PO BOX 468 WEST PALM BEACH, FL 33402</td>
<td>65-0213715</td>
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<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) PALM BEACH COUNTY FOOD BANK INC</td>
<td>701 BOUTWELL RD STE A2 LAKE WORTH BEACH, FL</td>
<td>90-0788707</td>
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<td>(5) PALM BEACH COUNTY SHERIFFS FOUNDATION</td>
<td>3228 GUN CLUB RD WEST PALM BEACH, FL 33406</td>
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<td>(6) PALM BEACH DRAMAWORKS INC</td>
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<td>1480 VIA MANANA PALM BEACH, FL 33480</td>
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<td>65-0478910</td>
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<td>(10) PALM COAST BAPTIST CHURCH DBA PARKVIEW BAPT</td>
<td>5435 BELLE TERRE PARKWAY PALM COAST, FL 321</td>
<td>59-3439613</td>
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<td>(11) PALM DESERT COMMUNITY PRESBYTERIAN</td>
<td>47321 HIGHWAY 74 PALM DESERT, CA 92260</td>
<td>95-2287741</td>
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<td>25,000.</td>
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<td>(12) PALM SPRINGS ART MUSEUM</td>
<td>PO BOX 2310 PALM SPRINGS, CA 92263</td>
<td>95-1809576</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. .................................

3. Enter total number of other organizations listed in the line 1 table ..............................................................................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  Schedule I (Form 990) 2020
# SCHEDULE I
## (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>65-0177554</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PALMYRA CHURCH OF THE BRETHREN</td>
<td>23-1571157</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
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<td>PALO ALTO UNIVERSITY INC</td>
<td>94-2340692</td>
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<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>PAMODZI PHILANTHROPY ADVISORS INC</td>
<td>84-3552618</td>
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<td>N/A</td>
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<td>12</td>
<td>PAN AMERICAN DEVELOPMENT FOUNDATION INC</td>
<td>52-6054268</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

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**JSA**  
OE1288 1.000  
18674H 1467  
V 20-7.21
**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>PAN MASSACHUSETTS CHALLENGE TRUST</td>
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<td>PANELEA COMMUNITIES</td>
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<td>PANTHERA CORPORATION</td>
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<td>501 (C) 3</td>
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<tr>
<td>PAOLI MEMORIAL HOSPITAL FOUNDATION</td>
<td>27-1706063</td>
<td>501 (C) 3</td>
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<td>PARA LOS NINOS</td>
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<td>PARACLETE MISSION GROUP INC</td>
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<td>N/A</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) PARADIGM FOR PARITY INC 969 5TH AVE NEW YORK, NY 10075</td>
<td>85-2840852</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<tr>
<td>(2) PARADISE ATLANTA WESTSIDE ENRICHMENT CENTER PO BOX 20468 ATLANTA, GA 30325</td>
<td>47-1168129</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(3) PARADISUS DEI INC 11634 DENISE DR HOUSTON, TX 77024</td>
<td>06-1699099</td>
<td>501 (C) 3</td>
<td>14,750.</td>
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<tr>
<td>(4) PARALLEL NETWORKS 7100 FAIRCHILD DR ALEXANDRIA, VA 22306</td>
<td>82-4730981</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) PARALYZED VETERANS OF AMERICA 801 18TH ST NW WASHINGTON, DC 20006</td>
<td>12-1946868</td>
<td>501 (C) 3</td>
<td>34,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) PARAMOUNT THEATRE FOR THE PERFORMING ARTS I PO BOX 1566 AUSTIN, TX 78767</td>
<td>74-1774711</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) PARC INC 3190 TYRONE BLVD N SAINT PETERBURG, FL 337</td>
<td>59-09791038</td>
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<tr>
<td>(8) PARDES INSTITUTE OF JEWISH STUDIES NORTH AM 54 W 40TH ST NEW YORK, NY 10018</td>
<td>22-2594099</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<tr>
<td>(9) PARDES JEWISH DAY SCHOOL INC 12753 N SCOTTSDALE RD SCOTTSDALE, AZ 85254</td>
<td>86-0893657</td>
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<td>125,000.</td>
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<tr>
<td>(10) PARENT BOOSTER USA INC 6328 WOODMAN AVE VAN NUYS, CA 91401</td>
<td>85-2044980</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11) PARENT ENCOURAGEMENT PROGRAM INC 10100 CONNECTICUT AVE KENSINGTON, MD 20895</td>
<td>52-1379642</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) PARENT INFANT CENTER 4205 SFRIECE ST PHILADELPHIA, PA 19104</td>
<td>23-2151143</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes [X]  No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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</thead>
<tbody>
<tr>
<td>PARENT TO PARENT ADDICTION SERVICES INC 325B W WASHINGTON AVE WASHINGTON, NJ 7882</td>
<td>83-2031762</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARENTCHILD PLUS INC 163B MINOLEA BLVD MINOLEA, NY 11501</td>
<td>11-2495601</td>
<td>501 (C) 3</td>
<td>548,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARENTS FAMILIES AND FRIENDS OF LESBIANS AND GAYS 85 RIVER ST STE 3A WALTHAM, MA 2453</td>
<td>04-3272394</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARENTS FOR PEACE 1490 UNION AVE 153 MEMPHIS, TN 38104</td>
<td>47-4142897</td>
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<td>FMV</td>
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<tr>
<td>PARISH CHURCH OF ST MARTINS IN THE FIELDS 5220 CLEMSON AVE COLUMBIA, SC 29206</td>
<td>57-0384820</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARISH OF CHRIST EPISCOPAL CHURCH EASTON 59 CHURCH RD EASTON, CT 6612</td>
<td>06-6011376</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARISH OF ST. PATRICK 1357 NORTHEAST 42ND TERRACE KANSAS CITY, MO 64126</td>
<td>43-0613317</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PARK AVENUE SYNAGOGUE 50 EAST 87TH STREET NEW YORK, NY 10128</td>
<td>13-1860028</td>
<td>501 (C) 3</td>
<td>8,959.</td>
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<td>PARK CITIES BAPTIST CHURCH 3933 NORTHWEST PKWY DALLAS, TX 75225</td>
<td>75-0897960</td>
<td>501 (C) 3</td>
<td>53,500.</td>
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<tr>
<td>PARK CITY COMMUNITY FOUNDATION PO BOX 681499 PARK CITY, UT 84068</td>
<td>30-0171971</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARK CITY CONSERVATION ASSOCIATION 1951 WOODBINE WAY PARK CITY, UT 84060</td>
<td>87-0480848</td>
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<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PARK CITY EDUCATION FOUNDATION PO BOX 681422 PARK CITY, UT 84068</td>
<td>74-2552454</td>
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<td>29,000.</td>
<td>FMV</td>
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</table>

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Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>PARK CITY JEWISH CENTER INC</td>
<td>3700 BROOKSIDE CT PARK CITY, UT 84060</td>
<td>87-0543584 501 (C) 3</td>
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<td>N/A</td>
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<td>PARK CITY TOTS</td>
<td>1850 SIDEWINDER DR STE 410 PARK CITY, UT 84</td>
<td>47-2876497 501 (C) 3</td>
<td>50,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PARK COMMUNITY CHURCH</td>
<td>1001 N CROSBY ST CHICAGO, IL 60610</td>
<td>36-3514586 501 (C) 3</td>
<td>16,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PARK EAST SYNAGOGUE CONGREGATION ZICHRON EP</td>
<td>164 EAST 68TH STREET NEW YORK, NY 10065</td>
<td>13-1766598 501 (C) 3</td>
<td>158,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARK MCCULLOUGH HOUSE ASSOC INC</td>
<td>PO BOX 388 N BENNINGTON, VT 5257</td>
<td>03-0220979 501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>PARK SCHOOL CORPORATION</td>
<td>171 GODDARO AVE BROOKLINE, MA 2445</td>
<td>04-2104824 501 (C) 3</td>
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<td>PARK SCHOOL OF BALTIMORE INC</td>
<td>2425 OLD COURT RD PIKESVILLE, MD 21208</td>
<td>52-0591625 501 (C) 3</td>
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<td>16-0755814 501 (C) 3</td>
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<tr>
<td>PARK SLOPE JEWISH CENTER</td>
<td>8TH AVE 14TH STREET BROOKLYN, NY 11215</td>
<td>11-1963905 501 (C) 3</td>
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<tr>
<td>PARK STREET CHURCH</td>
<td>1 PARK ST BOSTON, MA 2108</td>
<td>04-2121368 501 (C) 3</td>
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<td>PARK SYNAGOGUE</td>
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<td>PARK TUDOR FOUNDATION INC</td>
<td>7200 N COLLEGE AVE INDIANAPOLIS, IN 46240</td>
<td>35-0909976 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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### Part I  General Information on Grants and Assistance

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   - Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>FMV</td>
<td>N/A</td>
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<td>PARKLAND COLLEGE</td>
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<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>56-2299912</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PARKS &amp; TRAILS COUNCIL OF MINNESOTA</td>
<td>41-1450303</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>PARKSIDE CHURCH</td>
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<td>PARKWAY COMMUNITY CHURCH</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PAROLE PREPARATION PROJECT INC</td>
<td>82-1096572</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ..................................................

3. Enter total number of other organizations listed in the line 1 table: ..................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) PARRISH ART MUSEUM INC</td>
<td>279 MONTAUK HWY WATER MILL, NY 11976</td>
<td>11-1782495</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) PART OF THE SOLUTION INC</td>
<td>2759 WEBSTER AVE BRONX, NY 10458</td>
<td>13-3425071</td>
<td>501 (C) 3</td>
<td>75,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) PARTICIPANT INCORPORATED</td>
<td>253 E HOUSTON ST NEW YORK, NY 10002</td>
<td>26-0017746</td>
<td>501 (C) 3</td>
<td>96,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) PARTICIPATORY SAFETY INC</td>
<td>560 W 43RD ST APT 39C NEW YORK, NY 10036</td>
<td>47-1547546</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) PARTNERS ASIA</td>
<td>436 14TH ST STE 411 OAKLAND, CA 94612</td>
<td>45-4855118</td>
<td>501 (C) 3</td>
<td>435,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) PARTNERS FOR SACRED PLACES INC</td>
<td>1700 SANSOM ST FL 10 PHILADELPHIA, PA 19103</td>
<td>23-2560361</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) PARTNERS FOR YOUTH WITH DISABILITIES</td>
<td>5 MIDDLESEX AVE SOMERVILLE, MA 2145</td>
<td>22-2627798</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) PARTNERS FOUNDATION</td>
<td>127 KRAUSER RD DOWNINGTOWN, PA 19335</td>
<td>84-4842571</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) PARTNERS HEALTHCARE SYSTEM INC</td>
<td>243 CHARLES ST BOSTON, MA 2145</td>
<td>04-2785453</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) PARTNERS HEALTHCARE SYSTEM INC</td>
<td>399 REVOLUTION DR STE 645 SOMERVILLE, MA 21</td>
<td>04-1564655</td>
<td>501 (C) 3</td>
<td>3,078,500.</td>
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<td>(11) PARTNERS HEALTHCARE SYSTEM INC</td>
<td>399 REVOLUTION DR STE 645 SOMERVILLE, MA 21</td>
<td>04-2551124</td>
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<td>760,000.</td>
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<td>(12) PARTNERS HEALTHCARE SYSTEM INC</td>
<td>ATTN MGB TAX DEPT 399 REVOLUTION D SOMERVILLE</td>
<td>04-2312909</td>
<td>501 (C) 3</td>
<td>326,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**PART I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**PART II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1 (a)</td>
<td>PARTNERS HEALTHCARE SYSTEM INC</td>
<td>04-2697981</td>
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<tr>
<td>2 (a)</td>
<td>PARTNERS HEALTHCARE SYSTEM INC</td>
<td>04-2103823</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 (a)</td>
<td>PARTNERS HEALTHCARE SYSTEM INC</td>
<td>04-2103591</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 (a)</td>
<td>PARTNERS IN CARE INC</td>
<td>93-0756143</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 (a)</td>
<td>PARTNERS IN EDUCATION FOUNDATION FOR THE SA</td>
<td>85-0392417</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 (a)</td>
<td>PARTNERS IN EVANGELISM INC</td>
<td>31-1768378</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 (a)</td>
<td>PARTNERS IN FOOD SOLUTIONS</td>
<td>27-5097190</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8 (a)</td>
<td>PARTNERS IN HEALTH A NONPROFIT CORPORATION</td>
<td>04-3567502</td>
<td>501 (C) 3</td>
<td>2,494,766.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 (a)</td>
<td>PARTNERS IN SHARING ASSOCIATES</td>
<td>23-3074780</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 (a)</td>
<td>PARTNERS INTERNATIONAL</td>
<td>94-1393427</td>
<td>501 (C) 3</td>
<td>55,580.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11 (a)</td>
<td>PARTNERS PROGRAM</td>
<td>20-2973102</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 (a)</td>
<td>PARTNERS WORLDWIDE</td>
<td>38-3293173</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) PARTNERSHIP FOR CLEAN WATER AND EDUCATION 107 ROYAL ST SW B LEESBURG, VA 20175</td>
<td>82-1548482</td>
<td>501 (C) 3</td>
<td>102,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) PARTNERSHIP FOR PUBLIC SERVICE INC 1100 NEW YORK AVE NW STE 200E WASHINGTON, DC 20036</td>
<td>06-1540513</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) PARTNERSHIP FOR RESPONSIBLE GROWTH INC 6223 KENNEDY DR CHEVY CHASE, MD 20815</td>
<td>46-5391345</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) PARTNERSHIP FOR THE ADVANCEMENT OF NEW AMER 4089 FAIRMOUNT AVE SAN DIEGO, CA 92105</td>
<td>47-5299457</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) PARTNERSHIP FOR THE HOMELESS 305 7TH AVE 13TH FLOOR NEW YORK, NY 10001</td>
<td>13-3732698</td>
<td>501 (C) 3</td>
<td>48,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) PARTNERSHIP PROJECT INC PO BOX 65826 WASHINGTON, DC 20035</td>
<td>52-2192070</td>
<td>501 (C) 3</td>
<td>5,125,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(7) PARTNERSHIP SCHOOLS 1011 1ST AVE # 1856 NEW YORK, NY 10022</td>
<td>13-3976873</td>
<td>501 (C) 3</td>
<td>267,000.</td>
<td>FMV</td>
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<tr>
<td>(8) PARTNERSHIP WITH NATIVE AMERICANS 16415 ADDISON RD STE 200 ADDISON, TX 75001</td>
<td>47-3730147</td>
<td>501 (C) 3</td>
<td>115,450.</td>
<td>FMV</td>
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<tr>
<td>(9) PASADENA COMMUNITY FOUNDATION 301 E COLORADO BLVD STE 810 PASADENA, CA 91101</td>
<td>20-0253310</td>
<td>501 (C) 3</td>
<td>20,300.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) PASADENA COVENANT CHURCH PASADENA CA 539 N LAKE AVE PASADENA, CA 91101</td>
<td>95-1691774</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) PASADENA EDUCATIONAL FOUNDATION 351 S HUDSON AVE ROOM 153 PASADENA, CA 9110</td>
<td>23-7149451</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) PASADENA HISTORICAL SOCIETY INC 470 W WALNUT ST PASADENA, CA 91103</td>
<td>95-6133954</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>7 (g) Description of non-cash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> PASADENA HOSPITAL ASSOCIATION LTD</td>
<td>95-1644036</td>
<td>501 (C) 3</td>
<td>290,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>100 W CALIFORNIA BLVD PASADENA, CA 91105</td>
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<tr>
<td><strong>2</strong> PASADENA HUMANE SOCIETY</td>
<td>95-1643344</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>361 S RAYMOND AVE PASADENA, CA 91105</td>
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<tr>
<td><strong>3</strong> PASADOS SAFE HAVEN</td>
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<td>14,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 171 SULTAN, WA 98294</td>
<td></td>
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<tr>
<td><strong>4</strong> PASSAGES WOMENS TRANSITIONAL LIVING INC</td>
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<tr>
<td>PO BOX 9614 RAPID CITY, SD 57709</td>
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<td><strong>5</strong> PASSION COMMUNITY CHURCH OF CINCINNATI INC</td>
<td>47-3702592</td>
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<tr>
<td>5699 CREEK RD BLUE ASH, OH 45242</td>
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<td><strong>6</strong> PASSIONIST NUNS MONASTERY</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15700 CLAYTON ROAD ELLISVILLE, MO 63011</td>
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<tr>
<td><strong>7</strong> PASTOR OF DIVINE SAVIOR PARISH - ORANGEVALE</td>
<td>45-3954550</td>
<td>501 (C) 3</td>
<td>9,100.</td>
<td>FMV</td>
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<tr>
<td>9079 GREENBACK LN ORANGEVALE, CA 95662</td>
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<tr>
<td><strong>8</strong> PASTOR OF OUR MOTHER OF CONFIDENCE CATHOLIC</td>
<td>27-3859098</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 85728 SAN DIEGO, CA 92186</td>
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<tr>
<td><strong>9</strong> PASTOR OF ST JOHN THE EVANGELIST CATHOLIC P</td>
<td>27-3974051</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 85728 SAN DIEGO, CA 92186</td>
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<tr>
<td><strong>10</strong> PASTOR OF ST THERESA PARISH - SOUTH LAKE TAH</td>
<td>45-3954503</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1041 LYNES AVE SOUTH LAKE TAHOE, CA 96150</td>
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<tr>
<td><strong>11</strong> PASTORAL CARE SCHOOL</td>
<td>26-0604887</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2360 MCLAUGHLIN AVE SAN JOSE, CA 95122</td>
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<td><strong>12</strong> PAT TILLMAN FOUNDATION</td>
<td>20-1072336</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>222 MERCHANDISE MART PLZ STE 1212 CHICAGO, IL</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATACHOU FOUNDATION INC 4923 N COLLEGE AVE STE 25 INDIANAPOLIS, IN 46-2741705 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>23-2888152</td>
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<tr>
<td>PATH 2201 WESTLAKE AVE STE 200 SEATTLE, WA 98121 91-1157127 501 (C) 3 158,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PATH FOUNDATION INC 1601 W PEACHTREE ST NE ATLANTA, GA 30309 58-1949696 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PATH MINISTRIES INTERNATIONAL 20481 SE BYRON AVE BEND, OR 97702 93-1202044 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PATH NIRVANA FOUNDATION S 964 SAN SIMEON DR CONCORD, CA 94518 47-5272894 501 (C) 3 26,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PATH OF GRACE UNITED METHODIST CHURCH 759 COUNTY ROAD E SAINT PAUL, MN 55117 41-1298275 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PATH WITH ART 312 2ND AVE S SEATTLE, WA 98104 26-0599518 501 (C) 3 133,833. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PATHFINDER INTERNATIONAL 9 GALEN ST WATERTOWN, MA 2472 53-0235320 501 (C) 3 118,816. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PATHFINDER LUTHERAN CHURCH 15800 MANCHESTER RD ELLISVILLE, MO 63011 43-0731521 501 (C) 3 25,991. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PATHFINDERS CHILDRENS MINISTRY PO BOX 19535 RENO, NV 89511 30-0431407 501 (C) 3 13,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PATHFINDERS MILWAUKEE INC 4200 N HOLTON ST STE 400 MILWAUKEE, WI 5321 39-1185304 501 (C) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PATHLIGHT INTERNATIONAL INC 3537 HOPFARD RD STE T PLEASANTON, CA 94588 27-0583447 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1 PATHNORTH INC</td>
<td>26-1126743</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 PATHWAY COMMUNITY CHURCH</td>
<td>35-2154774</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 PATHWAYS &amp; YOUTH</td>
<td>61-1857500</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 PATHWAYS FOR CHILDREN INC</td>
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<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 PATHWAYS HOME HEALTH AND HOSPIICE</td>
<td>94-2823240</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6 PATHWAYS INC</td>
<td>06-1051588</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7 PATIENT ACCESS NETWORK FOUNDATION</td>
<td>20-1184743</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 PATIENT AILIFTS SERVICES</td>
<td>27-2370028</td>
<td>501 (C) 3</td>
<td>27,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 PATRICK HENRY COLLEGE</td>
<td>54-1919810</td>
<td>501 (C) 3</td>
<td>47,000</td>
<td>FMV</td>
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<td>10 PATRONS OF THE CENTRE INC</td>
<td>20-5573558</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>11 PAUL TAYLOR DANCE FOUNDATION INC</td>
<td>13-2665475</td>
<td>501 (C) 3</td>
<td>21,750</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 PAUL MURRAY CENTER FOR HISTORY AND SOCIAL</td>
<td>45-4926223</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
</tr>
<tr>
<td>(1)</td>
<td>PAULS PLACE INC</td>
<td>52-1372359</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>(2)</td>
<td>PAUSE MINISTRIES INC</td>
<td>45-1144576</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3)</td>
<td>PAWS ASSISTING WOUNDED WARRIORS INC</td>
<td>45-4852603</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(4)</td>
<td>PAWS ATLANTA INCORPORATED</td>
<td>58-6074088</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>(5)</td>
<td>PAWS CHICAGO</td>
<td>36-4219778</td>
<td>501 (C) 3</td>
<td>98,025.</td>
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<td>(6)</td>
<td>PAWS OF WAR INC</td>
<td>46-5113396</td>
<td>501 (C) 3</td>
<td>44,500.</td>
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<td>N/A</td>
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<td>(7)</td>
<td>PAWS4PEOPLE INC</td>
<td>54-1948479</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(8)</td>
<td>PAX CHRISTI CATHOLIC COMMUNITY</td>
<td>41-1223312</td>
<td>501 (C) 3</td>
<td>13,900.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(9)</td>
<td>PAYBACK INC</td>
<td>43-1462252</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(10)</td>
<td>PBSFoods INC</td>
<td>46-0893794</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PBS FOUNDATION</td>
<td>20-1476451</td>
<td>501 (C) 3</td>
<td>257,001.</td>
<td>FMV</td>
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<td>(12)</td>
<td>PCA MISSION TO NORTH AMERICA</td>
<td>66-0541857</td>
<td>501 (C) 3</td>
<td>18,600.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Schedule I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCA REFORMED UNIVERSITY MINISTRIES 1700 N BROWN RD STE 104 LAWRENCEVILLE, GA 3</td>
<td>58-1713181</td>
<td>501 (c) 3</td>
<td>174,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 2206 SEATTLE, WA 98111</td>
<td>91-2021165</td>
<td>501 (c) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>777 UNITED NATIONS PLE NEW YORK, NY 10017</td>
<td>13-3280193</td>
<td>501 (c) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2817 ASHLAND RD COLUMBIA, SC 29210</td>
<td>37-1566967</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 10946 FAYETTEVILLE, AR 72703</td>
<td>71-0552563</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>101 W BROAD ST GREENVILLE, SC 29601</td>
<td>57-0811297</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<tr>
<td>6600 C AVE NE CEDAR RAPIDS, IA 52402</td>
<td>23-7410104</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 60958 FORT MYERS, FL 33906</td>
<td>56-2337376</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>25 KINGSTON ST FL 6 BOSTON, MA 2111</td>
<td>04-3323467</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 682141 PARK CITY, UT 84068</td>
<td>87-0500067</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15840 MCGREGOR BLVD FORT MYERS, IN 46737</td>
<td>65-0941158</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>355 E STATE ROAD 120 FREMONT, FL 33908</td>
<td>35-1584089</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - **Yes**
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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1 PEACE LUTHERAN CHURCH</td>
<td>1000 RED RIVER AVE N COLD SPRING, MN 56320</td>
<td>41-1763832</td>
<td>501 (C) 3</td>
<td>7,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 PEACE LUTHERAN CHURCH OF NEW LENOX</td>
<td>1900 E LINCOLN HWY NEW LENOX, IL 60451</td>
<td>36-3641018</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 PEACE NEIGHBORHOOD CENTER</td>
<td>1111 N MAPLE RD ANN ARBOR, MI 48103</td>
<td>23-7437867</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 PEACE POWER AND PURPOSE MINISTRY INC</td>
<td>1535 TOWNE PARK LN FRANKLIN, TN 37067</td>
<td>47-5164759</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 PEACEFUL VALLEY DONKEY RESCUE INC</td>
<td>PO BOX 216 MILES, TX 76861</td>
<td>77-0562800</td>
<td>501 (C) 3</td>
<td>10,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 PEACEFUL WATERS MINISTRIES INC</td>
<td>C/O F STADELMAN 205 OHIO AVE SE BANDON, OR</td>
<td>93-1253573</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 PEACEHEALTH SOUTHWEST MEDICAL CENTER FOUNDATION</td>
<td>PO BOX 1600 VANCOUVER, WA 98668</td>
<td>91-1231436</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8 PEACEMAKER RESOURCES</td>
<td>1826 MIKRANTIP RD BEHMID, MN 56601</td>
<td>45-0507287</td>
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<tr>
<td>9 PEACEMARKS NETWORK FOUNDATION</td>
<td>1372 BROADWAY FNT 3 NEW YORK, NY 10018</td>
<td>30-0102398</td>
<td>501 (C) 3</td>
<td>1,195,250.</td>
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<td>10 PEACHTREE PRESBYTERIAN CHURCH</td>
<td>3434 ROSWELL RD NW ATLANTA, GA 30305</td>
<td>58-0566210</td>
<td>501 (C) 3</td>
<td>45,000.</td>
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<td>11 PEACHTREE ROAD UNITED METHODIST CHURCH</td>
<td>3180 PEACHTREE RD NE ATLANTA, GA 30305</td>
<td>58-0655363</td>
<td>501 (C) 3</td>
<td>111,700.</td>
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<td>12 PEACHTREE ROAD PRESBYTERIAN CHURCH</td>
<td>750 S PEACHTREE RD RIDGEランド, MS 39157</td>
<td>64-0605307</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..................................................

3. Enter total number of other organizations listed in the line 1 table .........................................................................................
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   
   [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. PEARL S. BUCK INTERNATIONAL, INC.</td>
<td>23-1637212</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>2. PEARS FOR TEEN GIRLS INC</td>
<td>39-1997970</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>3. PECK SCHOOL</td>
<td>22-1487293</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. PECONIC LAND TRUST INCORPORATED</td>
<td>11-2667021</td>
<td>501 (C) 3</td>
<td>36,800.</td>
<td>FMV</td>
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<tr>
<td>5. PEDDIE SCHOOL</td>
<td>21-063492</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. PEDIATRIC BRAIN TUMOR FOUNDATION OF THE UNI</td>
<td>58-1966822</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. PEDIATRIC CANCER FOUNDATION</td>
<td>23-7161550</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>8. PEDIATRIC CANCER RESEARCH FOUNDATION</td>
<td>85-3772528</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9. PEDIATRIC ORTHOPAEDIC SOCIETY OF NORTH AMER</td>
<td>54-1123281</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10. PEDIATRIC SPINE FOUNDATION</td>
<td>20-3169071</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. PEK DEE LAND TRUST</td>
<td>57-1075947</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. PEER HEALTH EXCHANGE INC</td>
<td>56-2374305</td>
<td>501 (C) 3</td>
<td>137,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
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(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I
**General Information on Grants and Assistance**

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   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEGASUS LEGAL SERVICES FOR CHILDREN</td>
<td>505 MARQUETTE AVE NW STE 1350 ALBUQUERQUE,</td>
<td>46-0509986</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEGASUS PROJECT FOUNDATION</td>
<td>5808A SUMMITVIEW AVE # 324 YAKIMA, WA 98908</td>
<td>87-0700052</td>
<td>501 (C) 3</td>
<td>23,945.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEGGY ADAMS ANIMAL RESCUE LEAGUE OF THE PALS</td>
<td>3200 N MILITARY TRL WEST PALM BEACH, FL 334</td>
<td>59-0637811</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PEKIN GRACE UNITED METHODIST CHURCH</td>
<td>503 N 4TH ST PEKIN, IL 61554</td>
<td>37-0795743</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEKIN MEMORIAL HOSPITAL FOUNDATION</td>
<td>600 S 13TH ST PEKIN, IL 61554</td>
<td>37-1200267</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PELOTONIA</td>
<td>450 W BROAD ST COLUMBUS, OH 43215</td>
<td>82-4997087</td>
<td>501 (C) 3</td>
<td>12,750.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>FEMA CHODRON FOUNDATION</td>
<td>1812 HUNTERS CT STEAMBOAT SPRINGS, CO 80487</td>
<td>20-5958865</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEMBROKE WILL SCHOOL</td>
<td>400 W 51ST ST KANSAS CITY, MO 64112</td>
<td>43-1326059</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEN AMERICAN CENTER INC</td>
<td>584 BROADWAY RM 303 NEW YORK, NY 10012</td>
<td>13-3447888</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEN BAY WALDO HEALTHCARE FOUNDATION</td>
<td>PO BOX 287 BELFAST, ME 4915</td>
<td>22-2482325</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEN FAULKNER</td>
<td>6218 GEORGIA AVENUE NW UNIT 1062 WASHINGTON</td>
<td>52-1431622</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PENCIL FOUNDATION</td>
<td>7199 COCKRILL BEND BLVD NASHVILLE, TN 37209</td>
<td>58-1475675</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
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18674H 1467 V 20-7.21
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>X</td>
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</tbody>
</table>

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) PENCILS OF PROMISE INCORPORATED</td>
<td>26-3618722</td>
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<tr>
<td>37 W 28TH ST FL 3 NEW YORK, NY 10001</td>
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<td>(2) PENDEL HILL SCHOOL</td>
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<tr>
<td>338 PLUSH MILL RD WALLINGFORD, PA 19086</td>
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<tr>
<td>(3) PENFIELD PRESBYTERIAN CHURCH</td>
<td>16-0913765</td>
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<td>FMV</td>
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<tr>
<td>1881 JACKSON RD PENFIELD, NY 14526</td>
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<tr>
<td>(4) PENINSULA BAPTIST CHURCH</td>
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<tr>
<td>687 BRAWLEY SCHOOL ROAD MOORESVILLE, NC 281</td>
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<td>(5) PENINSULA BRIDGE PROGRAM</td>
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<tr>
<td>177 BOVET RD SAN MATEO, CA 94402</td>
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<td>(6) PENINSULA COMMUNITY CHURCH</td>
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<tr>
<td>5640 CRESTRIDGE RD RANCHO PALOS VERDES, CA</td>
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<td>(7) PENINSULA COVENANT CHURCH REDWOOD CITY CA</td>
<td>94-1447220</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3560 FARM HILL BLVD REDWOOD CITY, CA 94061</td>
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<td>(8) PENINSULA FAMILY SERVICE</td>
<td>94-1186169</td>
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<td>252,500.</td>
<td>FMV</td>
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<tr>
<td>14 2ND AVE SAN MATEO, CA 94401</td>
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<td>(9) PENINSULA FRIENDS OF ANIMALS</td>
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<tr>
<td>PO BOX 404 SEQUIM, WA 98382</td>
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<td>(10) PENINSULA FRIENDS OF THE LIBRARY</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>701 SILVER SPUR RD ROLLING HILLS ESTATES, C</td>
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<tr>
<td>(11) PENINSULA HUMANE SOCIETY &amp; SPCA</td>
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<td>10,600.</td>
<td>FMV</td>
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<tr>
<td>1450 ROLLINS RD BURLINGAME, CA 94010</td>
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<td>(12) PENINSULA OPEN SPACE TRUST</td>
<td>94-2392007</td>
<td>501 (C) 3</td>
<td>274,609.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>222 HIGH ST PALO ALTO, CA 94301</td>
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<td></td>
<td></td>
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<td></td>
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</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
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</table>

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>PENINSULA SCHOOL LTD</td>
<td>94-1186181</td>
<td>501 (C) 3</td>
<td>8,400.</td>
<td>FMV</td>
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<tr>
<td>PENINSULA TEMPLE BETH EL</td>
<td>94-1399290</td>
<td>501 (C) 3</td>
<td>16,600.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PENINSULA VOLUNTEERS INC</td>
<td>94-1294939</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PENLAND SCHOOL OF CRAFT</td>
<td>56-0623948</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PENNINGTON PARK CHURCH INC</td>
<td>83-1741254</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PENNINGTON SCHOOL</td>
<td>21-0635004</td>
<td>501 (C) 3</td>
<td>62,600.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PENNSYLVANIA 30 DAY FUND INC</td>
<td>85-0869736</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PENNSYLVANIA ACADEMY OF THE FINE ARTS</td>
<td>23-1352256</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PENNSYLVANIA ASSOCIATION FOR THE EDUCATION</td>
<td>25-1756038</td>
<td>501 (C) 3</td>
<td>71,012.</td>
<td>FMV</td>
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<td>PENNSYLVANIA BALLET ASSOCIATION</td>
<td>23-1629970</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PENNSYLVANIA CENTER FOR EMPLOYEE OWNERSHIP</td>
<td>81-1200869</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>PENNSYLVANIA CHILD CARE ASSOCIATION</td>
<td>25-1324912</td>
<td>501 (C) 3</td>
<td>30,660.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PENNSYLVANIA FAMILY INSTITUTE 23 N FRONT ST HARRISBURG, PA 17101</td>
<td>23-2569197</td>
<td>501 (c) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PENNSYLVANIA HORTICULTURAL SOCIETY 100 N 20TH ST 5TH FLR PHILADELPHIA, PA 1910</td>
<td>23-1352265</td>
<td>501 (c) 3</td>
<td>395,200</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>PENNSYLVANIA HOSPITAL OF THE UNIV OF PENNSY 1500 MARKET ST 8TH FLOOR PHILADELPHIA, PA 1</td>
<td>31-1538725</td>
<td>501 (c) 3</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>PENNSYLVANIA INNOCENCE PROJECT 1515 MARKET ST STE 300 PHILADELPHIA, PA 191</td>
<td>26-3176893</td>
<td>501 (c) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PENNSYLVANIA PARTNERSHIPS FOR CHILDREN 200 N THIRO STREET 13TH FLOOR HARRISBURG, P</td>
<td>23-2613869</td>
<td>501 (c) 3</td>
<td>117,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>PENNSYLVANIA SOCIETY FOR THE PREVENTION OF CRIME 350 E ERIE AVE PHILADELPHIA, PA 19134</td>
<td>23-1352269</td>
<td>501 (c) 3</td>
<td>11,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>PENNSYLVANIA STATE UNIVERSITY 130 BRISTOL UNIVERSITY PARK, PA 16802</td>
<td>24-6000376</td>
<td>501 (c) 3</td>
<td>1,384,695</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>PENNSYLVANIA STATE UNIVERSITY PHIANTHROPIC 408 OLD MAIN UNIVERSITY PARK, PA 16802</td>
<td>27-4628784</td>
<td>501 (c) 3</td>
<td>88,000</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>PENNSYLVANIA TROLLEY MUSEUM INC 1 MUSEUM RD WASHINGTON, PA 15301</td>
<td>25-6606314</td>
<td>501 (c) 3</td>
<td>215,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PENNSYLVANIA WOUNDED WARRIORS INC 1117 COUNTRY CLUB RD CAMP HILL, PA 17011</td>
<td>74-3225326</td>
<td>501 (c) 3</td>
<td>10,430</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PENUMBRA THEATRE COMPANY INC 270 KENT ST SAINT PAUL, MN 55102</td>
<td>41-1563764</td>
<td>501 (c) 3</td>
<td>102,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PEOPLE FOR ANIMALS INC PO BOX 991 FRANKLIN, TN 37065</td>
<td>62-1304791</td>
<td>501 (c) 3</td>
<td>140,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| PEOPLE FOR PROGRESS IN INDIA  
PO BOX 51231 SEATTLE, WA 98115 | 91-1057315 | 501 (C) 3 | 9,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE FOR THE AMERICAN WAY FOUNDATION  
1101 15TH ST NW STE 600 WASHINGTON, DC 2000 | 13-3065716 | 501 (C) 3 | 59,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE FOR THE ETHICAL TREATMENT OF ANIMALS  
501 FRONT ST NORFOLK, VA 23510 | 52-1218336 | 501 (C) 3 | 138,760. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE HELPING PEOPLE INC  
306 MINE RD BARABOO, WI 53913 | 26-1379745 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE INCORPORATED  
2060 CENTRE POINTE BLVD STE 3 SAINT PAUL, MN | 41-0962296 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE LOVING PEOPLE INCORPORATED  
22 THE BOULEVARD BAYVILLE, NY 11709 | 83-4583281 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE OF PRAISE INC  
107 S GREENLAWN AVE SOUTH BEND, IN 46617 | 23-7036494 | 501 (C) 3 | 9,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE REACHING OUT TO OTHER PEOPLE INC PRO  
14700 MARTIN DR EDEN PRAIRIE, MN 55344 | 41-1430172 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE RESPONSING IN SOCIAL MINISTRY  
1220 ZANE AVE N MINNEAPOLIS, MN 55422 | 41-1442049 | 501 (C) 3 | 28,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE SERVING PEOPLE INC CHARITIES  
614 S 3RD ST MINNEAPOLIS, MN 55415 | 41-1965067 | 501 (C) 3 | 20,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLE TO PEOPLE MINISTRIES INC  
454 E BOWMAN ST WOOTER, OH 44691 | 34-1264151 | 501 (C) 3 | 26,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| PEOPLES CHURCH OF KALAMAZOO MICHIGAN  
1798 N 10TH ST KALAMAZOO, MI 49009 | 38-1803467 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .

3. Enter total number of other organizations listed in the line 1 table .

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>PEOPLES CITY MISSION 110 Q ST LINCOLN, NE 68508</td>
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<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PEOPLES COMMUNITY CLINIC INC</td>
<td>47-0376896</td>
<td>501 (C) 3</td>
<td>55,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>PEOPLES EMERGENCY CENTER</td>
<td>23-7087608</td>
<td>501 (C) 3</td>
<td>267,903</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PEOPLES HEALTH CLINIC INC</td>
<td>87-0638042</td>
<td>501 (C) 3</td>
<td>66,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PEOPLES LIGHT &amp; THEATRE CO</td>
<td>23-7313407</td>
<td>501 (C) 3</td>
<td>44,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PEOPLES RESOURCE CENTER</td>
<td>36-3157600</td>
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<td>29,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>PEOPLES SELF-HELP HOUSING INC</td>
<td>307 KY 59 VANCEBURG, KY 41179</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8</td>
<td>PEORIA AREA COMMUNITY FOUNDATION</td>
<td>3625 N SHERIDAN RD PEORIA, IL 61604</td>
<td>501 (C) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9</td>
<td>PEORIA INNOVATION HUB NFP</td>
<td>800 NE GLEN OAK AVE PEORIA, IL 61603</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PEORIA RESCUE MINISTRIES</td>
<td>PO BOX 837 PEORIA, IL 61652</td>
<td>501 (C) 3</td>
<td>13,900</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>11</td>
<td>PEPPERDINE UNIVERSITY</td>
<td>24255 PACIFIC COAST HWY MALIBU, CA 90263</td>
<td>501 (C) 3</td>
<td>47,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>12</td>
<td>PEQUOT LIBRARY ASSOCIATION</td>
<td>720 PEQUOT AVE SOUTHPORT, CT 6890</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEQUOT YACHT CLUB FOUNDATION INC</td>
<td>669 HARBOR RD SOUTHPORT, CT 6890</td>
<td>84-3653865</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PER SCHOLAS INC</td>
<td>804 E 138TH ST FBNR 2 BRONX, NY 10454</td>
<td>04-3252955</td>
<td>501 (C) 3</td>
<td>255,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERALTA COLLEGES FOUNDATION</td>
<td>333 E 8TH ST OAKLAND, CA 94606</td>
<td>32-7091547</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PEREGRINE FUND INC</td>
<td>5668 W FLYING HAWK LN BOISE, ID 83709</td>
<td>23-1969973</td>
<td>501 (C) 3</td>
<td>55,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PERFORMANCE ZONE INC</td>
<td>75 MAIDEN LN NEW YORK, NY 10038</td>
<td>13-3357408</td>
<td>501 (C) 3</td>
<td>260,395</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERFORMING ANIMAL WELFARE SOCIETY</td>
<td>PO BOX 849 GALT, CA 95632</td>
<td>94-3005157</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERIMETER CHURCH</td>
<td>9500 MEDLOCK BRIDGE RD DULUTH, GA 30097</td>
<td>58-1348544</td>
<td>501 (C) 3</td>
<td>55,418</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERKINS COUNTY SCHOOLS FOUNDATION</td>
<td>740 SHERMAN AVE GRANT, NE 69140</td>
<td>36-3822902</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERKINS SCHOOL FOR THE BLIND</td>
<td>175 NORTH BEACON ST WATERTOWN, MA 2472</td>
<td>04-2103616</td>
<td>501 (C) 3</td>
<td>99,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PERMANENT ENDOWMENT FOR MARTHAS VINEYARD IN</td>
<td>4C COURNOYER RD WEST TISBURY, MA 2575</td>
<td>84-2084322</td>
<td>501 (C) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PERQUIMANS COUNTY RESCUE SQUAD</td>
<td>PO BOX 191 HERTFORD, NC 27944</td>
<td>38-3833424</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERROT MEMORIAL LIBRARY ASSOCIATION OF OLD</td>
<td>90 SOUTH BEACH AVE OLD GREENWICH, CT 6870</td>
<td>06-1012967</td>
<td>501 (C) 3</td>
<td>8,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

ไปที่ www.irs.gov/Form990 สำหรับข้อมูลล่าสุด.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSIST NASHVILLE INC</td>
<td>1300 56TH AVE N NASHVILLE, TN 37209 84-2348884</td>
</tr>
<tr>
<td>PERSON COUNTY EDUCATION FOUNDATION INC</td>
<td>PO BOX 845 ROXBORO, NC 27573 46-0907678</td>
</tr>
<tr>
<td>PERSON TO PERSON INC</td>
<td>1864 POST RD DARIEN, CT 6820 06-1422248</td>
</tr>
<tr>
<td>PERSPECTIVES CHARTER SCHOOL</td>
<td>1530 S STATE ST FL 2 CHICAGO, IL 60605 36-4167576</td>
</tr>
<tr>
<td>PERTH AMBOY CATHOLIC SCHOOL CENTRAL OFFICE</td>
<td>PO BOX 651 PERTH AMBOY, NJ 8862 22-2805024</td>
</tr>
<tr>
<td>PERUVIAN AMERICAN MEDICAL SOCIETY ENDOWMENT</td>
<td>3009 TOREADOR DR NE ALBUQUERQUE, NM 87111 38-2824781</td>
</tr>
<tr>
<td>PERUVIAN PARTNERS</td>
<td>PO BOX 735 DELAND, MN 55328 27-3133129</td>
</tr>
<tr>
<td>PESTALOZZI U S CHILDRENS CHARITY INC</td>
<td>6 E 79TH ST APT 2 NEW YORK, NY 10075 04-3407363</td>
</tr>
<tr>
<td>PESTICIDE ACTION NETWORK NORTH AMERICA REGI</td>
<td>2029 UNIVERSITY AVE STE 200 BERKELEY, CA 94 94-2949868</td>
</tr>
<tr>
<td>PET FOOD PANTRY FOR TELLER COUNTY</td>
<td>PO BOX 645 WOODLAND PARK, CO 80866 26-4203884</td>
</tr>
<tr>
<td>PET MINNESOTA INC</td>
<td>995 CHATSWORTH PL SAINT PAUL, MN 55126 45-3053887</td>
</tr>
<tr>
<td>PETCO FOUNDATION</td>
<td>654 RICHLAND HILLS DR SAN ANTONIO, TX 78245 33-0845930</td>
</tr>
</tbody>
</table>

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>PERSIST NASHVILLE INC</td>
<td>84-2348884</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERSON COUNTY EDUCATION FOUNDATION INC</td>
<td>46-0907678</td>
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<td>PERSPECTIVES CHARTER SCHOOL</td>
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<td>FMV</td>
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<td>PERTH AMBOY CATHOLIC SCHOOL CENTRAL OFFICE</td>
<td>22-2805024</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PERUVIAN AMERICAN MEDICAL SOCIETY ENDOWMENT</td>
<td>38-2824781</td>
<td>501 (C) 3</td>
<td>34,750.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PERUVIAN PARTNERS</td>
<td>27-3133129</td>
<td>501 (C) 3</td>
<td>48,000.</td>
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<td>PESTALOZZI U S CHILDRENS CHARITY INC</td>
<td>04-3407363</td>
<td>501 (C) 3</td>
<td>28,500.</td>
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<td>PESTICIDE ACTION NETWORK NORTH AMERICA REGI</td>
<td>94-2949868</td>
<td>501 (C) 3</td>
<td>160,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PET FOOD PANTRY FOR TELLER COUNTY</td>
<td>26-4203884</td>
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<td>6,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PET MINNESOTA INC</td>
<td>45-3053887</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PETCO FOUNDATION</td>
<td>33-0845930</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 
   - [X] 11

3. Enter total number of other organizations listed in the line 1 table: 
   - [X] 11

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - [ ] Yes
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PETER G PETERSON INSTITUTE FOR INTERNATIONAL</td>
<td>1750 MASSACHUSETTS AVE NW WASHINGTON, DC 20</td>
<td>52-1226967</td>
<td>501 (C) 3</td>
<td>125,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PETER MICHAEL FOUNDATION</td>
<td>12400 IDA CLAYTON RD CALISTOGA, CA 94515</td>
<td>94-3238961</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>PETER WESTBROOK FOUNDATION INC</td>
<td>GPO 7554 NEW YORK, NY 10116</td>
<td>13-3412917</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>PETERS PLACE</td>
<td>336 KING OF PRUSSIA RD RADNOR, PA 19087</td>
<td>23-3062819</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PETERSEN AUTOMOTIVE MUSEUM FOUNDATION</td>
<td>6060 WILSHIRE BLVD LOS ANGELES, CA 90036</td>
<td>95-4739699</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>PETERSON REGIONAL MEDICAL CENTER FOUNDATION</td>
<td>551 HILL COUNTRY DR KERRVILLE, TX 78028</td>
<td>74-2645149</td>
<td>501 (C) 3</td>
<td>202,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>PETOSKEY-HARBOR SPRINGS AREA COMMUNITY FOUNDATION</td>
<td>616 PETOSKEY ST STE 203 PETOSKEY, MI 49770</td>
<td>38-3032185</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>PETROS NETWORK</td>
<td>6600 SW 92ND AVE STE 140 PORTLAND, OR 97223</td>
<td>45-4131862</td>
<td>501 (C) 3</td>
<td>7,225.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>PETS IN NEED</td>
<td>871 FIFTH AVE REDWOOD CITY, CA 94063</td>
<td>94-6139667</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PETSMART CHARITIES INC</td>
<td>19601 N 27TH AVE PHOENIX, AZ 85027</td>
<td>93-1140967</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PEM CHARITABLE TRUSTS</td>
<td>901 E ST NW WASHINGTON, DC 20004</td>
<td>56-2307147</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PEMABIC SOCIETY INC</td>
<td>10125 E JEFFERSON AVE DETROIT, MI 48214</td>
<td>38-2277840</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➡️ Attach to Form 990.
➡️ Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEYLIM LEV LACHIM 1034 E 12TH ST BROOKLYN, NY 11230 13-5643666 501 (C) 3 13,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PFLAG INC 1625 K ST NW WASHINGTON, DC 20006 95-3750694 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PHEASANTS FOREVER INC 1783 BURRLE CIR SAINT PAUL, MN 55110 41-1429149 501 (C) 3 27,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHELPS MEMORIAL HOSPITAL ASSOCIATION 972 BRUSH HOLLOW RD WESTBURY, NY 11590 13-1725076 501 (C) 3 9,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHENOMENOLOGY INC 17711 PELITE WAY HAGERSTOWN, MD 21740 82-5105014 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHI BETA KAPPA SOCIETY 1606 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20 53-0226282 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHI DELTA THETA FOUNDATION 2 S CAMPUS AVE OXFORD, OH 45056 34-6539803 501 (C) 3 18,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHI GAMMA DELTA EDUCATIONAL FOUNDATION 1201 RED MILE RD LEXINGTON, KY 40504 52-6036185 501 (C) 3 8,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHIL HARDEMBERG PARK CONSERVANCY 102 VOELCKER LANE 4 SAN ANTONIO, TX 78248 26-3416476 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILABUNDANCE 3616 S GALLOWAY ST PHILADELPHIA, PA 19148 23-2290505 501 (C) 3 875,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA ACADEMY OF SCHOOL LEADERS 230 S BROAD ST FL 17 PHILADELPHIA, PA 19102 82-5484855 501 (C) 3 150,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHILADELPHIA ANIMAL WELFARE SOCIETY 100 N 2ND ST PHILADELPHIA, PA 19106 26-3862631 501 (C) 3 22,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table..............................................................

3. Enter total number of other organizations listed in the line 1 table.............................................................................................................

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

Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No ☒

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHILADELPHIA AREA CENTER FOR HISTORY OF SCI 431 CHESTNUT ST PHILADELPHIA, PA 19106 80-0218828 501 (C) 3 26,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA AREA JOBS WITH JUSTICE 1515 W GIRARD AVE UNIT 1F PHILADELPHIA, PA 23-306952 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHILADELPHIA Area Bail Fund 2210 CHRISTIAN ST PHILADELPHIA, PA 19146 82-1365589 501 (C) 3 28,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA CHAMBER MUSIC SOCIETY 1528 WALNUT ST STE 301 PHILADELPHIA, PA 191 22-2736249 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE 4190 CITY AVE PHILADELPHIA, PA 19131 22-2691757 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA FOUNDATION 1835 MARKET ST STE 2410 PHILADELPHIA, PA 19131 23-1581832 501 (C) 3 178,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA FUTURES 123 SOUTH BROAD ST SUITE #55 PHILADELPHIA, PA 23-1365983 501 (C) 3 166,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHILADELPHIA INDEPENDENT MISSION SCHOOLS 120 S WARNER RD STE 200 KING OF PRUSSIA, PA 45-4720688 501 (C) 3 224,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHILADELPHIA KIDS IN CARE 100 FRONT ST CONSOSHICKEN, PA 19428 46-5264093 501 (C) 3 4,000,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>PHILADELPHIA MUSEUM OF ART PO BOX 7646 PHILADELPHIA, PA 19101 23-1365388 501 (C) 3 184,625. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA ORCHESTRA ASSOCIATION 1 S BROAD ST FL 14 PHILADELPHIA, PA 19107 23-1352289 501 (C) 3 220,925. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA OUTWARD BOUND CENTER 3401 RESERVOIR DR PHILADELPHIA, PA 19121 56-2472884 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ___________________________

3. Enter total number of other organizations listed in the line 1 table ___________________________

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. PHILADELPHIA PARKS ALLIANCE</td>
<td>23-2250610</td>
<td>501 (C)</td>
<td>81,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. PHILADELPHIA PHOTO ARTS CENTER</td>
<td>26-3413554</td>
<td>501 (C)</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. PHILADELPHIA SCHOOL</td>
<td>22-7091186</td>
<td>501 (C)</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. PHILADELPHIA SCHOOLS PROJECT</td>
<td>27-3097212</td>
<td>501 (C)</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. PHILADELPHIA THEATRE COMPANY</td>
<td>23-1951753</td>
<td>501 (C)</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6. PHILADELPHIA VIP INC</td>
<td>23-2210390</td>
<td>501 (C)</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>21-0643023</td>
<td>501 (C)</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>8. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1390631</td>
<td>501 (C)</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1365160</td>
<td>501 (C)</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1360856</td>
<td>501 (C)</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1352146</td>
<td>501 (C)</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12. PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>30-0923414</td>
<td>501 (C)</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1352643</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-6287102</td>
<td>501 (C) 3</td>
<td>58,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA YEARLY MEETING OF FRIENDS</td>
<td>23-1370503</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PHILADELPHIA YOUTH BASKETBALL INC</td>
<td>47-3758442</td>
<td>501 (C) 3</td>
<td>131,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA YOUTH FOR CHANGE</td>
<td>23-2728467</td>
<td>501 (C) 3</td>
<td>850,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA YOUTH NETWORK INC</td>
<td>23-2993155</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILADELPHIA YOUTH ORCHESTRA</td>
<td>23-6392235</td>
<td>501 (C) 3</td>
<td>23,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILANTHROPIC IMPACT FOUNDATION</td>
<td>86-2055661</td>
<td>501 (C) 3</td>
<td>2,373,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILANTHROPIC IMPACT FUND</td>
<td>83-1905966</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILANTHROPIC VENTURES FOUNDATION</td>
<td>84-3136771</td>
<td>501 (C) 3</td>
<td>76,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILANTHROPY ROUNDTABLE</td>
<td>13-2943020</td>
<td>501 (C) 3</td>
<td>49,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHILEMON FOUNDATION</td>
<td>20-0417581</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

**Part II**

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| PHILHARMONICA BAROQUE ORCHESTRA & CHORALE  
414 MASON ST STE 400 SAN FRANCISCO, CA 9410 | 94-2848318 | 501 (C) 3 | 78,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILHARMONIC SOCIETY OF ORANGE COUNTY  
1124 MAIN STREET IRVINE, CA 92614 | 95-1805452 | 501 (C) 3 | 24,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILHARMONIC-SYMPHONY SOCIETY OF NEW YORK I  
10 LINCOLN CENTER PLZ NEW YORK, NY 10023 | 13-1664054 | 501 (C) 3 | 426,200. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILIPPINE JESUIT FOUNDATION  
39 E 83RD ST NEW YORK, NY 10028 | 42-1588688 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILIPS ACADEMY CHARTER SCHOOL INC  
342 CENTRAL AVE NEWARK, NJ 7103 | 46-1960549 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILIPS ACADEMY OF NORTH CAROLINA INC  
3115 PROVIDENCE RD CHARLOTTE, NC 28211 | 20-3125525 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILIPS EDUCATION PARTNERS  
342 CENTRAL AVE NEWARK, NJ 7103 | 22-2894088 | 501 (C) 3 | 15,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILLIPS BROOK HOUSE ASSOCIATION INCORPORAT  
HARVARD UNIVERSITY CAMBRIDGE, MA 2138 | 04-6046123 | 501 (C) 3 | 59,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILLIPS BROOKS SCHOOL  
2245 AVY AVE MEHLO PARK, CA 94025 | 94-2494458 | 501 (C) 3 | 96,000. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILLIPS COLLECTION  
1600 21ST ST NW WASHINGTON, DC 20009 | 53-0204620 | 501 (C) 3 | 23,500. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILLIPS EXETER ACADEMY  
20 MAIN ST EXETER, NH 3833 | 02-022174 | 501 (C) 3 | 506,050. | FMV | N/A | FOR RECIPIENT'S EXEM | |
| PHILMONT STAFF ASSOCIATION INC  
17 DEER RUN RD CIMARRON, NM 87714 | 23-7360180 | 501 (C) 3 | 10,400. | FMV | N/A | FOR RECIPIENT'S EXEM | |

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## Part I  General Information on Grants and Assistance

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   - Yes  
   - No  

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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C)</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PHILOS PROJECT INC</td>
<td>12 E 33RD ST FL 2 NEW YORK, NY 10016</td>
<td>47-1182714</td>
<td>501 (C)</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PIPPS CENTER FOR THE ARTS INC</td>
<td>109 LOCUST ST HUDSON, WI 54016</td>
<td>39-1360778</td>
<td>501 (C)</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PHOEBE DEVITT HOMES</td>
<td>1925 W TURNER ST ALLENTOWN, PA 18104</td>
<td>22-1396838</td>
<td>501 (C)</td>
<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHOENIX CHARTER ACADEMY FOUNDATION</td>
<td>PO BOX 170665 BOSTON, MA 2117</td>
<td>20-4761182</td>
<td>501 (C)</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PHOENIX CHILDRENS HOSPITAL</td>
<td>1919 E THOMAS RD PHOENIX, AZ 85016</td>
<td>86-0422559</td>
<td>501 (C)</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHOENIX CHILDRENS HOSPITAL FOUNDATION</td>
<td>1919 E THOMAS RD PHOENIX, AZ 85016</td>
<td>74-2421549</td>
<td>501 (C)</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHOENIX COUNTRY DAY SCHOOL</td>
<td>3901 E STANFORD DR PARADISE VALLEY, AZ 8525</td>
<td>86-0172671</td>
<td>501 (C)</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHOENIX GOSPEL MISSION</td>
<td>1540 W VAN BUREN ST PHOENIX, AZ 85007</td>
<td>86-6057771</td>
<td>501 (C)</td>
<td>52,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PHOENIX HOUSES OF LONG ISLAND INC</td>
<td>3411 VERNON BLVD LONG IS CITY, NY 11106</td>
<td>11-2307925</td>
<td>501 (C)</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHOENIX MULTISPORT INC</td>
<td>2339 CHAMPA ST DENVER, CO 80205</td>
<td>20-4648043</td>
<td>501 (C)</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PHOENIX SYMPHONY ASSOCIATION</td>
<td>1 N 1ST ST STE 200 PHOENIX, AZ 85004</td>
<td>86-6000134</td>
<td>501 (C)</td>
<td>147,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PHOENIXVILLE AREA COMMUNITY SERVICES INC</td>
<td>101 BUCHANAN STREET PHOENIXVILLE, PA 19460</td>
<td>23-1902190</td>
<td>501 (C)</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
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### Part I

**General Information on Grants and Assistance**

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE</td>
<td>52-1394893</td>
<td>501 (c) 3</td>
<td>116,983</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHYSICIANS FOR A NATIONAL HEALTH PROGRAM</td>
<td>06-2937697</td>
<td>501 (c) 3</td>
<td>6,314</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHYSICIANS FOR HUMAN RIGHTS INC</td>
<td>22-2488437</td>
<td>501 (c) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHYSICIANS FOR REPRODUCTIVE HEALTH INC</td>
<td>13-3693391</td>
<td>501 (c) 3</td>
<td>82,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PHYSICIANS FOR SOCIAL RESPONSIBILITY INC</td>
<td>23-7059731</td>
<td>501 (c) 3</td>
<td>10,900</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. PIERPONT MORGAN LIBRARY</td>
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<td>225 MADISON AVE NEW YORK, NY 10016</td>
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<td>3. PIKE PLACE MARKET FOUNDATION</td>
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<td>93 PIKE ST STE 310 SEATTLE, WA 98101</td>
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<td>4. PIKE SCHOOL INC</td>
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<td>34 SUNSET ROCK RD ANDOVER, MA 1810</td>
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<td>5. PILGRIM</td>
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<td>8001 14TH AVE NE STE A SEATTLE, WA 98115</td>
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<td>6. PILGRIM BAPTIST CHURCH</td>
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<td>77 MORRIS AVENUE SUMMIT, NJ 7901</td>
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<td>125 GALWAY PL # 2F TEANECK, NJ 7666</td>
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<td>8. PILGRIM UNITED CHURCH OF CHRIST</td>
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<td>9. PILGRIM WESLEYAN CHURCH OF PHILADELPHIA</td>
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<td>6700 N BROAD ST PHILADELPHIA, PA 19126</td>
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<td>10. PILLARS INC</td>
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<td>11. PILLSBURY UNITED COMMUNITIES</td>
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<td>FMV</td>
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<td>12. PIMA COMMUNITY COLLEGE FOUNDATION INC</td>
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<td>4905C E BROADWAY BLVD STE 252 TUCSON, AZ 85</td>
<td>86-0345089</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.  

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>PINCHOT INSTITUTE FOR CONSERVATION 1400 16TH ST NW STE 350 WASHINGTON, DC 2003</td>
<td>52-1935342</td>
<td>501 (c) 3</td>
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<td>PINE COVE INC 4410 KINSEY DR TYLER, TX 75703</td>
<td>75-1254353</td>
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<td>FMV</td>
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<td>PINE CREST PREPARATORY SCHOOL INC 1501 NE 62ND ST FORT LAUDERDALE, FL 33334</td>
<td>59-0861374</td>
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<td>PINE FOREST UNITED METHODIST CHURCH 400 WOODS AVENUE DUBLIN, GA 31021</td>
<td>58-1304028</td>
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<tr>
<td>PINE LAKE COVENANT CHURCH SAMMAMISH WA 1715 228TH AVE SE SAMMAMISH, WA 98075</td>
<td>91-1399030</td>
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<td>PINE RIDGE PRESBYTERIAN CHURCH -KANSAS CITY 7600 N.W. BARRY ROAD KANSAS CITY, MO 64153</td>
<td>43-1057161</td>
<td>501 (c) 3</td>
<td>5,200.</td>
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<td>PINE STREET INN INC 434 HARRISON AVE BOSTON, MA 2118</td>
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<td>PINE TREE COUNCIL, BOY SCOUTS OF AMERICA 146 PLAINS ROAD RAYMOND, ME 4071</td>
<td>01-0211490</td>
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<td>FMV</td>
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<tr>
<td>PINE VALLEY PRESBYTERIAN CHURCH P.O. BOX 378 HALFWAY, OR 97834</td>
<td>83-0088866</td>
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<td>FMV</td>
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<tr>
<td>PINellas COUNTY EDUCATION FOUNDATION INC 12090 STARKEY RD LARGO, FL 33773</td>
<td>59-2688253</td>
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<td>FMV</td>
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<tr>
<td>PINeville UNITED METHODIST CHURCH 110 S FOLK ST FINEVILLE, NC 28134</td>
<td>56-6057534</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PINGREE SCHOOL INC 537 HIGHLAND ST S HAMILTON, MA 1982</td>
<td>04-2279977</td>
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<td>FMV</td>
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</table>

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### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

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

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#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>PINGRYS CORPORATION 131 MARYSVILLE RD BASKING RIDGE, NJ 7920</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>PINK AID INC PO BOX 5157 WESTPORT, CT 6881</td>
<td>47-1031835</td>
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<td>PIONEER BIBLE TRANSLATORS 7255 W CAMP WISDOM RD DALLAS, TX 75236</td>
<td>23-7433923</td>
<td>501 (C) 3</td>
<td>22,800</td>
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<td>PIONEER DRIVE BAPTIST CHURCH 701 SOUTH PIONEER DRIVE ABILENE, TX 79605</td>
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<td>16,667</td>
<td>FMV</td>
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<td>5</td>
<td>PIONEER ENGINEERS CLUB OF INDIANA INC PO BOX 536 RUSHVILLE, IN 46173</td>
<td>23-7345177</td>
<td>501 (C) 3</td>
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<td>PIONEER WORKS ART FOUNDATION 159 PIONEER ST BROOKLYN, NY 11231</td>
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<td>PIONEERS 10123 WILLIAM CAREY DR ORLANDO, FL 32832</td>
<td>52-1206938</td>
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<td>PIPERSVILLE ROLLING HILLS UNITED METHODIST PO BOX 347 PIPERSVILLE, PA 18947</td>
<td>23-2626347</td>
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<td>PISGAH LEGAL SERVICES PO BOX 2276 ASHEVILLE, NC 28802</td>
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<td>11</td>
<td>PITNEY MEADOWS COMMUNITY FARM INC 112 SPRING ST SARATOGA SPRINGS, NY 12865</td>
<td>81-2724904</td>
<td>501 (C) 3</td>
<td>31,350</td>
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<td>12</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>(2)</td>
<td>PITTSBURGH COMMUNITY BROADCASTING CORPORATION</td>
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<td>15,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(3)</td>
<td>PITTSBURGH ENTERTAINMENT PROJECT</td>
<td>68-0559177</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>(4)</td>
<td>PITTSBURGH FOUNDATION</td>
<td>25-0965466</td>
<td>501 (C) 3</td>
<td>46,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5)</td>
<td>PITTSBURGH GLASS CENTER INC</td>
<td>25-1814656</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>(6)</td>
<td>PITTSBURGH GOOD DEEDS</td>
<td>47-5139797</td>
<td>501 (C) 3</td>
<td>76,000.</td>
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<td>(7)</td>
<td>PITTSBURGH LIFETIME CARE COMMUNITY</td>
<td>25-1335247</td>
<td>501 (C) 3</td>
<td>8,625.</td>
<td>FMV</td>
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<td>(8)</td>
<td>PITTSBURGH PROMISE FOUNDATION</td>
<td>26-1982661</td>
<td>501 (C) 3</td>
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<td>(9)</td>
<td>PITTSBURGH SYMPHONY INC</td>
<td>25-0986052</td>
<td>501 (C) 3</td>
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<td>(10)</td>
<td>PITTSBURGH THEOLOGICAL SEMINARY OF THE UTD</td>
<td>25-0965473</td>
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<td>23,250.</td>
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<td>(11)</td>
<td>PITTSBURGH TRUST FOR CULTURAL RESOURCES</td>
<td>25-1469002</td>
<td>501 (C) 3</td>
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<td>(12)</td>
<td>PITTSBURGH YOUTH LEADERSHIP</td>
<td>84-1169209</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Pitzer College</td>
<td>95-2261113</td>
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<td>211,500.</td>
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<td>FMV</td>
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<td>1050 N Mills Ave Claremont, CA 91711</td>
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<td>(2) Pivot Community Development Corporation</td>
<td>45-5453704</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>FMV</td>
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<td>2253 Fairfield Ave Unit 3569 Bridgeport, CT</td>
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<td>(3) Pivot Ministries Inc</td>
<td>06-0839030</td>
<td>501 (C) 3</td>
<td>11,500.</td>
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<td>485 Jane St Bridgeport, CT 6608</td>
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<td>(4) PivotWorks Inc</td>
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<td>501 (C) 3</td>
<td>140,000.</td>
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<td>PO Box 441151 West Somerville, MA 2144</td>
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<td>(5) PKD Foundation</td>
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<tr>
<td>1001 E 101st Ter Ste 220 Kansas City, MO 64</td>
<td></td>
<td></td>
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<tr>
<td>(6) Place of Forsyth County Inc</td>
<td>58-2355072</td>
<td>501 (C) 3</td>
<td>12,000.</td>
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<td>FMV</td>
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<td>2550 The Place Cir Cumming, GA 30040</td>
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<td>(7) Place of Hope at the Haven Campus</td>
<td>46-1808939</td>
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<td>31,500.</td>
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<td>FMV</td>
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<td>9078 Isaiah Ln West Palm Beach, FL 33418</td>
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<td>(8) Placer Community Foundation</td>
<td>20-1485011</td>
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<td>PO Box 9203 Auburn, CA 95604</td>
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<td>(9) Placer County Society for the Prevention of</td>
<td>94-2607682</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FMV</td>
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<td>150 Corporation Yard Rd Roseville, CA 95678</td>
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<td>(10) Placer Food Bank</td>
<td>94-1740316</td>
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<td>6,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8284 Industrial Ave Roseville, CA 95678</td>
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<td>(11) Placerville Seventh Day Adventist Church</td>
<td>94-1646024</td>
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<td>18,000.</td>
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<td>FMV</td>
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<td>6831 Mother Lode Drive Placerville, CA 9566</td>
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<tr>
<td>(12) Placid Community Volunteer Fire Department</td>
<td>75-2726617</td>
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<td>10,000.</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO Box 48 Rochelle, TX 76872</td>
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### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>PLAINFIELD CHRISTIAN CHURCH 800 N DAN JONES RD PLAINFIELD, IN 46168</td>
<td>35-6027502</td>
<td>501 (C) 3</td>
<td>8,000</td>
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<td>2</td>
<td>PLAN A HEALTH INC 700 COLUMBUS AVE FBNT 4 # 20066 NEW YORK, N</td>
<td>83-2144751</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
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<td>3</td>
<td>PLAN INTERNATIONAL USA INC 155 PLAN WAY WARDWICK, RI 2886</td>
<td>13-5661832</td>
<td>501 (C) 3</td>
<td>180,974</td>
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<td>4</td>
<td>PLANNED PARENTHOOD ARIZONA INC 4751 N 15TH ST PHOENIX, AZ 85014</td>
<td>86-0146520</td>
<td>501 (C) 3</td>
<td>25,050</td>
<td>FMV</td>
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<td>5</td>
<td>PLANNED PARENTHOOD ASSOCIATION OF METRO POLI 1225 4TH ST NE WASHINGTON, DC 20002</td>
<td>53-0204621</td>
<td>501 (C) 3</td>
<td>100,200</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>PLANNED PARENTHOOD CALIFORNIA CENTRAL COAST 518 GARDEN ST SANTA BARBARA, CA 93101</td>
<td>95-2319356</td>
<td>501 (C) 3</td>
<td>33,600</td>
<td>FMV</td>
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<td>7</td>
<td>PLANNED PARENTHOOD FEDERATION OF 123 WILLIAM ST FL 10 NEW YORK, NY 10038</td>
<td>13-1644147</td>
<td>501 (C) 3</td>
<td>2,181,573</td>
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<td>8</td>
<td>PLANNED PARENTHOOD GREAT PLAINS 4401 W 109TH STREET SUITE 200 OVERLAND PARK</td>
<td>44-0565390</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>PLANNED PARENTHOOD GREATER MEMPHIS REGION I 2430 POPLAR AVE MEMPHIS, TN 38112</td>
<td>62-6073178</td>
<td>501 (C) 3</td>
<td>22,750</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>PLANNED PARENTHOOD GULF COAST INC 4600 GULF FWY HOUSTON, TX 77023</td>
<td>74-1100163</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PLANNED PARENTHOOD HUDSON PECONIC INC 570 TAXTER RD STE 250 ELMSFORD, NY 10523</td>
<td>11-2454790</td>
<td>501 (C) 3</td>
<td>36,200</td>
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<td>12</td>
<td>PLANNED PARENTHOOD KEYSTONE 610 LOUIS DR STE 300 WARMING, PA 18974</td>
<td>23-2450112</td>
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<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. PLANNED PARENTHOOD LEAGUE OF MASSACHUSETTS</td>
<td>1055 COMMONWEALTH AVE BOSTON, MA 2215</td>
<td>04-2698497</td>
<td>501 (C) 3</td>
<td>115,500.</td>
<td>FMV</td>
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<tr>
<td>2. PLANNED PARENTHOOD LOS ANGELES</td>
<td>400 W 30TH ST LOS ANGELES, CA 90007</td>
<td>95-2408623</td>
<td>501 (C) 3</td>
<td>722,150.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. PLANNED PARENTHOOD MAR MONTE INC</td>
<td>1691 THE ALAMEDA SAN JOSE, CA 95126</td>
<td>94-1583439</td>
<td>501 (C) 3</td>
<td>246,500.</td>
<td>FMV</td>
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<td>4. PLANNED PARENTHOOD MINNESOTA NORTH DAKOTA S</td>
<td>671 VANDALIA ST SAINT PAUL, MN 55114</td>
<td>41-0948382</td>
<td>501 (C) 3</td>
<td>107,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. PLANNED PARENTHOOD CENTRAL AND WESTERN N</td>
<td>114 UNIVERSITY AVE ROCHESTER, NY 14605</td>
<td>16-0746860</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. PLANNED PARENTHOOD OF DELAWARE INC</td>
<td>625 N SHIPLEY ST WILMINGTON, DE 19801</td>
<td>51-0066725</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. PLANNED PARENTHOOD OF GREATER NEW YORK INC</td>
<td>26 BLEECKER ST NEW YORK, NY 10012</td>
<td>13-2621497</td>
<td>501 (C) 3</td>
<td>220,832.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. PLANNED PARENTHOOD OF GREATER OHIO</td>
<td>444 W EXCHANGE ST AKRON, OH 44302</td>
<td>34-1015976</td>
<td>501 (C) 3</td>
<td>112,204.</td>
<td>FMV</td>
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<tr>
<td>9. PLANNED PARENTHOOD OF GREATER TEXAS</td>
<td>7424 GREENVILLE AVE STE 206 DALLAS, TX 7523</td>
<td>52-1243220</td>
<td>501 (C) 3</td>
<td>28,600.</td>
<td>FMV</td>
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<tr>
<td>10. PLANNED PARENTHOOD OF GREATER WASHINGTON AN</td>
<td>1117 TISTON DR YAKIMA, WA 98902</td>
<td>91-6071384</td>
<td>501 (C) 3</td>
<td>32,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11. PLANNED PARENTHOOD OF ILLINOIS</td>
<td>18 S MICHIGAN AVE 6TH FLR CHICAGO, IL 60603</td>
<td>36-2170901</td>
<td>501 (C) 3</td>
<td>67,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12. PLANNED PARENTHOOD OF INDIANA AND KENTUCKY</td>
<td>200 S MERIDIAN ST STE 400 INDIANAPOLIS, IN</td>
<td>35-0874276</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
<td>PLANNED PARENTHOOD OF MARYLAND INC 330 N HOWARD ST BALTIMORE, MD 21201</td>
<td>52-0607930</td>
<td>501 (c) 3</td>
<td>16,750.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PLANNED PARENTHOOD OF METROPOLITAN NEW JERSEY FIRST FLOOR NEWARK, NJ 7102</td>
<td>22-1539559</td>
<td>501 (c) 3</td>
<td>28,000.00</td>
<td>FMV</td>
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<td>PLANNED PARENTHOOD OF MICHIGAN 950 VICTORS WAY STE 100 ANN ARBOR, MI 48108</td>
<td>38-1707521</td>
<td>501 (c) 3</td>
<td>29,600.00</td>
<td>FMV</td>
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<td>22-1643997</td>
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<td>89,040.00</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PLANNED PARENTHOOD OF NORTHERN NEW ENGLAND 784 HERCULES DR STE 110 COCHRAN, VT 5446</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PLANNED PARENTHOOD OF SOUTH FLORIDA AND THE 2300 N FLORIDA MANGO RD WEST PALM BEACH, FL</td>
<td>59-1391115</td>
<td>501 (c) 3</td>
<td>29,500.00</td>
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<tr>
<td>PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND 345 WHITNEY AVE NEW HAVEN, CT 6511</td>
<td>06-0263565</td>
<td>501 (c) 3</td>
<td>105,250.00</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL 736 CENTRAL AVE SARASOTA, FL 34236</td>
<td>59-1274328</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PLANNED PARENTHOOD OF SOUTHWESTERN OREGON 3579 FRANKLIN BLVD EUGENE, OR 97403</td>
<td>93-0573822</td>
<td>501 (c) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PLANNED PARENTHOOD OF THE COLUMBIA WILLAMETTE 3727 NE ML KING JR BLVD PORTLAND, OR 97212</td>
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<tr>
<td>PLANNED PARENTHOOD OF THE GREAT NORTHWEST A 2001 E MADISON ST SEATTLE, WA 98122</td>
<td>91-0686012</td>
<td>501 (c) 3</td>
<td>111,623.00</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PLANNED PARENTHOOD OF THE NORTH COUNTRY NEW 160 STONE ST WATERTOWN, NY 13601</td>
<td>16-0919175</td>
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<td>6,500.00</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Department of the Treasury**

**Internal Revenue Service**

**OMB No. 1545-0047**

**Name of the organization**

**Employer identification number**

**Open to Public Inspection**

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PLANNED PARENTHOOD OF THE PACIFIC SOUTHWEST</td>
<td>95-6111785</td>
<td>501 (C) 3</td>
<td>154,100.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>PLANNED PARENTHOOD OF THE ST LOUIS REGION A</td>
<td>43-0652666</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>PLANNED PARENTHOOD OF WESTERN PENNSYLVANIA</td>
<td>25-0965474</td>
<td>501 (C) 3</td>
<td>14,185.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PLANNED PARENTHOOD OF WISCONSIN INC</td>
<td>39-0863391</td>
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<td>79,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PLANNED PARENTHOOD PASADENA AND SAN GABRIEL</td>
<td>95-1916050</td>
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<td>21,500.</td>
<td>FMV</td>
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<tr>
<td>6</td>
<td>PLANNED PARENTHOOD SANTA DIABLO INC</td>
<td>94-1575233</td>
<td>501 (C) 3</td>
<td>66,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PLANNED PARENTHOOD SOUTH ATLANTIC</td>
<td>56-1282557</td>
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<td>FMV</td>
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<td>8</td>
<td>PLANNED PARENTHOOD SOUTH TEXAS</td>
<td>74-1297211</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>PLANNED PARENTHOOD SOUTHEAST INC</td>
<td>58-6045874</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>PLANNED PARENTHOOD SOUTHEASTERN PA</td>
<td>23-1352509</td>
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<td>156,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>PLANNED PARENTHOOD SOUTHWEST OHIO REGION</td>
<td>31-0536688</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PLANNED PARENTHOOD INTERNATIONAL</td>
<td>84-1522523</td>
<td>501 (C) 3</td>
<td>5,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PLANNED PETHOOD OF GEORGIA INC</td>
<td>2860 BUFORD HWY DULUTH, GA 30096</td>
<td>90-0516757</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>PLANT A SEED FOUNDATION INC</td>
<td>8 BRYCE LN NEWTOWN, PA 18940</td>
<td>13-4340068</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>PLANTING JUSTICE</td>
<td>319 105TH AVE OAKLAND, CA 94603</td>
<td>27-0334905</td>
<td>501 (C) 3</td>
<td>21,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PLANTING SEEDS INTERNATIONAL</td>
<td>2860 WELLER LN NORTHBROOK, IL 60062</td>
<td>82-0627430</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>PLATTEVILLE UNITED METHODIST CHURCH</td>
<td>1065 LANCASTER ST PLATTEVILLE, WI 53818</td>
<td>39-0882923</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>PLAY MARIN</td>
<td>PO BOX 530 SAUSALITO, CA 94966</td>
<td>83-1737141</td>
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<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PLAY ON PHILLY</td>
<td>PO BOX 8662 PHILADELPHIA, PA 19101</td>
<td>45-3754114</td>
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<td>23,500.</td>
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<td>N/A</td>
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<td>PLAYERS PHILANTHROPY FUND</td>
<td>1122 XENILWORTH DR STE 201 TOWSON, MD 21204</td>
<td>27-6601178</td>
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<td>63,488.</td>
<td>FMV</td>
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<td>9</td>
<td>PLAYGROUNDNYC INC</td>
<td>PO BOX 150458 BROOKLYN, NY 11215</td>
<td>81-1299756</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>PLAYHOUSE ARTISTS</td>
<td>12 W MECHANIC ST APT 2C NEW HOPE, PA 18938</td>
<td>47-55530437</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>PLAYHOUSE SQUARE FOUNDATION</td>
<td>1501 EUCLID AVE STE 200 CLEVELAND, OH 44115</td>
<td>23-7304942</td>
<td>501 (C) 3</td>
<td>23,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>PLAYWRIGHTS HORIZONS INC</td>
<td>416 W 42ND ST NEW YORK, NY 10036</td>
<td>13-2805131</td>
<td>501 (C) 3</td>
<td>83,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PLAZA DEL RIO FOUNDATION</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>PLEASANT VALLEY CHURCH OF CHRIST</td>
<td>71-0291587</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>PLEASANT VIEW CHURCH OF GOSHEN INC</td>
<td>35-1345150</td>
<td>501 (C) 3</td>
<td>17,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PLEASE TOUCH MUSEUM</td>
<td>23-2109376</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>PLENTY INC</td>
<td>46-4356623</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PLENTY INTERNATIONAL</td>
<td>23-7432298</td>
<td>501 (C) 3</td>
<td>11,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>PLOUGHSHARES FUND INC</td>
<td>94-2764520</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>PLUM VILLAGE COMMUNITY OF ENGAGED BUDDHISM</td>
<td>03-0535645</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PLUMMER YOUTH PROMISE INC</td>
<td>04-2104844</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PLYMOUTH CHRISTIAN YOUTH CENTER AMERICAN LU</td>
<td>41-0794440</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12</td>
<td>PLYMOUTH CONGREGATIONAL CHURCH</td>
<td>42-0745986</td>
<td>501 (C) 3</td>
<td>12,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020

JSA
0E1288 1,000

18674H 1467  V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Schedule I**

(From 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

**Open to Public Inspection**

**Department of the Treasury**
**Internal Revenue Service**

**Naming of the organization**

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. □ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) PLYMOUTH CONGREGATIONAL CHURCH</td>
<td>48-0577650</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) PLYMOUTH CONGREGATIONAL CHURCH OF MINNEAPOLIS</td>
<td>41-0693946</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) PLYMOUTH EVANGELICAL COVENANT CHURCH PLYMOUTH</td>
<td>51-0221812</td>
<td>501 (C) 3</td>
<td>13,700.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(4) PLYMOUTH HARBOR INC</td>
<td>59-1031820</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) PLYMOUTH HEIGHTS CHRISTIAN REFORMED CHURCH</td>
<td>38-1598953</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(6) PLYMOUTH HOUSING GROUP</td>
<td>91-1122621</td>
<td>501 (C) 3</td>
<td>403,400.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) POCKET TESTAMENT LEAGUE INC</td>
<td>22-1616250</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) POCONO MOUNTAINS MUSIC FESTIVAL</td>
<td>27-1440062</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) PODER IN ACTION INC</td>
<td>46-2284158</td>
<td>501 (C) 3</td>
<td>160,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) PODER LEARNING CENTER</td>
<td>36-4251880</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) POETS &amp; WRITERS INC</td>
<td>13-2682458</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(12) POIMEA FOUNDATION</td>
<td>46-4133090</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. ▼

3. Enter total number of other organizations listed in the line 1 table ................................................................. ▼

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

Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>POINT DEFIANCE ZOOLOGICAL SOCIETY 5400 N PEARL ST TACOMA, WA 98407 91-6066667 501 (C) 3 105,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POINT FOUNDATION 6380 WILSHIRE BLVD STE 1606 LOS ANGELES, CA 90036 84-1582086 501 (C) 3 53,550. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT LOMA NAZARENE UNIVERSITY 3900 LOMALAND DR SAN DIEGO, CA 92106 95-1644035 501 (C) 3 75,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT O WOODS FOUNDATION INC 9 POINT OWOODS AVENUE POINT OWOODS, NY 1170 84-3518624 501 (C) 3 25,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POINT PLEASANT BEACH BOARD OF EDUCATION 299 COOKS LANE POINT PLEASANT BEACH, NJ 0874 21-6000288 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT PLEASANT BEACH COMMUNITY ENDOWMENT FUND 416 NEW JERSEY AVE POINT PLEASANT BEACH, NJ 0874 26-1132107 501 (C) 3 35,610. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT REYES BIRD OBSERVATORY 3820 CYPRESS DR STE 11 PETALUMA, CA 94954 94-1594250 501 (C) 3 82,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT REYES NATIONAL SEASHORE ASSOCIATION 1 BEAR VALLEY RD BLDG 70 POINT REYES STATION 94-2228894 501 (C) 3 26,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POINT UNIVERSITY INC 507 N 10TH ST WEST POINT, GA 31833 58-6044761 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>POINT WASHINGTON UNITED METHODIST CHURCH IN 1290 N COUNTY HIGHWAY 395 SANTA ROSA BEACH, FL 874-1971345 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POISE FOUNDATION 2944 NEW GATEWAY CENTER STE 1705 PITTSBURGH, PA 25-1393426 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POLARIS HOUSE 434 WILLOUGHBY AVE JUNEAU, AK 99901 30-090258 501 (C) 3 61,900. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
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<td>1</td>
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<td>03-0391561</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>POLICING EQUITY</td>
<td>81-4945849</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>POLICY CIRCLE CO</td>
<td>47-2843650</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>POLICY MATTERS OHIO</td>
<td>34-1921881</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>POLISH MUSEUM OF AMERICA</td>
<td>51-0210113</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>POLITICAL ASYLUM IMMIGRATION REPRESENTATION</td>
<td>22-3003501</td>
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<td>7</td>
<td>POLITICAL ECONOMY RESEARCH CENTER INC</td>
<td>81-0393444</td>
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<td>8</td>
<td>POLLY HILL ARBORETUM INC</td>
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<td>65-1122507</td>
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<td>11</td>
<td>POLO TRAINING FOUNDATION</td>
<td>36-2605713</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>12</td>
<td>POLY PREP COUNTRY DAY SCHOOL</td>
<td>11-1630821</td>
<td>501 (C) 3</td>
<td>71,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>10 SAND ISLAND PKWY HONOLULU, HI 96819</td>
<td>23-7302232</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>POLYTECHNICAL SCHOOL</td>
<td>95-1641456</td>
<td>501 (C) 3</td>
<td>108,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POMONA COLLEGE</td>
<td>95-1664112</td>
<td>501 (C) 3</td>
<td>267,949.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>FONTE VEDRA PRESBYTERIAN CHURCH</td>
<td>59-2926349</td>
<td>501 (C) 3</td>
<td>44,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PONTIFICAL INSTITUTE FOR FOREIGN MISSIONS-P</td>
<td>38-6063848</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 190 MAPAVILLE, MO 63065</td>
<td>43-1188096</td>
<td>501 (C) 3</td>
<td>6,940.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO Box 1031 SOUTH MAIN STREET ROCKFORD, IL 62030</td>
<td>36-3672325</td>
<td>501 (C) 3</td>
<td>11,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POP WARNER LITTLE SCHOLARS, INC.</td>
<td>59-0631403</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>50,856.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>POPE JOHN PAUL II CATHOLIC SCHOOL</td>
<td>59-2540038</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>POPULATION CONNECTION</td>
<td>94-1703155</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POPULATION COUNCIL INC</td>
<td>13-1687001</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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## SCHEDULE I
### (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>POPULATION INSTITUTE</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>POPULATION MEDIA CENTER INC</td>
<td>03-0358029</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>POPULATION SERVICES INTERNATIONAL</td>
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<tr>
<td>4</td>
<td>POP-UP BIRTHDAY FOUNDATION</td>
<td>47-5078088</td>
<td>501 (c) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PORCH CHAPEL HILL-CARRBORO</td>
<td>27-2759081</td>
<td>501 (c) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>PORCHLIGHT INC</td>
<td>39-1579521</td>
<td>501 (c) 3</td>
<td>28,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PORT ANGELES FINE ARTS CENTER FOUNDATION</td>
<td>94-3029546</td>
<td>501 (c) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>PORT ANGELES FOOD BANK</td>
<td>91-1192596</td>
<td>501 (c) 3</td>
<td>11,350.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>PORT CHESTER CARVER CENTER INC</td>
<td>13-1832949</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>PORT TOWNSEND SCHOOL OF THE ARTS</td>
<td>47-3067617</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PORTAGE CHAPEL HILL UNITED METHODIST CHURCH</td>
<td>38-1816766</td>
<td>501 (c) 3</td>
<td>61,960.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PORTAGE COUNTY HUMANE SOCIETY INCORPORATED</td>
<td>39-1189598</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PORTER-GAUD FOUNDATION 300 ALBEMARLE RD CHARLESTON, SC 29407</td>
<td>45-2701202</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTICO CHURCH ARLINGTON 800 N ILLINOIS ST ARLINGTON, VA 22205</td>
<td>27-0607526</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND ART MUSEUM 1219 SW PINE AVE PORTLAND, OR 97205</td>
<td>93-0391604</td>
<td>501 (C) 3</td>
<td>246,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND COMMUNITY COLLEGE FOUNDATION INC PO BOX 19000 PORTLAND, OR 97280</td>
<td>93-0811291</td>
<td>501 (C) 3</td>
<td>61,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND OPERA FOUNDATION</td>
<td>211 SE CARUTHERS ST PORTLAND, OR 97214</td>
<td>93-6034321</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND OPPORTUNITIES INDUSTRIALIZATION CENTER 9828 E BURNSIDE ST STE 205 PORTLAND, OR 97202</td>
<td>93-0593858</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND PROMISE CENTER</td>
<td>11901100 PORTLAND, OR 97228</td>
<td>20-0492159</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PORTLAND PROMISE CENTER</td>
<td>11901100 PORTLAND, OR 97228</td>
<td>20-0492159</td>
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<td>FMV</td>
<td>N/A</td>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3 Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

**Part I**  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. PORTLAND REFUGEE SUPPORT GROUP  
10175 SW BARBUR BLVD STE 102B PORTLAND, OR  
82-1924164  
501 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 2. PORTLAND RESCUE MISSION  
PO BOX 3713 PORTLAND, OR 97208  
93-0429004  
501 (C) 3  
21,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 3. PORTLAND STATE UNIVERSITY FOUNDATION  
1600 SW 4TH AVE STE 730 PORTLAND, OR 97201  
93-0619733  
501 (C) 3  
518,250.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 4. PORTLAND TRAILS  
305 COMMERCIAL ST PORTLAND, ME 4101  
01-0463028  
501 (C) 3  
6,650.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 5. PORTLAND YOUTHBUILDERS  
4816 SE 92ND AVE PORTLAND, OR 97266  
94-3123483  
501 (C) 3  
20,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 6. PORTOLA VALLEY PRESBYTERIAN CHURCH  
945 PORTOLA ROAD PORTOLA VALLEY, CA 94028  
94-1156664  
501 (C) 3  
105,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 7. PORTOLA VALLEY THEATRE CONSERVATORY INC  
945 PORTOLA RD PORTOLA VALLEY, CA 94028  
94-3225965  
501 (C) 3  
11,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 8. POSITIVE COACHING ALLIANCE  
1001 N RENGSTORFF AVE STE 100 MOUNTAIN VIEW  
77-0485946  
501 (C) 3  
12,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 9. POSITIVE FUTURES NETWORK  
284 MADRONA WAY NE STE 116 BAINBRIDGE ISLAN  
91-1715916  
501 (C) 3  
6,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 10. POTAWATOMI ZOOLOGICAL SOCIETY INC  
500 S GREENLAWN AVE SOUTH BEND, IN 46615  
35-1183974  
501 (C) 3  
8,100.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 11. POTLATCH FUND  
801 2ND AVE STE 304 SEATTLE, WA 98104  
73-1712905  
501 (C) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| 12. POTOMAC APPALACHIAN TRAIL CLUB INC  
118 PARK ST SE VIENNA, VA 22180  
53-0187508  
501 (C) 3  
14,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>POTOMAC CONSERVANCY INC 962 WAYNE AVE STE 540 SILVER SPRING, MD 209</td>
<td>52-1842501</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>POTOMAC RIVERKEEPER INC 3070 M ST NW WASHINGTON, DC 20007</td>
<td>54-1982624</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>POTOMAC SCHOOL 1301 POTOMAC SCHOOL RD Mc LEAN, VA 22101</td>
<td>54-0562160</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>POTTERS HOUSE 810 VAN RAALTE DR SW WYOMING, MI 49509</td>
<td>38-2372676</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POTTERS HOUSE 98 PO BOX 3014 FAYETTEVILLE, AR 72702</td>
<td>46-4346977</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>POTTERS HOUSE ASSOCIATION INTERNATIONAL INC PO BOX 106 PEWAUKEE, WI 53072</td>
<td>20-3305890</td>
<td>501 (C) 3</td>
<td>15,840.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POTTS TOWN AREA SENIORS CENTER 288 MOSSER RD POTTS TOWN, PA 19464</td>
<td>23-1994517</td>
<td>501 (C) 3</td>
<td>40,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POTTS TOWN REGIONAL PUBLIC LIBRARY 500 E HIGH ST POTTS TOWN, PA 19464</td>
<td>23-0985220</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POWHKEEPSIE PUBLIC LIBRARY DISTRICT 93 MARKET ST POWHKEEPSIE, NY 12601</td>
<td>14-1703173</td>
<td>501 (C) 3</td>
<td>568,435.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POWDERHOUSE STUDIOS LIMITED 339R SUMMER ST SOMERVILLE, MA 02144</td>
<td>81-4011915</td>
<td>501 (C) 3</td>
<td>400,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POWELL GARDENS INC 1609 NW US HIGHWAY 50 KINGSVILLE, MO 64061</td>
<td>43-1483357</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>POWER UP SCHOLARSHIP FUND INC 521 BRANDON WAY AUSTIN, TX 78733</td>
<td>82-0885331</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table: ____________________________

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<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
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<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
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<td>(1) POwerCROSS</td>
<td>14-1989435</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>N/A</td>
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<td>(2) POWERHOUSE MINISTRIES INC</td>
<td>68-0020855</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) POWERMYLEARNING INC</td>
<td>13-3935309</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) POYTNER INSTITUTE FOR MEDIA STUDIES INC</td>
<td>59-1630423</td>
<td>501 (C) 3</td>
<td>7,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) PRAGER UNIVERSITY FOUNDATION</td>
<td>27-1763901</td>
<td>501 (C) 3</td>
<td>372,094.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) PRAIRIE ENTHUSIASTS INC</td>
<td>39-1601574</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) PRAIRIE PUBLIC BROADCASTING INC</td>
<td>45-0276899</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) PRAIRIE SCHOOL INC</td>
<td>39-6074931</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) PRAIRIE STATE LEGAL SERVICES INC</td>
<td>37-1030764</td>
<td>501 (C) 3</td>
<td>106,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) PRANCING HORSE INC</td>
<td>56-1479794</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) PRATHAM USA</td>
<td>76-0620808</td>
<td>501 (C) 3</td>
<td>300,503.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) PRATT FINE ARTS CENTER</td>
<td>76-0620808</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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### Part I: General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - **Yes**
   - **No**

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### General Information on Grants and Assistance

- **EIN:**
- **Name and address of organization or government:**
- **IRC section (if applicable):**
- **Amount of cash grant:**
- **Method of valuation (book, FMV, appraisal, other):**
- **Description of noncash assistance:**
- **Purpose of grant or assistance:**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td><strong>(1) PRAYAS INC</strong></td>
<td>36-3772297</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1814 WILMAR DR QUINCY, IL 62301</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>(2) PREA FOUNDATION INC</strong></td>
<td>82-1060870</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>100 PEARL ST FL 13 HARTFORD, CT 6103</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td><strong>(3) PREBLE STREET</strong></td>
<td>01-0418917</td>
<td>501 (c) 3</td>
<td>55,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>38 PREBLE STREET 3RD FL PORTLAND, ME 4101</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td><strong>(4) PRECINCT2GETHER INC</strong></td>
<td>74-2065589</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>14350 WALLISVILLE RD STE 101 HOUSTON, TX 77</td>
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<tr>
<td><strong>(5) PRECIOUS BLOOD CATHOLIC CHURCH</strong></td>
<td>35-1067335</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1385 WEST 6TH ST. JASPER, IN 47546</td>
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<tr>
<td><strong>(6) PRECIOUS BLOOD MINISTRY OF RECONCILIATION</strong></td>
<td>37-1447869</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5114 S ELIZABETH ST CHICAGO, IL 60609</td>
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<tr>
<td><strong>(7) PREGNANCY AID INC OF EASTERN WAYNE COUNTY</strong></td>
<td>23-7377830</td>
<td>501 (c) 3</td>
<td>8,345.</td>
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<tr>
<td>PO BOX 36935 GROSSE POINTE, MI 48236</td>
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<tr>
<td><strong>(8) PREGNANCY CARE CENTER OF SPRINGFIELD INC</strong></td>
<td>37-1064806</td>
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<td>FMV</td>
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<td>57-0923523</td>
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<tr>
<td>1 CARDINAL RD STE 1 # 2 HILTON HEAD ISLAND,</td>
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<td></td>
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<tr>
<td><strong>(10) PREGNANCY COUNSELING CENTER INC</strong></td>
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<tr>
<td>853 HASKELL ST RENO, NV 89509</td>
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<td><strong>(11) PREGNANCY DECISION HEALTH CENTERS</strong></td>
<td>31-1002913</td>
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<td>59,500.</td>
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<td>N/A</td>
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<tr>
<td>665 E DUBLIN GRANVILLE RD STE 120 COLUMBUS,</td>
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<tr>
<td><strong>(12) PREGNANCY HELP CENTER</strong></td>
<td>95-4579814</td>
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<tr>
<td>1311 CRENSHAM BLVD STE A TORRANCE, CA 90501</td>
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<td></td>
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</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**
3. **Enter total number of other organizations listed in the line 1 table.**
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Number</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PREGNANCY HELP CENTER INC</td>
<td>76-0276015</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>2</td>
<td>PREGNANCY HELP INC</td>
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<tr>
<td>3</td>
<td>PREGNANCY RESOURCE CENTER INC</td>
<td>61-1225782</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PREGNANCY RESOURCE CENTER OF METRO RICHMOND</td>
<td>52-1280960</td>
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<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PREGNANCY RESOURCE CENTER OF SNOHOMISH CONT</td>
<td>91-1262478</td>
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<td>7,000.</td>
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<tr>
<td>6</td>
<td>PREGNANCY RESOURCE CENTER OF STANLY COUNTY</td>
<td>56-1628565</td>
<td>501 (C) 3</td>
<td>8,020.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PREGNANCY RESOURCE CENTER OF CENTRAL OREGO</td>
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<td>15,000.</td>
<td>FMV</td>
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<td>8</td>
<td>PREGNANCY RESOURCE MEDICAL CENTER</td>
<td>76-0013804</td>
<td>501 (C) 3</td>
<td>5,181.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>PREGNANCY SUPPORT SERVICES</td>
<td>58-1530834</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PRELUDE CLUBHOUSE</td>
<td>47-4504368</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>PREP FOR PREP</td>
<td>47-4504368</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PREPARE AND PROSPER</td>
<td>328 W 71ST ST NEW YORK, NY 10023</td>
<td>13-2613383</td>
<td>501 (C) 3</td>
<td>68,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
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<td>PREGNANCY RESOURCE MEDICAL CENTER</td>
<td>4411 AVENUE N ROSENBERG, TX 77471</td>
<td>501 (C) 3</td>
<td>5,181.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the instructions for Form 990.
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PRESBYTERIAN CHILDREN’S HOMES AND SERVICES</td>
<td>5920 W WILLIAM CANNON DR BLDG 3 AUSTIN, TX</td>
<td>75-0818072</td>
<td>501 (C) 3</td>
<td>10,903.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>PRESBYTERIAN CHURCH</td>
<td>307 KINGSBURY AVE LA PORTE, IN 46350</td>
<td>35-0915462</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>PRESBYTERIAN CHURCH</td>
<td>123 W HILL ST WABASH, IN 46992</td>
<td>35-0870107</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>4</td>
<td>PRESBYTERIAN CHURCH AT NEW PROVIDENCE</td>
<td>1307 SPRINGFIELD AVENUE NEW PROVIDENCE, NJ</td>
<td>22-1685181</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5</td>
<td>PRESBYTERIAN CHURCH IN AMERICA</td>
<td>PO BOX 339 KEMBLESVILLE, OH 45040</td>
<td>23-2775460</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>6</td>
<td>PRESBYTERIAN CHURCH IN AMERICA</td>
<td>710 RIDGELY AVE ANNAPOLIS, MD 21401</td>
<td>52-0906714</td>
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<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>7</td>
<td>PRESBYTERIAN CHURCH IN AMERICA</td>
<td>6170 IRWIN SIMPSON RD MASON, PA 19347</td>
<td>31-1409373</td>
<td>501 (C) 3</td>
<td>79,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>8</td>
<td>PRESBYTERIAN CHURCH IN AMERICA &amp; CORPORATIO</td>
<td>PO BOX 250 CULLMAN, AL 35056</td>
<td>63-1066049</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>PRESBYTERIAN CHURCH IN MORRISTOWN</td>
<td>65 SOUTH ST MORRISTOWN, NJ 7960</td>
<td>22-1487297</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>10</td>
<td>PRESBYTERIAN CHURCH IN THE TOWN OF RYE</td>
<td>882 BOSTON POST RD RYE, NY 10580</td>
<td>13-1740299</td>
<td>501 (C) 3</td>
<td>23,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>11</td>
<td>PRESBYTERIAN CHURCH OF THE ATONEMENT</td>
<td>10613 GEORGIA AVE SILVER SPRING, MD 20902</td>
<td>52-0615912</td>
<td>501 (C) 3</td>
<td>92,375.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>12</td>
<td>PRESBYTERIAN CHURCH OF THE BIG WOOD</td>
<td>PO BOX 660 KETCHUM, ID 83340</td>
<td>82-0374595</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [x] No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) PRESBYTERIAN CHURCH OF THE CROSS</td>
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<td>501 (C) 3</td>
<td>51,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) PRESBYTERIAN CHURCH OF TOMS RIVER</td>
<td>21-0672674</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) PRESBYTERIAN CHURCH USA</td>
<td>36-3122817</td>
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<td>8,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) PRESBYTERIAN CHURCH USA</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) PRESBYTERIAN CHURCH USA A CORP</td>
<td>13-3462549</td>
<td>501 (C) 3</td>
<td>65,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(6) PRESBYTERIAN CHURCH USA FOUNDATION</td>
<td>23-1440115</td>
<td>501 (C) 3</td>
<td>243,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) PRESBYTERIAN EVANGELISTIC FELLOWSHIP INC</td>
<td>58-6065089</td>
<td>501 (C) 3</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) PRESBYTERIAN FRONTIER FELLOWSHIP</td>
<td>94-3142057</td>
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<td>(9) PRESBYTERIAN HEALTHCARE FOUNDATION</td>
<td>85-6016641</td>
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<td>FMV</td>
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<td>(10) PRESBYTERIAN HISTORICAL SOCIETY THE</td>
<td>23-6431364</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) PRESBYTERIAN NIGHT SHELTER OF TARRANT COUNTY</td>
<td>75-1985591</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) PRESBYTERIAN SCHOOL</td>
<td>76-0282995</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**
# SCHEDULE I
## (Form 990)
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PRESBYTERY OF GRAND CANYON</td>
<td>86-0648763</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>PRESBYTERY OF THE NORTHERN PLAINS</td>
<td>45-0344804</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>PRESCHOOL OF THE WARM HEART</td>
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<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>PRESCOTT CHARITIES INC</td>
<td>1615 BENT TREE TRL PRESCOTT, AZ 86303</td>
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<td>FMV</td>
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<td>5</td>
<td>PRESERVATION FOUNDATION OF PALM BEACH INC</td>
<td>311 PERUVIAN AVE PALM BEACH, FL 33480</td>
<td>501 (C) 3</td>
<td>10,000</td>
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<td>147 KING ST CHARLESTON, SC 29401</td>
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<td>424 BELLEVUE AVE NEWPORT, RI 2840</td>
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<td>PRESERVE CULTURE</td>
<td>510 240TH AVE SE SANNAMISH, WA 98074</td>
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<td>9</td>
<td>PRESIDENT &amp; FELLOWS OF MIDDLEBURY COLLEGE</td>
<td>152 MAPLE STREET CONTROLLERS O MIDDLEBURY,</td>
<td>501 (C) 3</td>
<td>509,666</td>
<td>FMV</td>
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<td>10</td>
<td>PRESIDENT &amp; TRUSTEES OF COLBY COLLEGE</td>
<td>4130 MAYFLOWER HL WATERTVILLE, ME 4901</td>
<td>501 (C) 3</td>
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<td>11</td>
<td>PRESIDENT AND FELLOWS OF HARVARD COLLEGE</td>
<td>1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA</td>
<td>501 (C) 3</td>
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<td>PRESIDENT AND TRUSTEES OF BATES COLLEGE</td>
<td>2 ANDREWS RD 216 LANE HALL LEWISTON, ME 424</td>
<td>501 (C) 3</td>
<td>761,750</td>
<td>FMV</td>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1. **General Information on Grants and Assistance**
   - Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**
   - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

2. **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

## Part II

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>PRESIDENT-BOARD OF TRUSTEES SANTA CLARA COL</td>
<td>94-1156617</td>
<td>501 (C) 3</td>
<td>544,500.</td>
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<td>PRESIDIO KNOLLS SCHOOL INC</td>
<td>20-5758127</td>
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<td>PRESTIGE INSTITUTE INC</td>
<td>82-3224098</td>
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<td>PRESTON HOLLOW PRESBYTERIAN CHURCH</td>
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<td>PRESTONWOOD BAPTIST CHURCH</td>
<td>75-1543546</td>
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<td>PRETERM CLEVELAND INC</td>
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<td>PREVENT CHILD ABUSE AMERICA</td>
<td>23-7235671</td>
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<td>PREVENTION POINT PHILADELphia INCORPORATED</td>
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<td>FMV</td>
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</tbody>
</table>

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- Enter total number of other organizations listed in the line 1 table. 

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (b) EIN</th>
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<th>1 (g) Description of non-cash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>PRIESTS FOR LIFE</td>
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<td>PRIMARY INFORMATION INC</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - X Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
<td>(1) PRINCETON CANNON DIAL ELM FOUNDATION A NJ N 21 PROSPECT AVE PRINCETON, NJ 08540 45-5573728 501 (C) 3 62,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(6) PRINCETON DAY SCHOOL INC</td>
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<td>(9) PRINCETON HEALTHCARE SYSTEM FOUNDATION INC</td>
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<td>(10) PRINCETON IN ASIA INC</td>
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<td>194 NASSAU ST STE 212 PRINCETON, NJ 08542 13-6163215 501 (C) 3 100,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ............................................................... ▶

3 Enter total number of other organizations listed in the line 1 table .................................................................................................................. ▶

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Schedule I (Form 990) 2020
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</tr>
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<tbody>
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<td>501 (C) 3</td>
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<td>78 LEIGH AVE PRINCETON, NJ 08542</td>
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<td>(2) PRINCETON PRO MUSICA</td>
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<td>(3) PRINCETON PROJECT 55 INC</td>
<td>52-1647841</td>
<td>501 (C) 3</td>
<td>88,555.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12 STOCKTON ST PRINCETON, NJ 08540</td>
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<tr>
<td>(4) PRINCETON PROSPECT FOUNDATION</td>
<td>22-6075964</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 15 PRINCETON, NJ 08542</td>
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<tr>
<td>(5) PRINCETON PUBLIC LIBRARY FOUNDATION INC</td>
<td>22-3494366</td>
<td>501 (C) 3</td>
<td>7,040.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>65 WITHERSPOON ST PRINCETON, NJ 08542</td>
<td></td>
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<tr>
<td>(6) PRINCETON SYMPHONY ORCHESTRA INC</td>
<td>22-2327766</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 250 PRINCETON, NJ 08542</td>
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<td>(7) PRINCETON THEOLOGICAL SEMINARY</td>
<td>21-0635010</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>64 MERCER ST PRINCETON, NJ 08540</td>
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<tr>
<td>(8) PRINCETON-BLAIRSTOWN CENTER INC</td>
<td>22-6075831</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>13 ROSZEL RD STE 8109 PRINCETON, NJ 08540</td>
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<td>(9) PRINCETON-IN-AFRICA</td>
<td>22-3824520</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>194 NASSAU ST STE 219 PRINCETON, NJ 08542</td>
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<tr>
<td>(10) PRIORITY LIVING INC</td>
<td>33-0141608</td>
<td>501 (C) 3</td>
<td>13,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 77160 CORONA, CA 92877</td>
<td></td>
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<tr>
<td>(11) PRIORITY ONE FOUNDATION</td>
<td>23-2805623</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2200 HAMILTON ST STE 204 ALLENTOWN, PA 1810</td>
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<tr>
<td>(12) PRISSA HEALTH - UPSTATE</td>
<td>81-1723202</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>300 E MBEE AVE STE 302 GREENVILLE, SC 2960</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PRISON DHARMA NETWORK INC PO BOX 206 SOUTH DEERFIELD, MA 1373</td>
<td>04-3270385</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PRISON ENTREPRENEURSHIP PROGRAM 4140 DIRECTORS ROW STE B HOUSTON, TX 77092</td>
<td>20-1384253</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>PRISON FELLOWSHIP MINISTRIES 44180 RIVERSIDE PARKWAY LANDSDOWNE, VA 20176</td>
<td>62-0986294</td>
<td>501 (C) 3</td>
<td>140,830.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>PRISON PET PARTNERSHIP 9601 BUJACICH RD NW GIG HARBOR, WA 98332</td>
<td>91-1487894</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>PRISON POLICY INITIATIVE INC 69 GARFIELD AVE FL 1 EASTHAMPTON, MA 1027</td>
<td>20-3671130</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>PRISON UNIVERSITY PROJECT INC 2165 FRANCISCO BLVD E STE A SAN RAFAEL, CA</td>
<td>20-5606926</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>PRIVATE CITIZEN 1100 MAIN ST STE 2700 KANSAS CITY, MO 64105</td>
<td>47-3700921</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>PRIZMAH CENTER FOR JEWISH DAY SCHOOLS INC 254 W 54TH ST FL 11 NEW YORK, NY 10019</td>
<td>81-1750864</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>PRO ARTS 150 FRANK H OGAWA PLZ OAKLAND, CA 94612</td>
<td>94-2259269</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>PRO KIDS GOLF ACADEMY INC 4085 52ND ST SAN DIEGO, CA 92105</td>
<td>33-0617741</td>
<td>501 (C) 3</td>
<td>12,623.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>PRO PUBLICA INC 155 AVENUE OF THE AMERICAS FL 13 NEW YORK,</td>
<td>14-2007220</td>
<td>501 (C) 3</td>
<td>527,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>PROCLAIMING JUSTICE TO THE NATIONS INC PO BOX 682711 FRANKLIN, TN 37068</td>
<td>20-3144206</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) PROCTOR ACADEMY PO BOX 500 ANDOVER, NH 3216</td>
<td>02-0222179</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) PRODIGAL SONS INC 1609 S BARRINGTON AVE LOS ANGELES, CA 90025</td>
<td>47-4142974</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) PRO-FAMILLE CLINIQUE FONDATION INC 130 N MILL CREEK RD NORVESVILLE, IN 46062</td>
<td>82-3278493</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) PROFESSIONAL ASSOCIATION OF THERAPEUTIC HOR PO BOX 33150 DENVER, CO 80233</td>
<td>23-7169769</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(5) PROFESSIONAL CHILDREN SCHOOL INC 132 W 60TH ST NEW YORK, NY 10023</td>
<td>13-1653277</td>
<td>501 (C) 3</td>
<td>72,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) PROGEORGIA STATE TABLE INC 1530 DEKALB AVE NE STE A ATLANTA, GA 30307</td>
<td>46-1064042</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) PROGRESSIVE ANIMAL WELFARE SOCIETY INC 15305 44TH AVE W LYNNWOOD, WA 98087</td>
<td>91-6073154</td>
<td>501 (C) 3</td>
<td>83,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) PROGRESSIVE CHANGE INSTITUTE 1629 K ST NW STE 300 WASHINGTON, DC 20006</td>
<td>46-1193049</td>
<td>501 (C) 3</td>
<td>225,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) PROGRESSIVES FOR IMMIGRATION REFORM 1701 PENNSYLVANIA AVE NW STE 300 WASHINGTON</td>
<td>26-1634671</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) PROJECT AKILAH INC 3690 W GANDY BLVD S10 TAMPA, FL 33611</td>
<td>26-0770655</td>
<td>501 (C) 3</td>
<td>113,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) PROJECT ALS INC 801 RIVERSIDE DR APT 6G NEW YORK, NY 10032</td>
<td>13-4019464</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) PROJECT ANGEL HEART 4950 WASHINGTON ST DENVER, CO 80216</td>
<td>84-1199481</td>
<td>501 (C) 3</td>
<td>28,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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</table>

<table>
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<tr>
<th>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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</thead>
<tbody>
<tr>
<td>(1) PROJECT AVARY INC</td>
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<td>1623 5TH AVE STE C SAN RAFAEL, CA 94901</td>
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<td>68-0433289</td>
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<td>501 (C) 3</td>
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<tr>
<td>15,400.</td>
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<tr>
<td>FMV</td>
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<tr>
<td>N/A</td>
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<tr>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

| (2) PROJECT BREAD - THE WALK FOR HUNGER INC | (a) Name and address of organization or government |
| 145 BORDER ST EAST BOSTON, MA 2128 | (b) EIN |
| 04-2931195 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 84,305. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (3) PROJECT CAMP INC | (a) Name and address of organization or government |
| 1501 BURNLEY RD SCOTTSVILLE, KY 42164 | (b) EIN |
| 20-1798905 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 10,000. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (4) PROJECT CONCERN INTERNATIONAL | (a) Name and address of organization or government |
| 5151 MURPHY CANYON RD STE 320 SAN DIEGO, CA | (b) EIN |
| 95-2248462 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 51,500. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (5) PROJECT DESTINED INC | (a) Name and address of organization or government |
| 1623 S ST NW WASHINGTON, DC 20009 | (b) EIN |
| 81-3858986 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 10,000. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (6) PROJECT ECHO | (a) Name and address of organization or government |
| IN CARE OF LISA SANDO SANTA MONICA, CA 9040 | (b) EIN |
| 95-4580212 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 7,500. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (7) PROJECT ECHO INC | (a) Name and address of organization or government |
| PO BOX 2764 PRINCE FREDERICK, MD 20678 | (b) EIN |
| 52-1768168 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 29,977. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (8) PROJECT EZRAH NEEDS INC | (a) Name and address of organization or government |
| 95 CEDAR LN STE 12 ENGLEWOOD, NJ 7631 | (b) EIN |
| 56-2513843 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 82,600. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (9) PROJECT FOR PRIDE IN LIVING INC | (a) Name and address of organization or government |
| 1035 E FRANKLIN AVE MINNEAPOLIS, MN 55404 | (b) EIN |
| 23-7232208 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 36,500. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (10) PROJECT GRACE | (a) Name and address of organization or government |
| 2401 WILLOW GLEN DR LANCASTER, PA 17602 | (b) EIN |
| 20-3880845 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 9,100. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (11) PROJECT HEAL - HELP TO EAT ACCEPT & LIVE | (a) Name and address of organization or government |
| IN CARE OF HELFERBELL LLC WASHINGTON, DC 20 | (b) EIN |
| 26-2614278 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 28,700. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

| (12) PROJECT HEALING WATERS FLY FISHING INC | (a) Name and address of organization or government |
| PO BOX 695 LA PLATA, MD 20646 | (b) EIN |
| 61-1518154 | (c) IRC section (if applicable) |
| 501 (C) 3 | (d) Amount of cash grant |
| 27,750. | (e) Amount of non-cash assistance |
| FMV | (f) Method of valuation (book, FMV, appraisal, other) |
| N/A | (g) Description of noncash assistance |
| FOR RECIPIENT'S EXEM |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PROJECT HEALTHY CHILDREN</td>
<td>82-0396815</td>
<td>501 (c) 3</td>
<td>70,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>PROJECT HOME</td>
<td>23-2555950</td>
<td>501 (c) 3</td>
<td>235,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>PROJECT HOPE THE PEOPLE TO PEOPLE HEALTH PO</td>
<td>53-0242962</td>
<td>501 (c) 3</td>
<td>66,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PROJECT HOST INC</td>
<td>57-0728041</td>
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<td>5</td>
<td>PROJECT JOY AND HOPE FOR TEXAS</td>
<td>76-0646721</td>
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<td>7,000.</td>
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<td>6</td>
<td>PROJECT KESHO</td>
<td>20-5484545</td>
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<td>7</td>
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<td>8</td>
<td>PROJECT LYME</td>
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<td>9</td>
<td>PROJECT MEDSEND</td>
<td>75-2470543</td>
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<td>10</td>
<td>PROJECT MOSHIACH AWARENESS INC</td>
<td>11-3435572</td>
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<td>FMV</td>
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<tr>
<td>11</td>
<td>PROJECT ON FAIR REPRESENTATION INC</td>
<td>47-2593047</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>12</td>
<td>PROJECT OPEN HAND</td>
<td>96-3023551</td>
<td>501 (c) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>PROJECT ORBIS INTERNATIONAL INC</td>
<td>23-7297651</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PROJECT PERRY</td>
<td>20-0755481</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PROJECT PROSPER</td>
<td>45-0491407</td>
<td>501 (C) 3</td>
<td>105,000.</td>
<td>FMV</td>
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<tr>
<td>PROJECT RETURN INC</td>
<td>62-1058325</td>
<td>501 (C) 3</td>
<td>75,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PROJECT SUCCESS-Students Undertaking Creative</td>
<td>41-1837278</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>PROJECT SUNSHINE INC</td>
<td>22-3607512</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PROJECT TF</td>
<td>45-5026246</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PROJECT VERITAS</td>
<td>27-2894856</td>
<td>501 (C) 3</td>
<td>162,250.</td>
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<td>PROJECT VICTORY</td>
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<td>FMV</td>
<td>N/A</td>
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<td>PROJECT YECHI</td>
<td>46-4502887</td>
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<td>FMV</td>
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<tr>
<td>PROJECT YECHI</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>PROJECTS FOR A CIVIL SOCIETY</td>
<td>80-0421383</td>
<td>501 (C) 3</td>
<td>7,324.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1 PROKIDS 2605 BURNET AVE CINCINNATI, OH 45219</td>
<td>31-1020021</td>
<td>501 (C) 3</td>
<td>25,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2 PROLIFE ACROSS AMERICA PO BOX 18669 MINNEAPOLIS, MN 55419</td>
<td>41-1654040</td>
<td>501 (C) 3</td>
<td>44,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 PRO-LIFE UNION OF GREATER PHILADELPHIA 88 PENNSYLVANIA AVE ORLANDO, PA 19075</td>
<td>23-2699342</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4 PROLITERACY WORLDWIDE 101 WYOMING ST SYRACUSE, NY 13204</td>
<td>16-6075348</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 PROMISE OF JUSTICE INITIATIVE 636 BARONNE ST NEW ORLEANS, LA 70113</td>
<td>46-1307037</td>
<td>501 (C) 3</td>
<td>250,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 PROMISE PROJECT INC 121 AVENUE OF THE AMERICAS FL 6 NEW YORK, NY</td>
<td>45-1566476</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 PROMISEK INCORPORATED PO BOX 402 BRIDGEWATER, CT 6752</td>
<td>06-0964701</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 PROMISES2KIDS FOUNDATION 9400 RUFFIN CT STE A SAN DIEGO, CA 92123</td>
<td>85-3655288</td>
<td>501 (C) 3</td>
<td>29,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 PROOF MEDIA FOR SOCIAL JUSTICE 33 GROVE ST GREAT BARRINGTON, MA 1320</td>
<td>26-4193646</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10 PROOF SCHOOL 973 MISSION ST SAN FRANCISCO, CA 94103</td>
<td>46-3770194</td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
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<tr>
<td>11 PROPEL SCHOOLS FOUNDATION 3447 E CARSON ST SUITE 200 PITTSBURGH, PA 1</td>
<td>20-1100962</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 PROPRIETORS OF THE BOSTON ATHENAEUM 10 BEACON ST # 12 BOSTON, MA 2108</td>
<td>04-2104852</td>
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<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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   - Yes [ ]  
   - No [X]  

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<tr>
<td>(1) PROSPECT PARK ALLIANCE INC</td>
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<td>501 (C) 3</td>
<td>40,000.</td>
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<td>95 PROSPECT PARK W BROOKLYN, NY 11215</td>
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<tr>
<td>(2) PROSPECT PARK YESHIVA INC</td>
<td>11-6001333</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>1782 E 17TH ST BROOKLYN, NY 11229</td>
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<tr>
<td>1250 4TH ST STE 360 SANTA MONICA, CA 90401</td>
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<tr>
<td>(4) PROTECT DEMOCRACY PROJECT</td>
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<tr>
<td>2020 PENNSYLVANIA AVE NW # 163 WASHINGTON,</td>
<td></td>
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<tr>
<td>(5) PROTECT OUR DEFENDERS FOUNDATION</td>
<td>45-4044997</td>
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<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>950 N WASHINGTON ST ALEXANDRIA, VA 22314</td>
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<tr>
<td>(6) PROTECT OUR PARKS</td>
<td>41-2274083</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3300 N LAKE SHORE DR APT 10 CHICAGO, IL 606</td>
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<tr>
<td>(7) PROTECT OUR WINTERS</td>
<td>20-8474909</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>311 MAPLETON AVE STE 221A BOULDER, CO 80304</td>
<td></td>
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<td></td>
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<tr>
<td>(8) PROTECTION OF THE VIRGIN MARY CHURCH</td>
<td>35-0919331</td>
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<td>13,500.</td>
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<tr>
<td>8600 GRAND BLVD MERRILLVILLE, IN 46410</td>
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<td>(9) PROTECTORS OF THE ENDANGERED</td>
<td>85-0607724</td>
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<tr>
<td>1436 QUEENS RD W CHARLOTTE, NC 28207</td>
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<tr>
<td>(10) EPISCOPAL CATHEDRAL FOUNDATION OF MOUNT SAINT ALBAN WASHINGTON, DC 20016</td>
<td>53-0196604</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) EPISCOPAL CHURCH IN DIOCESE OF A 521 20TH ST N BIRMINGHAM, AL 35203</td>
<td>63-0288860</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>500 DE HARO ST SAN FRANCISCO, CA 94108 94-2816848</td>
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| (12) EPISCOPAL CHURCH IN THE DIOCESE  | 4E1288 1.000

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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<tbody>
<tr>
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</tr>
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<tr>
<td>PO BOX 45589 SAN FRANCISCO, CA 94105</td>
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<td>7932 MOUNTAIN BLVD OAKLAND, CA 94123</td>
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<tr>
<td>333 ELLEN DR SAN RAFAEL, CA 94903</td>
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<tr>
<td>PROTESTANT EPISCOPAL CHURCH OF THE GOOD SHE</td>
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<tr>
<td>123 EAST SECOND STREET MOMENCE, IL 60954</td>
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<td>PROTESTANT EPISCOPAL HIGH SCHOOL IN VIRGINI</td>
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<td>PROTESTANT EPISCOPAL THEOLOGICAL SEMINARY I</td>
<td>54-0505937</td>
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<td>3737 SEMINARY RD ALEXANDRIA, VA 22304</td>
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<td>PROTO-CATHEDRAL OF ST JAMES THE GREAT</td>
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<td>218 W 12TH ST VANCOUVER, WA 98660</td>
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<tr>
<td>12550 AURORA AVE N SEATTLE, WA 98133</td>
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<tr>
<td>PROVERBS 31 MINISTRY INC</td>
<td>56-1989197</td>
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<tr>
<td>720 PARK CENTER DR MATHRENS, NC 28105</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tr>
<td>PROVIDE INC</td>
<td>04-3298538</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PROVIDENCE BAPTIST CHURCH OF RALEIGH INC</td>
<td>46-3009052</td>
<td>501 (C) 3</td>
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<td>PROVIDENCE CATHOLIC HIGH SCHOOL</td>
<td>36-2436117</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PROVIDENCE CHRISTIAN SCHOOL OF TEXAS</td>
<td>75-2247092</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PROVIDENCE CLASSICAL SCHOOL</td>
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<td>501 (C) 3</td>
<td>8,550.</td>
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<td>N/A</td>
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<td>PROVIDENCE COLLEGE</td>
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<td>PROVIDENCE GENERAL FOUNDATION</td>
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<td>PROVIDENCE HOUSE</td>
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<tr>
<td>PROVIDENCE HOUSE INC</td>
<td>11-2594653</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PROVIDENCE MARIANWOOD FOUNDATION</td>
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<td>PROVIDENCE PORTLAND MEDICAL FOUNDATION</td>
<td>93-1231494</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>PROVIDENCE PROMISE 2 REGENCY PLZ STE 4 PROVIDENCE, RI 2903</td>
<td>47-1918920</td>
<td>501 (C) 3</td>
<td>17,000.00</td>
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<tr>
<td>PROVIDENCE REFORMED CHURCH 1700 COIT AVE NE GRAND RAPIDS, MI 49505</td>
<td>38-3177085</td>
<td>501 (C) 3</td>
<td>76,500.00</td>
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<td>PROVIDENCE SCHOOL 3225 CALLE PINON SANTA BARBARA, CA 93105</td>
<td>95-2105233</td>
<td>501 (C) 3</td>
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<td>PROVIDENCE ST MEL SCHOOL 119 S CENTRAL PARK BLVD CHICAGO, IL 60624</td>
<td>36-2977187</td>
<td>501 (C) 3</td>
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<tr>
<td>PROVIDENCE ST VINCENT MEDICAL FOUNDATION 1801 LIND AVE SW RENTON, WA 98057</td>
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<td>25-6028798</td>
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<td>PROVINCE OF ST JOSEPH OF THE CAPUCHIN ORDER 1820 MOUNT ELLIOTT ST DETROIT, MI 48207</td>
<td>38-1525161</td>
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<td>PSI CONTEMPORARY ART CENTER INC 2225 JACKSON AVE LONG ISLAND CITY, NY 11101</td>
<td>23-7379091</td>
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<td>PSC PARTNERS SEEKING A CURE 6900 E BELLEVUE AVE STE 202 GREENWOOD VILL</td>
<td>20-2112635</td>
<td>501 (C) 3</td>
<td>7,000.00</td>
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<td>PSFC 3625 GATEWOOD CT SANTA CRUZ, CA 95065</td>
<td>82-4139859</td>
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<td>PSYCHOPHYSIOLOGIC DISORDERS ASSOCIATION ATTN DAVID D CLARKE 1414 SW 3RD AVE PORTLAND</td>
<td>45-0678253</td>
<td>501 (C) 3</td>
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<td>PTA CALIFORNIA CONGRESS OF PARENTS TEACHERS 25890 W FREMONT RD LOS ALTOS HILLS, CA 9402</td>
<td>94-2937957</td>
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<td>9,625.00</td>
<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Government and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ......................................................... X Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>95-6207525</td>
<td>501 (C) 3</td>
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<td>(2) PTA CALIFORNIA CONGRESS OF PARENTS TEACHERS</td>
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<td>(3) PTA CALIFORNIA CONGRESS OF PARENTS TEACHERS</td>
<td>54-2173518</td>
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<td>FMV</td>
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<td>(4) PTA CALIFORNIA CONGRESS OF PARENTS TEACHERS</td>
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<td>FMV</td>
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<tr>
<td>(5) PTA NEW YORK CONGRESS</td>
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<td>(6) PUBLIC ACTION TO DELIVER SHELTER INC</td>
<td>36-3285644</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(7) PUBLIC ART FUND INC</td>
<td>13-2898805</td>
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<td>(8) PUBLIC BROADCASTING OF COLORADO INC</td>
<td>74-2324052</td>
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<td>FMV</td>
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<td>(9) PUBLIC BROADCASTING SERVICE</td>
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<td>(10) PUBLIC CITIZEN FOUNDATION INC</td>
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<td>(11) PUBLIC CITIZENS FOR CHILDREN AND YOUTH</td>
<td>23-2137461</td>
<td>501 (C) 3</td>
<td>83,650</td>
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<td>(12) PUBLIC HEALTH INSTITUTE</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table ........................................................................

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) PUBLIC HEALTH MANAGEMENT CORPORATION</td>
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<td>FMV</td>
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<tr>
<td>1500 MARKET ST PHILADELPHIA, PA 19102</td>
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<td>(2) PUBLIC JUSTICE FOUNDATION</td>
<td>59-1730478</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1620 L ST NW STE 630 WASHINGTON, DC 20036</td>
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<tr>
<td>(3) PUBLIC MEDIA COMPANY</td>
<td>84-1558401</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>3300 ARAPAHOE AVE BOULDER, CO 80303</td>
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<tr>
<td>(4) PUBLIC MEDIA GROUP OF SOUTHERN CALIFORNIA</td>
<td>95-2211661</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<tr>
<td>2900 WEST ALAMEDA AVE BURBANK, CA 91505</td>
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<td>(5) PUBLIC PREPARATORY NETWORK INC</td>
<td>26-466416</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>192 E 151ST ST FL 5 BRONX, NY 10451</td>
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<tr>
<td>(6) PUBLIC SCHOOL BIBLE STUDY COMMITTEE</td>
<td>62-0523361</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>243 SIGNAL MOUNTAIN RD STE 113 CHATTANOOGA,</td>
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<td>(7) PUBLICOLOR INC</td>
<td>13-3912768</td>
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<td>37,000.</td>
<td>FMV</td>
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<td>20 W 36TH ST FL NEW YORK, NY 10018</td>
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<td>(8) PUBLICSOURCE INC</td>
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<td>1936 5TH AVE PITTSBURGH, PA 15219</td>
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<td>(9) PUEBLO ZOOLOGICAL SOCIETY</td>
<td>84-0723360</td>
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<td>3455 NUCKOLLS AVE PUEBLO, CO 81005</td>
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<td>(10) FUENTE DE LA COSTA SUR</td>
<td>37-1484262</td>
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<td>36,000.</td>
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<td>620 NORTH STREET PESCADERO, CA 94060</td>
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<td>(11) FUENTE HUMAN RIGHTS MOVEMENT</td>
<td>45-3697690</td>
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<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 21837 PHOENIX, AZ 85036</td>
<td></td>
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<td>(12) PUGET SOUND RESTORATION FUND</td>
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<td>501 (C) 3</td>
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<tr>
<td>8001 NE DAY RD W BAINBRIDGE IS, WA 98110</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>PULITZER CENTER ON CRISIS REPORTING</td>
<td>27-0458242</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PULMONARY FIBROSIS FOUNDATION</td>
<td>84-1558631</td>
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<td>11,500.</td>
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<td>N/A</td>
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<tr>
<td>PULMONARY HYPERTENSION ASSOCIATION INC</td>
<td>65-0880021</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PURCHASING SCHOOL</td>
<td>99-0073523</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PUPPIES BEHIND BARS INC</td>
<td>13-3969389</td>
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<td>N/A</td>
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<tr>
<td>PURCELL MARIAN HIGH SCHOOL</td>
<td>31-0671299</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>PURCHASE COLLEGE FOUNDATION</td>
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<td>46,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PURDUE CHRISTIAN CAMPUS HOUSE INC</td>
<td>23-7126799</td>
<td>501 (C) 3</td>
<td>8,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PURDUE RESEARCH FOUNDATION</td>
<td>35-1052049</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PURDUE UNIVERSITY</td>
<td>35-6002041</td>
<td>501 (C) 3</td>
<td>43,010.</td>
<td>FMV</td>
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<td>PURE FREEDOM INC</td>
<td>75-3132513</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PURPOSE PREPARATORY ACADEMY INC</td>
<td>46-0693776</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>PURSUIT 53</td>
<td>0597 JONES ROAD 403 HOUSTON, TX 77065</td>
<td>82-5529431</td>
<td>501 (C) 3</td>
<td>25,000.00</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>PURSUIT OF EXCELLENCE</td>
<td>1249 PINE ST PALO ALTO, CA 94301</td>
<td>77-0054289</td>
<td>501 (C) 3</td>
<td>30,000.00</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>PURSUIT OF EXCELLENCE – SOUTH BAY</td>
<td>34 GLEN RIDGE AVE LOS GATOS, CA 95030</td>
<td>47-4727641</td>
<td>501 (C) 3</td>
<td>40,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>PURSUIT TRANSFORMATION COMPANY INC</td>
<td>4710 AUSTELL PL FL 2 LONG ISLAND CITY, NY 1</td>
<td>61-1652332</td>
<td>501 (C) 3</td>
<td>1,000,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PUSH THE ROCK</td>
<td>PO BOX 95 EMMAPUS, PA 18049</td>
<td>23-2990640</td>
<td>501 (C) 3</td>
<td>13,900.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>PUSHBLACK</td>
<td>700 12TH ST NW STE 700 PMB 90791 WASHINGTON</td>
<td>81-3834388</td>
<td>501 (C) 3</td>
<td>5,500.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>PUSHTMARGIYA VAISHNAV SAMAJ OF SOUTHEAST U</td>
<td>2397 SATELLITE BLVD BUFORD, GA 30518</td>
<td>30-0503643</td>
<td>501 (C) 3</td>
<td>51,345.00</td>
<td>FMV</td>
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<td>8</td>
<td>PUTNAM COUNTY LAND TRUST</td>
<td>PO BOX 36 BREWSTER, NY 10509</td>
<td>23-7058465</td>
<td>501 (C) 3</td>
<td>6,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PUTNEY SCHOOL INC</td>
<td>ELM LEA FARM PUTNEY, VT 5346</td>
<td>03-0179305</td>
<td>501 (C) 3</td>
<td>136,000.00</td>
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<td>10</td>
<td>PYALLUP VALLEY ST FRANCIS HOUSE</td>
<td>PO BOX 156 PYALLUP, WA 98371</td>
<td>91-1621772</td>
<td>501 (C) 3</td>
<td>13,000.00</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>PYBUS MARKET CHARITABLE FOUNDATION</td>
<td>3 N NORTHERN ST WENATCHEE, WA 98801</td>
<td>45-5378877</td>
<td>501 (C) 3</td>
<td>13,000.00</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>PYGMY SURVIVAL ALLIANCE</td>
<td>4248 CHILBERG AVE SW APT 403 SEATTLE, WA 98126</td>
<td>17-0438932</td>
<td>501 (C) 3</td>
<td>29,000.00</td>
<td>FMV</td>
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</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**SCHEDULE I**
(Form 990)

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
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<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>QUAD PREPARATORY SCHOOL 25 PINE ST FL 4 NEW YORK, NY 10005</td>
<td>46-5625622</td>
<td>501 (C) 3</td>
<td>36,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUAKER HOUSE OF FAYETTEVILLE INC 223 HILLSIDE AVE FAYETTEVILLE, NC 28301</td>
<td>23-7080452</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUAKER VOLUNTARY SERVICE INC 1026 PONCE DE LEGN AVE NE ATLANTA, GA 30306</td>
<td>38-3858580</td>
<td>501 (C) 3</td>
<td>83,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUALITY OF LIFE FOUNDATION FOR METROPOLITAN 500 N AKARD ST STE 2600 DALLAS, TX 75201</td>
<td>23-7360214</td>
<td>501 (C) 3</td>
<td>125,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUANTIFIED UNCERTAINTY RESEARCH INSTITUTE 1917 MARTIN LUTHER KING JR WAY BERKELEY, CA</td>
<td>84-3847921</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUARRY KINGDOM DEVELOPMENT 1100 BULVERDE RD BULVERDE, TX 78163</td>
<td>46-5047758</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>QUEEN CITY FELLOWSHIP CHURCH INC 711 PRESSLERY RD CHARLOTTE, NC 28217</td>
<td>27-2748515</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUEEN OF PEACE ACADEMY 10900 SW 24TH AVE GAINESVILLE, FL 32607</td>
<td>59-3686088</td>
<td>501 (C) 3</td>
<td>5,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUEEN OF THE MOST HOLY ROSARY CHURCH PO BOX 3035 BRIDGEHAMPTON, NY 11932</td>
<td>11-2005277</td>
<td>501 (C) 3</td>
<td>14,725.</td>
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<tr>
<td>QUEEN OF THE VALLEY HOSPITAL FOUNDATION PO BOX 2069 NAPA, CA 94558</td>
<td>23-7081153</td>
<td>501 (C) 3</td>
<td>501,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>QUEEN STREET BAPTIST CHURCH 413 E BRAMBLETON AVE NORFOLK, VA 23510</td>
<td>54-0756766</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUEENS COLLEGE FOUNDATION INC 6530 KISSENA BLVD FLUSHING, NY 11367</td>
<td>11-6080521</td>
<td>501 (C) 3</td>
<td>307,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>QUEENS UNIVERSITY OF CHARLOTTE</td>
<td>56-0530003</td>
<td>501 (c) 3</td>
<td>302,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>QUEENS OF MARY CHURCH</td>
<td>22-2447984</td>
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<td>FMV</td>
<td>N/A</td>
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<td>QUEER-ART</td>
<td>37-1705600</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>QUEST SEATTLE WA</td>
<td>91-2071099</td>
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<td>QUESTSCOPE LTD</td>
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<td>84-3837187</td>
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<tr>
<td>QUINCY INSTITUTE FOR RESPONSIBLE STATECRAFT</td>
<td>84-2285143</td>
<td>501 (c) 3</td>
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<td>QUINCY UNIVERSITY CORPORATION</td>
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<td>QUINNIPIAC UNIVERSITY</td>
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<td>501 (c) 3</td>
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<td>QUINNINNESS THEATRE COMPANY</td>
<td>27-0469276</td>
<td>501 (c) 3</td>
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<tr>
<td>QUIVIRA COALITION INC</td>
<td>31-1551770</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>QUOGUE HISTORICAL SOCIETY PO BOX 1207 QUOGUE, NY 11959</td>
<td>11-2409132</td>
<td>501 (C) 3</td>
<td>7,500</td>
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<td>N/A</td>
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<tr>
<td>R C ARCHDIOCESE OF INDIANAPOLIS 1400 N MERIDIAN ST INDIANAPOLIS, IN 46202</td>
<td>35-1018460</td>
<td>501 (C) 3</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>R MERLE PALMER MINORITY SCHOLARSHIP FOUNDATION PO BOX 1119 TACOMA, WA 98417</td>
<td>91-1742581</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY 2540 AMSTERDAM AVE NEW YORK, NY 10033</td>
<td>13-2673756</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>RABBI JACOB JOSEPH SCHOOL 1 PLAINFIELD AVE EDISON, NJ 8817</td>
<td>13-5562257</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>RABBINICAL ORGANIZATION–CHABAD LUBAVITCH IN 1468 UNION ST BROOKLYN, NY 11213</td>
<td>03-0485880</td>
<td>501 (C) 3</td>
<td>53,000</td>
<td>FMV</td>
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<td>RACHELS NETWORK INC 1200 18TH ST NW WASHINGTON, DC 20036</td>
<td>31-1644905</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>RACINE UNIFIED SCHOOL DISTRICT 3109 MOUNT PLEASANT STREET RACINE, WI 53404</td>
<td>39-6031430</td>
<td>501 (C) 3</td>
<td>40,525</td>
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<tr>
<td>RADFORD CITY SCHOOLS PARTNERS FOR EXCELLENCE PO BOX 355 RADFORD, VA 24143</td>
<td>46-1373209</td>
<td>501 (C) 3</td>
<td>12,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RADFORD HIGH SCHOOL FOUNDATION INC PO BOX 2823 RADFORD, VA 24143</td>
<td>54-1386719</td>
<td>501 (C) 3</td>
<td>27,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RADFORD UNIVERSITY FOUNDATION INC PO BOX 6893 RADFORD, VA 24142</td>
<td>23-7219782</td>
<td>501 (C) 3</td>
<td>160,464</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RADHA SOAMI SOCIETY BEAS - AMERICA 4115 GILLESPIE ST FAYETTEVILLE, NC 28306</td>
<td>95-2370885</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

---

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1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RADIANT CHURCH</td>
<td>PO BOX 18371 TAMPA, FL 33679</td>
<td>20-4170894</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>RADICAL INC</td>
<td>1112 EDENTON ST BIRMINGHAM, AL 35242</td>
<td>27-2343084</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>RADIO ARTS FOUNDATION</td>
<td>7711 CARONDELET AVE STE 302 SAINT LOUIS, MO</td>
<td>27-1297885</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>RADIOLOGICAL SOCIETY OF NORTH AMERICA INC</td>
<td>682 JORIE BLVD OAK BROOK, IL 60523</td>
<td>15-0539115</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>RADIUS BOOKS INC</td>
<td>227 E PALACE AVE STE W SANTA FE, NM 87501</td>
<td>14-1997383</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>RADIUS CHURCH</td>
<td>300 W MAIN ST LEXINGTON, SC 29072</td>
<td>20-2164772</td>
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<td>20,000.</td>
<td>FMV</td>
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<tr>
<td>7</td>
<td>RADNOR ABC INC</td>
<td>120 W WAYNE AVE WAYNE, PA 19087</td>
<td>23-7166553</td>
<td>501 (C) 3</td>
<td>43,204.</td>
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<td>N/A</td>
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<td>8</td>
<td>RADY CHILDREN'S HOSPITAL FOUNDATION- SAN DIEGO</td>
<td>3020 CHILDREN'S WAY SAN DIEGO, CA 92123</td>
<td>33-0170626</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>RADY CHILDREN'S HOSPITAL-SAN DIEGO</td>
<td>3020 CHILDREN'S WAY SAN DIEGO, CA 92123</td>
<td>95-1691131</td>
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<td>31,500.</td>
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<td>10</td>
<td>RAFFAELELA BALLET INC</td>
<td>218 W WASHINGTON ST SOUTH BEND, IN 46601</td>
<td>84-3894554</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>RAFFIKI FOUNDATION INCORPORATED</td>
<td>23315 COUNTY ROAD 44A KUSTIS, FL 32736</td>
<td>74-2477089</td>
<td>501 (C) 3</td>
<td>42,200.</td>
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<td>12</td>
<td>RAILS TO TRAILS CONSERVANCY</td>
<td>2121 WARD CT NW FL 5 WASHINGTON, DC 20037</td>
<td>52-1437006</td>
<td>501 (C) 3</td>
<td>131,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAINBOW COMMUNITY CENTER OF CONTRA COSTA COUNTY</td>
<td>68-0375857</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>RAINBOW DAYS INC</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>RAINBOW EXPRESS MINISTRIES</td>
<td>47-1694334</td>
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<td>FMV</td>
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<td>RAINBOW Mennonite Church</td>
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<td>501 (C) 3</td>
<td>6,500.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>RAINBOW PLACE SHELTER FOR HOMELESS WOMEN IN</td>
<td>47-5082306</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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

Schedule I (Form 990) 2020

JSA

OE1288 1,000

18674H 1467 V 20-7.21
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<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<td>FMV</td>
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<td>RAINIER VALLEY FOOD BANK</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
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<td>RAISEDBY US INC</td>
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<td>11,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>RAISING ARROWS FOSTER CARE AND ADOPTION MIN</td>
<td>82-2949216</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>RAJ SAUBHAG SATAND MANDAL USA INC</td>
<td>20-2799776</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>RALEIGH COURT PRESBYTERIAN CHURCH</td>
<td>54-0578600</td>
<td>501 (C) 3</td>
<td>18,500.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RALEIGH RESCUE MISSION INCORPORATED</td>
<td>56-6024168</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>RAMAH DAROM INC</td>
<td>58-2145741</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>RAMAH IN THE ROCKIES</td>
<td>20-4078988</td>
<td>501 (C) 3</td>
<td>52,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAMAKRISHNA FOUNDATION</td>
<td>95-4587617</td>
<td>501 (C) 3</td>
<td>103,001.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>
# SCHEDULE I
## (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [x]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RAMAPO COLLEGE FOUNDATION 505 RAMAPO VALLEY RD MAHWAH, NJ 7430</td>
<td>51-0244756</td>
<td>501 (C) 3</td>
<td>107,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) RAMAZ SCHOOL 60 E 78TH ST NEW YORK, NY 10075</td>
<td>13-1635279</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) RAND CORPORATION PO BOX 2139 SANTA MONICA, CA 90407</td>
<td>95-1958142</td>
<td>501 (C) 3</td>
<td>116,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) RANDALL CHILDRENS HOSPITAL FOUNDATION PO BOX 4484 PORTLAND, OR 97208</td>
<td>93-1314469</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) RANDALLS ISLAND PARK ALLIANCE INC 24 W 61ST FL 4 NEW YORK, NY 10023</td>
<td>13-3787630</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) RANDOLPH COLLEGE 2500 RIVERMONT AVE LYNCHBURG, VA 24503</td>
<td>54-0505941</td>
<td>501 (C) 3</td>
<td>381,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) RANDOLPH-MACON COLLEGE PO BOX 5005 ASHLAND, VA 23005</td>
<td>54-0505940</td>
<td>501 (C) 3</td>
<td>175,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) RANGE OF MOTION PROJECT NFP PO BOX 100915 DENVER, CO 80250</td>
<td>20-2603927</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td></td>
<td>FMV</td>
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<tr>
<td>(9) RANGELEY LAKES HERITAGE TRUST INC 2424 MAIN ST RANGELEY, ME 4970</td>
<td>01-0472641</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) RANSOM EVERGLADES SCHOOL INC 3575 MAIN HWY MIAMI, FL 33133</td>
<td>59-0659070</td>
<td>501 (C) 3</td>
<td>52,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) RAPE ABUSE AND INCEST NATIONAL NETWORK INC 1220 L ST NW WASHINGTON, DC 20005</td>
<td>52-1886511</td>
<td>501 (C) 3</td>
<td>32,900.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) RAPHA HOUSE INTERNATIONAL INC PO BOX 1569 JOPLIN, MO 64802</td>
<td>27-2523416</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

### Employer identification number
23-2888152

## Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAPHAEL COMMUNITY FREE CLINIC INC</td>
<td>74-2819628</td>
<td>501 (C) 3</td>
<td>5,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RAPHAEL HOUSE OF PORTLAND</td>
<td>93-0710963</td>
<td>501 (C) 3</td>
<td>6,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>RAPHAEL HOUSE OF SAN FRANCISCO INC</td>
<td>94-3141608</td>
<td>501 (C) 3</td>
<td>41,560. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAPHAEL VILLAGE</td>
<td>82-1693179</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td>RAPPAHANNOCK BENEVOLENT FUND INC</td>
<td>81-1798549</td>
<td>501 (C) 3</td>
<td>12,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAPPAHANNOCK COMMUNITIES</td>
<td>83-4340990</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAPPAHANNOCK PANTRY INC</td>
<td>45-3813117</td>
<td>501 (C) 3</td>
<td>27,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAPTOR EDUCATION GROUP INC</td>
<td>39-1772318</td>
<td>501 (C) 3</td>
<td>6,100. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAHE INC</td>
<td>23-7380563</td>
<td>501 (C) 3</td>
<td>107,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RARITAN HEADWATERS ASSOCIATION</td>
<td>22-1722944</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RARITAN VALLEY COMMUNITY COLLEGE FOUNDATION</td>
<td>23-7138731</td>
<td>501 (C) 3</td>
<td>19,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RAVENSCROFT SCHOOL INC</td>
<td>56-6001583</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

«Attach to Form 990.»

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

Name of the organization: **VANGUARD CHARITABLE ENDOWMENT PROGRAM**

Employer identification number: **23-2888152**

**Part I**  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | RAVENSWOOD COMMUNITY SERVICES INC  
4550 N HERMITAGE AVE CHICAGO, IL 60640 | 36-4439781 | 501 (C) 3 | 7,750. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | RAVENSWOOD EDUCATION FOUNDATION  
2120 EUCLID AVE EAST PALO ALTO, CA 94303 | 26-0166433 | 501 (C) 3 | 38,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | RAVI ZACHARIAS INTERNATIONAL MINISTRIES  
3755 MANSELL RD ALPHARETTA, GA 30022 | 13-3200719 | 501 (C) 3 | 54,512. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | RAVINIA FESTIVAL ASSOCIATION  
418 SHERIDAN RD HIGHLAND PARK, IL 60035 | 36-6002273 | 501 (C) 3 | 39,636. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | RAYMOND AND MIRIM KLEIN JCC  
10100 JAMISON AVE PHILADELPHIA, PA 19116 | 27-0840848 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | RAYMOND F KRAVIS CENTER FOR THE PERFORMING  
701 OKEECHOBEE BLVD WEST PALM BEACH, FL 334 | 59-2245054 | 501 (C) 3 | 127,605. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | RAZORBACK FOUNDATION INC  
1295 S RAZORBACK RD STE A FAYETTEVILLE, AR | 71-0540644 | 501 (C) 3 | 507,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | RBC MINISTRIES  
3800 KRAFT AVE SE GRAND RAPIDS, MI 49512 | 38-1613981 | 501 (C) 3 | 12,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | RCAB CLERGY BENEFIT FUNDING TRUST  
66 BROOKS DR BRAINTREE, MA 2184 | 45-3995881 | 501 (C) 3 | 50,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | RE SOURCES  
2309 MERIDIAN ST BELLINGHAM, WA 98225 | 91-1243957 | 501 (C) 3 | 94,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | REACH & RESTORE  
4737 COUNTY ROAD 101 MINNETONKA, MN 55345 | 26-2694955 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | REACH BEYOND DOMESTIC VIOLENCE INC  
170 HIGH ST WALTHAM, MA 2453 | 04-2735449 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. REACH COMMUNITY CHURCH 14935 NE 87TH ST STE 160 REDMOND, WA 98052</td>
<td>45-5606409</td>
<td>501 (c) 3</td>
<td>13,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2. REACH GEORGIA FOUNDATION INC 2082 E EXCHANGE PL TUCKER, GA 30084</td>
<td>47-3727250</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3. REACH LITERACY 2101 W 41ST ST SIOUX FALLS, SD 57105</td>
<td>46-0396579</td>
<td>501 (c) 3</td>
<td>5,081.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. REACH OUT AND READ INC 89 SOUTH ST STE 201 BOSTON, MA 2111</td>
<td>04-3481253</td>
<td>501 (c) 3</td>
<td>124,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5. REACH OUT AND READ OF GREATER NEW YORK INC 105 W 86TH STREET SUITE 330 NEW YORK, NY 10</td>
<td>13-4080045</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6. REACH POTENTIAL MOVEMENT 2656 W EL CAMINO REAL APT 1201 MOUNTAIN VIEW</td>
<td>26-2140956</td>
<td>501 (c) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. REACH PREP INC 1 DOCK ST STE 100 STAMFORD, CT 6902</td>
<td>06-1438889</td>
<td>501 (c) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8. REACHING SOULS INTERNATIONAL INC 12625 S PORTLAND AVE OKLAHOMA CITY, OK 7317</td>
<td>73-1019628</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. REACHOUT INC 2648 N CAMPBELL AVE TUCSON, AZ 85719</td>
<td>86-6086733</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. READ ALLIANCE INC EAST BUILDING NEW YORK, NY 10038</td>
<td>13-4091062</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. READER TO READER INC 38 WOODSIDE AVE AMHERST, MA 1002</td>
<td>03-0496901</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12. READERS 2 LEADERS 2800 N HAMPTON RD DALLAS, TX 75212</td>
<td>90-0641325</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I**

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>READING HOSPITAL FOUNDATION</td>
<td>47-3054125</td>
<td>501 (c) 3</td>
<td>100,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>READING IS FUNDAMENTAL INC</td>
<td>52-0976257</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>READING PARTNERS</td>
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<td>296,100.</td>
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<tr>
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<td>7,000.</td>
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<tr>
<td>READING RECREATION COMMISSION</td>
<td>38-3860043</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>READING TERMINAL MARKET CORPORATION</td>
<td>23-2754641</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>READMOND FRIENDSHIP FIRE FIGHTERS ASSOC</td>
<td>38-2317381</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>READEWORKS INC</td>
<td>13-3593812</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>READY BY 21 MENTORING</td>
<td>46-4144129</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>READY FOR READING INC</td>
<td>46-3894551</td>
<td>501 (c) 3</td>
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<td>READY READERS</td>
<td>43-1841631</td>
<td>501 (c) 3</td>
<td>11,611.</td>
<td>FMV</td>
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<tr>
<td>REAGAN LEGACY FOUNDATION</td>
<td>20-8738696</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

**3** Enter total number of other organizations listed in the line 1 table

---

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

Schedule I (Form 990) 2020
## SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<td>REAGLE PLAYERS</td>
<td>51-0213270</td>
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<td>617 LEXINGTON ST WALTHAM, MA 2452</td>
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<td>REAL CHANGE HOMELESS EMPOWERMENT PROJECT</td>
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<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>219 1ST AVE S STE 220 SEATTLE, WA 98104</td>
<td></td>
<td></td>
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<tr>
<td>REAL HOPE FOR HAITI</td>
<td>20-5603302</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>15215 ENDEAVOR DR NORTLEVISVILLE, IN 46060</td>
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<td>REAL LIFE CHRISTIAN CHURCH OF CLEMONT INC</td>
<td>59-2181577</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>1501 STEVES RD CLEMONT, FL 34711</td>
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<td>55,607.</td>
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<td>579 SAN ELIJO ST SAN DIEGO, CA 92106</td>
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<td>REALITY CHECK INC</td>
<td>26-3344553</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>17 TURNPIKE RD JAFFREY, NH 3452</td>
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<td>REALITY SAN FRANCISCO CHURCH</td>
<td>80-0512695</td>
<td>501 (c) 3</td>
<td>103,600.</td>
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<tr>
<td>1504 BRYANT ST SAN FRANCISCO, CA 94103</td>
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<td>REALIZE IMPACT</td>
<td>46-3594732</td>
<td>501 (c) 3</td>
<td>513,130.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>271 WINSLOW WAY E UNIT 11548 BAINBRIDGE ISL</td>
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<td>REALOPTIONS</td>
<td>94-2420673</td>
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<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>1671 THE ALAMEDA STE 101 SAN JOSE, CA 95126</td>
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<tr>
<td>REASONABLE FAITH INC</td>
<td>20-3021684</td>
<td>501 (c) 3</td>
<td>39,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6116 N CENTRAL EXPY STE 1000 DALLAS, TX 752</td>
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<td>REASONS TO BELIEVE</td>
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<td>501 (c) 3</td>
<td>24,100.</td>
<td>FMV</td>
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<tr>
<td>818 S OAK PARK RD COVINA, CA 91724</td>
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<td>REBEL VENTURES</td>
<td>81-1962970</td>
<td>501 (c) 3</td>
<td>22,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 8381 PHILADELPHIA, PA 19101</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. REBUILD METRO INC  
  1129 N CAROLINE ST BALTIMORE, MD 21213  
  23-2671667  
  501 (C) 3  
  8,500. FMV  
  N/A FOR RECIPIENT'S EXEM | 2. REBUILDING TOGETHER DAYTON INC  
  30 S MAIN ST STE B DAYTON, OH 45402  
  31-1457626  
  501 (C) 3  
  50,500. FMV  
  N/A FOR RECIPIENT'S EXEM | 3. REBUILDING TOGETHER HOUSTON  
  PO BOX 15315 HOUSTON, TX 77220  
  76-0027902  
  501 (C) 3  
  41,800. FMV  
  N/A FOR RECIPIENT'S EXEM | 4. REBUILDING TOGETHER NORTH SUBURBAN CHICAGO  
  PO BOX 626 GLENVIEW, IL 60025  
  36-4111206  
  501 (C) 3  
  13,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 5. RECIDIVIZ INC  
  1655 PINE LN PROVO, UT 84604  
  82-5181074  
  501 (C) 3  
  635,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 6. RECLAIM CHILDBOOD INC  
  1288 COLUMBUS AVE 162 SAN FRANCISCO, CA 94133  
  26-3653081  
  501 (C) 3  
  35,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 7. RECONCILIATION MINISTRIES NETWORK INC  
  FOR 2537 CHATTANOOGA, TN 37409  
  62-1781061  
  501 (C) 3  
  10,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 8. RECONSTRUCTIONIST RABBINICAL COLLEGE  
  1299 CHURCH RD WYNCOTE, PA 19095  
  23-1710675  
  501 (C) 3  
  126,700. FMV  
  N/A FOR RECIPIENT'S EXEM | 9. RECOVERY CAFE  
  2022 BOREN AVE SEATTLE, WA 98121  
  91-2158547  
  501 (C) 3  
  15,091. FMV  
  N/A FOR RECIPIENT'S EXEM | 10. RECOVERY CAFE SAN JOSE INC  
  80 S 5TH ST SAN JOSE, CA 95112  
  45-4496745  
  501 (C) 3  
  10,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 11. RECTOR & VISITORS OF THE UNIVERSITY OF VIRG  
  4105 LEWIS AND CLARK DR CHARLOTTESVILLE, VA 2  
  54-6001796  
  501 (C) 3  
  236,000. FMV  
  N/A FOR RECIPIENT'S EXEM | 12. RECTOR CHURCH WARDENS & VESTRYMEN OF CHRIST  
  20 N AMERICAN ST PHILADELPHIA, PA 19106  
  23-1365220  
  501 (C) 3  
  11,000. FMV  
  N/A FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>RECTOR CHURCHWARDENS &amp; VESTRYMEN OF GRACE 802 BROADWAY NEW YORK, NY 10003 13-5562327 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RECTOR CHURCHWARDENS &amp; VESTRYMEN OF ST ANDR 7 SAINT ANDREWS LN GLENNMERE, PA 19343 23-1666720 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>RECTOR WARDENS &amp; VESTRYMEN OF ST MATTHEWS P 1031 BIENVENIDA AVE PACIFIC PALISADES, CA 9 95-1744373 501 (C) 3 19,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>RECTOR WARDENS VESTRY MEN OF ST BARTHOLOMW 325 PARK AVE NEW YORK, NY 10022 13-5651315 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RECTOR WARDENS VESTRYMEN TRINITY CHURCH 33 MERCER ST PRINCETON, NJ 8540 21-0647707 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RED CLOUD INDIAN SCHOOL 100 MISSION DR PINE RIDGE, SD 57770 46-0275071 501 (C) 3 79,150. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RED DOOR PLACE INC 201 W 13TH ST NEW YORK, NY 10011 84-1859955 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RED HOOK ART PROJECT INC 22 COMMERCE ST BROOKLYN, NY 11231 26-6658925 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RED HOOK INITIATIVE 767 HICKS ST BROOKLYN, NY 11231 20-3904662 501 (C) 3 143,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RED MOUNTAIN COMMUNITY CHURCH 6101 E VIRGINIA ST MESA, AZ 85215 86-0650019 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RED ROCKS CHURCH 9132 W BOWLES AVE LITTLETON, CO 80123 90-0141346 501 (C) 3 17,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RED WING FAMILY YMCA 434 MAIN ST RED WING, MN 55066 41-0695614 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<td>REDEEM INTERNATIONAL</td>
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<td>FMV</td>
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<td>REDEEME LUTHERAN CHURCH</td>
<td>39-0972351</td>
<td>501 (C) 3</td>
<td>9,332.</td>
<td>FMV</td>
<td>N/A</td>
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<td>REDEEMER BAPTIST CHURCH</td>
<td>41-0978030</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
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<td>REDEEMER BY THE SEA LUTHERAN CHURCH</td>
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<td>REDEEMER CITY TO CITY</td>
<td>38-3773431</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REDEEMER COVENANT CHURCH OF TULSA</td>
<td>73-1312138</td>
<td>501 (C) 3</td>
<td>47,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REDEEMER FELLOWSHIP</td>
<td>44-0556854</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REDEEMER LUTHERAN CHURCH</td>
<td>42-1075808</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REDEEMER LUTHERAN CHURCH</td>
<td>74-6017253</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REDEEMER LUTHERAN CHURCH</td>
<td>91-0586476</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>REDEEMER PRESBYTERIAN CHURCH</td>
<td>45-2353363</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

#### Part I
General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

#### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) REDEEMER PRESBYTERIAN CHURCH 903 N SAINT MARYS ST SAN ANTONIO, TX 76502 45-0479377 501 (C) 3 57,950. FMV N/A FOR RECIPIENT’S EXEM</td>
<td></td>
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<tr>
<td>(2) REDEEMER PRESBYTERIAN CHURCH INC 1046 MILLER ST WINSTON SALEM, NC 27103 58-1586612 501 (C) 3 25,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<td>(3) REDEEMER PRESBYTERIAN CHURCH OF NEW YORK 150 W 83RD ST NEW YORK, NY 10024 13-3553328 501 (C) 3 142,300. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) REDEEMER TEMPLE 3701 W 64TH AVE ARVADA, CO 80003 84-0604490 501 (C) 3 10,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5) REDEEMER UNITED METHODIST CHURCH 13980 SCHAVEY RD DEWITT, MI 48820 23-7194580 501 (C) 3 11,500. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(6) REDEEMER VALDOSTA 3338L COUNTRY CLUB RD STE 1 PMB 23 VALDOSTA 46-1041094 501 (C) 3 27,566. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(7) REDEEMERS SCHOOL 640 E NORTHSIDE DR JACKSON, MS 39206 46-5743940 501 (C) 3 50,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) REDEMPTION CHAPEL 3900 KENT RD STOW, OH 44224 81-1878103 501 (C) 3 50,500. FMV N/A FOR RECIPIENT’S EXEM</td>
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<td>(9) REDEMPTION CHURCH SEATTLE 2929 NE BLAKELEY ST SEATTLE, WA 98105 47-1942052 501 (C) 3 24,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(10) REDF 101A CLAY ST # 103 SAN FRANCISCO, CA 94111 54-2132153 501 (C) 3 102,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(11) REDFORD CENTER INC 1016 LINCOLN BLVD STE 322 SAN FRANCISCO, CA 46-4549706 501 (C) 3 305,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) REDLANDS CHRISTIAN MIGRANT ASSOCIATION INC 402 W MAIN ST IMMOKALEE, FL 34142 59-1221966 501 (C) 3 14,000. FMV N/A FOR RECIPIENT’S EXEM</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. REDLANDS COMMUNITY MUSIC ASSOCIATION INC</td>
<td>95-6006074</td>
<td>501 (c) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. REDLANDS SEVENTH-DAY ADVENTIST CHURCH</td>
<td>27-0000349</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. REDWOOD CITY EDUCATION FOUNDATION</td>
<td>94-2903141</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. REDWOOD COAST MEDICAL SERVICES INC</td>
<td>94-2395606</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. REDWOOD EMPIRE FOOD BANK</td>
<td>68-0121855</td>
<td>501 (c) 3</td>
<td>105,400.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6. REDWOOD GROW INC</td>
<td>83-4265445</td>
<td>501 (c) 3</td>
<td>220,000.</td>
<td>FMV</td>
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<tr>
<td>7. REDWOOD HIGH SCHOOL FOUNDATION</td>
<td>68-0396973</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>8. REECES RAINBOW INC</td>
<td>20-5466141</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>9. REED INSTITUTE</td>
<td>93-0386908</td>
<td>501 (c) 3</td>
<td>178,161.</td>
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<td>10. REED SCHOOLS FOUNDATION</td>
<td>94-3152375</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>11. REEF ENVIRONMENTAL EDUCATION FOUNDATION INC</td>
<td>65-0270064</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. REEL STORIES TEEN FILMMAKING INC</td>
<td>20-0936377</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>165 HOBART AVE SUMMIT, NJ 7901</td>
<td>23-7335987</td>
<td>501 (C) 3</td>
<td>5,550.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8339 OLD YORK RD ELKINS PARK, PA 19027</td>
<td>23-1365269</td>
<td>501 (C) 3</td>
<td>9,700.</td>
<td>FMV</td>
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<td>826 2ND AVE BLUE BELL, PA 19422</td>
<td>23-6004577</td>
<td>501 (C) 3</td>
<td>29,200.</td>
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<td>115 COMMERCE DR STE E GRAYSLAKE, IL 60030</td>
<td>27-2306841</td>
<td>501 (C) 3</td>
<td>10,260.</td>
<td>FMV</td>
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<tr>
<td>5422 CLINTON BLVD JACKSON, MS 39209</td>
<td>64-0428676</td>
<td>501 (C) 3</td>
<td>16,725.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 3586 LONGVIEW, TX 75606</td>
<td>82-0563114</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 9361 CANTON, OH 44711</td>
<td>34-1965221</td>
<td>501 (C) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5121 CRESTWAY RD STE 105 WINDCREST, TX 7823</td>
<td>74-2436920</td>
<td>501 (C) 3</td>
<td>164,190.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8861 VILLA LA JOLLA DR # 12062 LA JOLLA, CA</td>
<td>84-2743072</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4008 MLK JR WAY SEATTLE, WA 98108</td>
<td>91-1296964</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5705 N LINCOLN AVE CHICAGO, IL 60659</td>
<td>36-3817743</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1800 M ST NW STE 405N WASHINGTON, DC 20036</td>
<td>52-1224516</td>
<td>501 (C) 3</td>
<td>14,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<th>1 (g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>REFUGEPOINT INC 689 MASSACHUSETTS AVENUE 2ND FLOOR CAMBRIDGE 20-2061482 501 (C) 3 60,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REGENERATION 238 E 15TH ST OAKLAND, CA 94606 56-2377174 501 (C) 3 36,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REGENERATION PO BOX 33256 SEATTLE, WA 98113 91-1220704 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENERATION 100 ACADEMY DR MERCERSBURG, PA 17236 23-1365963 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA 1111 FRANKLIN ST FL 6 OAKLAND, CA 94607 94-3067788 501 (C) 3 29,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA 1156 HIGH ST SANTA CRUZ, CA 95064 94-1539563 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA 1 SHIELDS AVE DAVIS, CA 95616 94-6036894 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA AT 2195 HEARST AVE RM 120 BERKELEY, CA 94720 94-6002123 501 (C) 3 1,795,534. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA AT 120 THEORY STE 200 IRVINE, CA 92617 95-2226406 501 (C) 3 227,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REGENTS OF THE UNIVERSITY OF CALIFORNIA AT 9500 GILMAN DR LA JOLLA, CA 92039 95-6006144 501 (C) 3 202,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REGENTS OF THE UNIVERSITY OF MICHIGAN G395 WOLVERINE TOWER LOW RISE ANN ARBOR, MI 38-6006309 501 (C) 3 1,537,452. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REGENTS UNIVERSITY OF CALIFORNIA LOS ANGELES 10920 WILSHIRE BLVD STE 500 LOS ANGELES, CA 95-6006143 501 (C) 3 385,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ◦ Yes ◦ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>REGIONAL EAST TEXAS FOOD BANK</td>
<td>75-2222686</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REGIONAL FOOD BANK OF N E NY INC</td>
<td>22-2470985</td>
<td>501 (C) 3</td>
<td>202,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>REGIONAL FOOD BANK OF NORTHEAST FLORIDA INC</td>
<td>46-5014769</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>REGIONAL FOOD BANK OF OKLAHOMA</td>
<td>72-1100380</td>
<td>501 (C) 3</td>
<td>7,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REGIS CATHOLIC CHURCH AND SCHOOL</td>
<td>38-1689121</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REGIS COLLEGE</td>
<td>04-2104451</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>N/A</td>
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<td>REGIS HIGH SCHOOL</td>
<td>13-1624155</td>
<td>501 (C) 3</td>
<td>95,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REGIS HIGH SCHOOL PROPERTY TRUST</td>
<td>47-4779208</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>REGISTER2VOTE FUND</td>
<td>84-2487707</td>
<td>501 (C) 3</td>
<td>120,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REHABILITATION INSTITUTE OF CHICAGO</td>
<td>36-2256036</td>
<td>501 (C) 3</td>
<td>53,025.</td>
<td>FMV</td>
<td>N/A</td>
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<td>REHEARSAL CLUB</td>
<td>30-1209468</td>
<td>501 (C) 3</td>
<td>21,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>REID PARK ZOOLOGICAL SOCIETY</td>
<td>94-2379052</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table: ........................................
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>(1) REIMAGINE INC</td>
<td>82-2153990</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) REINING HORSE SPORTS FOUNDATION INC</td>
<td>73-1575062</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) REINVENT STOCKTON FOUNDATION</td>
<td>82-1005719</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) REINVESTMENT FUND INC</td>
<td>23-2331946</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) RELEVANT RADIO INC</td>
<td>39-2003067</td>
<td>501 (C) 3</td>
<td>76,781.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) RELIANT MISSION INC</td>
<td>52-1707002</td>
<td>501 (C) 3</td>
<td>74,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) RELIEF INTERNATIONAL INC</td>
<td>95-4300662</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) RELIEF RESOURCES INC</td>
<td>52-2323151</td>
<td>501 (C) 3</td>
<td>21,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) RELIGIOUS FREEDOM INSTITUTE INC</td>
<td>81-0983298</td>
<td>501 (C) 3</td>
<td>114,875.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) RELIGIOUS ZIONIST YOUTH MOVEMENT- BNKI AKIV</td>
<td>13-3713762</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) REMERGE INC</td>
<td>58-2509965</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) REMNANT FELLOWSHIP</td>
<td>62-1797803</td>
<td>501 (C) 3</td>
<td>20,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>REMNANT WESTSIDE CHURCH INC</td>
<td>20-0908096</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>REMOTE AREA MEDICAL</td>
<td>58-1647546</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>RENAL BUMPO THEATRE COMPANY</td>
<td>36-4457137</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENAISSANCE CHARITABLE FOUNDATION INC</td>
<td>35-2129262</td>
<td>501 (C) 3</td>
<td>543,386.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENBROOK SCHOOL INCORPORATED</td>
<td>06-0646702</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>RENEW INTERNATIONAL</td>
<td>22-3346711</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENEWAL CHURCH OF ANDERSON</td>
<td>46-5639953</td>
<td>501 (C) 3</td>
<td>26,420.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENEWAL CITY CHURCH</td>
<td>46-2663669</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENEWAL HOUSE INC</td>
<td>62-1631055</td>
<td>501 (C) 3</td>
<td>255,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENEWAL MINISTRIES INC</td>
<td>39-2385797</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENEWAL OF LIFE INC</td>
<td>90-0772096</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RENO RIVERSIDE DR STE 5 RENO, NV 89503</td>
<td>88-0134279</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<td>Renseelaer Polytechnic Institute</td>
<td>110 8TH ST TROY, NY 12180</td>
<td>14-1340095</td>
<td>501 (C) 3</td>
<td>138,330.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Rent Reporter Inc</td>
<td>215 W 125TH ST RM 413 NEW YORK, NY 10027</td>
<td>83-2693661</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Renton Civic Theatre</td>
<td>PO BOX 1556 RENTON, WA 98057</td>
<td>94-3063688</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Repairers of the Breach Inc</td>
<td>109 N GRAHAM ST STE 100 CHAPEL HILL, NC 275</td>
<td>46-3332424</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Repertory Theatre of St Louis</td>
<td>130 RDGARD RD SAINT LOUIS, MO 63119</td>
<td>43-0970273</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RE-PLATE</td>
<td>PO BOX 11338 OAKLAND, CA 94611</td>
<td>81-1005691</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Reporters Instructed in Saving Colleagues I</td>
<td>PO BOX 141 POUND RIDGE, NY 10576</td>
<td>45-4535775</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>Represent Us Education Fund</td>
<td>296 NONOTUCK STREET FLORENCE, MA 1062</td>
<td>26-3088283</td>
<td>501 (C) 3</td>
<td>467,501.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Republic Schools Nashville</td>
<td>1300 56TH AVE N NASHVILLE, TN 37209</td>
<td>27-3342540</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Rescue–Freedom International</td>
<td>PO BOX 77 KIRKLAND, WA 98083</td>
<td>16-1773392</td>
<td>501 (C) 3</td>
<td>8,340.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Rescue Mission Alliance</td>
<td>315 N A ST OXNARD, CA 93030</td>
<td>23-7278002</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Rescue Mission Alliance of Syracuse N Y</td>
<td>155 GIFFORD ST SYRACUSE, NY 13202</td>
<td>15-0532146</td>
<td>501 (C) 3</td>
<td>60,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(1) RESCUE MISSION OF EL PASO INC</td>
<td>209 N LEE ST EL PASO, TX 79901</td>
<td>74-6062443</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(2) RESCUE MISSION OF ROANOKE, INC.</td>
<td>PO BOX 11525 ROANOKE, VA 24022</td>
<td>54-0573900</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(3) RESCUE MISSION OF TRENTON</td>
<td>PO BOX 990 TRENTON, NJ 8605</td>
<td>21-0656182</td>
<td>501 (C) 3</td>
<td>25,580.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) RESCUE MISSION OF UTICA INC</td>
<td>293 GENESSEE ST UTICA, NY 13501</td>
<td>15-0569359</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5) RESCUE MISSIONS MINISTRIES INC</td>
<td>507 E KNOX ST DURHAM, NC 27701</td>
<td>58-1482590</td>
<td>501 (C) 3</td>
<td>51,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(6) RESCUE NETWORK INC</td>
<td>1804 10TH ST NE BUFFALO, MN 55313</td>
<td>84-3274038</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) RESCUED FOR LIFE INC</td>
<td>16604 E KENT DR AURORA, CO 80013</td>
<td>45-3040231</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) RESCUED PETS MOVEMENT INC</td>
<td>2317 W 34TH ST HOUSTON, TX 77018</td>
<td>46-3708327</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(9) RESEARCH - EVAL - PROMOTING ORG RESPON &amp; TR</td>
<td>PMB 225 1121 N BETHLEHEM PIKE NO SPRING HOU</td>
<td>26-2971061</td>
<td>501 (C) 3</td>
<td>112,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(10) RESEARCH FOUNDATION FOR THE STATE UNIVERSITY</td>
<td>PO BOX 9 ALBANY, NY 12201</td>
<td>14-1368361</td>
<td>501 (C) 3</td>
<td>158,645.</td>
<td>N/A</td>
<td>N/A</td>
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<tr>
<td>(11) RESEARCH FOUNDATION OF THE CITY UNIVERSITY</td>
<td>230 W 41ST ST NEW YORK, NY 10036</td>
<td>13-1988190</td>
<td>501 (C) 3</td>
<td>47,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) RESILIENCE ACTION FUND INC</td>
<td>441 NE 52ND ST MIAMI, FL 33137</td>
<td>47-3369805</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>RESILIENCE EDUCATION PO BOX 4631 CHARLOTTESVILLE, VA 22905 46-1134670 501 (C) 3</td>
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<td>501 (C) 3</td>
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<td>RESOLUTION PROJECT INC 420 LEXINGTON AVE RM 1626 # 27 NEW YORK, NY 26-4394051</td>
<td>501 (C) 3</td>
<td>145,000</td>
<td>FMV</td>
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<td>RESONANCE VOCAL ENSEMBLE 5331 SW MACADAM AVE STE 258 PORTLAND, OR 97</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>RESONATE CHURCH 40650 ENCYCLOPEDIA CIR FREMONT, CA 94538</td>
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<td>50,000</td>
<td>FMV</td>
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<td>RESOURCE EXCHANGE INTERNATIONAL INC 5527 N UNION BLVD STE 200 COLORADO SPRINGS</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<td>100,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RESOURCES FOR HUMAN DEVELOPMENT INC 4700 WISSAMICKON AVE STE 126 PHILADELPHIA,</td>
<td>23-1271333</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RESOURCES FOR THE FUTURE INC 1616 P ST NW WASHINGTON, DC 20036</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
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<tr>
<td>RESOURCING CHRISTIAN EDUCATION INTERNATIONAL PO BOX 4528 WHEATON, IL 60189</td>
<td>501 (C) 3</td>
<td>37,870</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>RESPIRATORY HEALTH ASSOCIATION 1440 W WASHINGTON BLVD CHICAGO, IL 60607</td>
<td>501 (C) 3</td>
<td>34,595</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RESPIRE MINISTRIES PO BOX 58245 LAFAYETTE, LA 70505</td>
<td>501 (C) 3</td>
<td>22,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:

3. Enter total number of other organizations listed in the line 1 table:

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .......................................................... Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RESPOND INC</strong>&lt;br&gt; PO BOX 555 SOMERVILLE, MA 2143</td>
<td>51-0163763</td>
<td>501 (C) 3</td>
<td>7,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTAURANT GIVING CIRCLE INC</strong>&lt;br&gt; PO BOX 15446 ATLANTA, GA 30333</td>
<td>84-3837166</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTAURANT WORKERS COMMUNITY FOUNDATION INC</strong>&lt;br&gt; 575 GRAND ST APT E1507 NEW YORK, NY 10002</td>
<td>82-2737963</td>
<td>501 (C) 3</td>
<td>43,360. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTLESS BOOKS INC</strong>&lt;br&gt; 232 3RD ST STE A101 BROOKLYN, NY 11215</td>
<td>81-4890403</td>
<td>501 (C) 3</td>
<td>8,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTON BIBLE CHURCH</strong>&lt;br&gt; 45650 OAKBROOK CT STERLING, VA 20166</td>
<td>51-0214114</td>
<td>501 (C) 3</td>
<td>9,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTON COMMUNITY CHURCH</strong>&lt;br&gt; PO BOX 2254 RESTON, VA 20195</td>
<td>20-8699320</td>
<td>501 (C) 3</td>
<td>12,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTORATION ACADEMY INC</strong>&lt;br&gt; PO BOX 30 FAIRFIELD, AL 35064</td>
<td>63-1158984</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTORATION COMMUNITY CHURCH</strong>&lt;br&gt; 11971 BORMAN DR SAINT LOUIS, MO 63146</td>
<td>83-2088139</td>
<td>501 (C) 3</td>
<td>15,500. FMV</td>
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<tr>
<td><strong>RESTORATION COMMUNITY CHURCH OF NAPERVILE</strong>&lt;br&gt; 2346 KEIM RD NAPERVILE, IL 60565</td>
<td>27-2401434</td>
<td>501 (C) 3</td>
<td>55,800. FMV</td>
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<td><strong>RESTORATION FARM MINISTRIES</strong>&lt;br&gt; 2815 W COURTHOUSE RD CREWE, VA 23930</td>
<td>47-3377408</td>
<td>501 (C) 3</td>
<td>25,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>RESTORATION GENERATION INC</strong>&lt;br&gt; PO BOX 91405 SIoux FALLS, SD 57109</td>
<td>27-1864860</td>
<td>501 (C) 3</td>
<td>20,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>RESTORATION HOUSING</strong>&lt;br&gt; 1116 MAIN STREET NO STEB ROANOKE, VA 24015</td>
<td>47-1045682</td>
<td>501 (C) 3</td>
<td>7,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table ..........................................................
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. RESTORATION MINISTRIES 4452 TERRACE VIEW LN ROCKFORD, IL 61114</td>
<td>36-3896969</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
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<tr>
<td>2. RESTORATION PRESBYTERIAN CHURCH 2109 TEROX TRCE DACULA, GA 30019</td>
<td>20-0183821</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. RESTORATION ROAD CHURCH 102 AVENUE D SNOWMIS, WA 98290</td>
<td>47-3619992</td>
<td>501 (C) 3</td>
<td>11,440.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. RESTORATIVE JUSTICE FOR OAKLAND YOUTH 173 FIFTH ST OAKLAND, CA 94607</td>
<td>84-5154317</td>
<td>501 (C) 3</td>
<td>155,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. RESTORATIVE JUSTICE PROJECT OF THE MIDCOAST 39A SPRING ST BELFAST, ME 4915</td>
<td>26-1508416</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. RESTORE HOPE DIGNITY LIFE 244 KUWAIT WAY PACHECO, CA 94553</td>
<td>90-0842884</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. RESTORE HOPE MINISTRIES INC 2900 CHARLES PAGE BLVD TULSA, OK 74127</td>
<td>73-1037026</td>
<td>501 (C) 3</td>
<td>5,888.</td>
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<tr>
<td>8. RESTORE INTERNATIONAL 20 W 46TH ST APT 2B NEW YORK, NY 10005</td>
<td>20-0417128</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
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<tr>
<td>9. RESTORE NYC INC 20 W 46TH ST APT 2B NEW YORK, NY 10005</td>
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<tr>
<td>10. RESULTS EDUCATIONAL FUND INC 1101 15TH ST NW WASHINGTON, DC 20005</td>
<td>95-3747267</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<tr>
<td>11. RESURRECT LIFE FULL GOSPEL CHURCH 145 N WOLFE RD SUNNYVALE, CA 94086</td>
<td>23-7297770</td>
<td>501 (C) 3</td>
<td>355,500.</td>
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<td>12. RESURRECTION LIFE FULL GOSPEL CHURCH 5100 IVANSTRAVE AVE SW WYOMING, MI 49418</td>
<td>23-7025391</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4424 SUTHERLAND AVE KNOXVILLE, TN 37919</td>
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<td>RETHINK CHARITY</td>
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<td>130,500.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>RETHINK FOOD NYC INC</td>
<td>82-1632259</td>
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<td>52,000.</td>
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<td>FMV</td>
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<tr>
<td>63 FLUSHING AVE STE 1 BROOKLYN, NY 11205</td>
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<td>RETHINK PRIORITIES</td>
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<td>10,000.</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
**(Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>REYNOLDA HOUSE INC 2250 REYNOLDA RD WINSTON SALEM, NC 27106 56-0810676 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>REYNOLDS HOCKEY ACADEMY 12318 THORNTONHALL DR RICHMOND, TX 77407 36-4859538 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RHEMA BIBLE CHURCH 1025 W KENOSHA ST BROKEN ARROW, OK 74012 75-1226882 501 (C) 3 112,088. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RHEUMATOLOGY RESEARCH FOUNDATION 2200 LAKE BLVD NE BROOKHAVEN, GA 30319 58-1654301 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RHINELANDER AREA SCHOLARSHIP FOUNDATION INC 3005 S RIVER RD RHINELANDER, WI 54501 39-1716463 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RHODE ISLAND ARTS FOUNDATION AT NEWPORT INC 3005 RI 2840 PO BOX 3303 NEWPORT, RI 2840 05-0319134 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>RHODE ISLAND COMMUNITY FOOD BANK ASSOCIATION 200 NINATIC AVE PROVIDENCE, RI 2907 05-0395601 501 (C) 3 41,960. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>RHODORA J DONAHUE ACADEMY INC 4995 SETON WAY AVE MARIA, FL 34142 90-0530583 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

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Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>RHONDA WALKER FOUNDATION, PO BOX 251746 WEST BLOOMFIELD, MI 48325</td>
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<td>RIA HOUSE INC, 330 COCHITuate RD UNIT 1788 FRAMINGHAM, MA</td>
<td>46-2837911</td>
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<td>RICK VOELKER FUND FOR RECOVERY, 400 MAGAZINE ST STE 200 NEW ORLEANS, LA 701</td>
<td>20-3437711</td>
<td>501 (C) 3</td>
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<td>RICHARD J CARON FOUNDATION, PO BOX 150 WERNERSVILLE, PA 19565</td>
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<td>RICHLAND COUNTY FOUNDATION OF MANSFIELD, 181 S MAIN ST MANSFIELD, OH 44902</td>
<td>34-0872883</td>
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<td>FMV</td>
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<td>RICHMOND ANIMAL LEAGUE INC, 11401 INTERNATIONAL DR NORTH CHESTERFIELD, VA</td>
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<td>RICHMOND CENTER FOR CHRISTIAN STUDY, 6243 RIVER RD STE 1 HENRICO, VA 23229</td>
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</table>

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SCHEDULE I  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  

Attach to Form 990.  

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

Name of the organization  

VANGUARD CHARITABLE ENDOWMENT PROGRAM  

Employer identification number  

23-2888152  

Part I  

General Information on Grants and Assistance  

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

☐ Yes ☐ No  

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  

Part II  

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.  

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(6) RIDGEFIELD ACADEMY INC</td>
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<td>(7) RIDGEFIELD LIBRARY ASSOCIATION INC</td>
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<td>472 MAIN ST RIDGEFIELD, CT 6077</td>
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<td>(8) RIEKES CENTER FOR HUMAN ENHANCEMENT</td>
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<td>1507 JOHNSON FERRY RD STE 100 MARIETTA, GA</td>
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<td>(10) RIGHT SHARING OF WORLD RESOURCES INC</td>
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<td>101 QUAKER HILL DR RICHMOND, IN 47374</td>
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<td>(11) RILEYS WISH FOUNDATION INC</td>
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<td>400 GROOMS RD FAYETTEVILLE, GA 30215</td>
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<td>(12) RIO SALADO ROWING CLUB INC</td>
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<tr>
<td>PO BOX 1555 TEMPE, AZ 85280</td>
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Schedule I (Form 990) 2020

JSA

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V 20-7.21
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **[☐] Yes**  
   - **[☐] No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1)</td>
<td>RIORDAN CLINIC INC</td>
<td>48-0840415</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
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<td>(2)</td>
<td>RIPE FOR HARVEST WORLD OUTREACH</td>
<td>20-2322235</td>
<td>501 (C) 3</td>
<td>9,500.</td>
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<td>RIPOST COLLEGE BOARD OF TRUSTEES OF</td>
<td>39-0826049</td>
<td>501 (C) 3</td>
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<td>(4)</td>
<td>RIPLE OF ONE INC</td>
<td>80-0602523</td>
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<td>(5)</td>
<td>RIPPENWAM CIESQUA SCHOOL INC</td>
<td>13-1740435</td>
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<td>(6)</td>
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<td>16-1541024</td>
<td>501 (C) 3</td>
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<td>RISE EDUCATION FUND</td>
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<td>RISE INCORPORATED</td>
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<td>(10)</td>
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<td>83-3513547</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990) 2020**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

*Attach to Form 990.*

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>RISING CHURCH</td>
<td>1752 AMERICAN WALK LAWRENCEVILLE, GA 30043</td>
<td>46-0887041</td>
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<td>67,808.</td>
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<td>2</td>
<td>RISING STAR OUTREACH INC</td>
<td>3305 N UNIVERSITY AVE STE 250 PROVO, UT 846</td>
<td>02-0532420</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>RISING TIDE INTERNATIONAL INC</td>
<td>5102 SWIFT RD SARASOTA, FL 34231</td>
<td>65-1092932</td>
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<td>107,025.</td>
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<td>4</td>
<td>RITE OF PASSAGE JOURNEYS</td>
<td>4018 224TH ST SE BOTHELL, WA 98021</td>
<td>35-2283871</td>
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<td>15,000.</td>
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<td>54-1511892</td>
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<td>20,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>RIVER ALLIANCE OF WISCONSIN INC</td>
<td>345 W WASHINGTON AVE STE 304 MADISON, WI 53</td>
<td>39-1792143</td>
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<td>8,750.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>RIVER BEND FOOD RESERVOIR</td>
<td>4010 KIMMEL DR DAVENPORT, IA 52802</td>
<td>36-3147342</td>
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<td>15,000.</td>
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<td>8</td>
<td>RIVER CHURCH OF THE SOUTH BAY</td>
<td>3525 LOMITA BLVD STE 200 TORRANCE, CA 90505</td>
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<td>9</td>
<td>RIVER CITY FOOD BANK</td>
<td>1800 28TH ST SACRAMENTO, CA 95816</td>
<td>91-1851398</td>
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<td>10</td>
<td>RIVER FOOD PANTRY</td>
<td>2201 DARWIN RD MADISON, WI 53704</td>
<td>20-4179749</td>
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<td>22,300.</td>
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<td>11</td>
<td>RIVER FUND NEW YORK INC</td>
<td>8911 LEFFERTS BLVD RICHMOND HILL, NY 11418</td>
<td>11-3450363</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>RIVER HOSPITAL INC</td>
<td>4 FULLER ST ALEXANDRIA BAY, NY 13607</td>
<td>81-0600548</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
## (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Name of the organization**

**Employer identification number**

VANGUARD CHARITABLE ENDOWMENT PROGRAM 23-2888152

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### Part I

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>RIVER OF LIFE CHRISTIAN CHURCH</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PO BOX 385 GUILDERLAND, NY 12084</td>
<td>20-3420513</td>
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<td>9,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 37939 HONOLULU, HI 96837</td>
<td>99-0253651</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>RIVER OF LIFE SCHOOL</td>
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<td>FMV</td>
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<td>RIVER OF LIFE TABERNACLE INC</td>
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<td>FMV</td>
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<td>3210 BUNKER LAKE BLVD NW ANDOVER, 55304</td>
<td>41-1437200</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>RIVERDALE COUNTRY SCHOOL INC</td>
<td>5250 FIELDSTON RD BRONX, NY 10471</td>
<td>13-1740483</td>
<td>176,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table .......................................................... ▶

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   - No [ ]  

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<tr>
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<td>3. RIVERDALE SCHOOL FOUNDATION 500 15TH AVE BRONX, NY 10463 66-1368878 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. RIVERDALE YOUTH CENTER 740 15TH AVE BRONX, NY 10463 66-1368878 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>5. RIVERFRONT RECAPTURE INC 50 COLUMBUS BLVD HARTFORD, CT 06106 06-1045653 501 (C) 3 21,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6. RIVERKEEPER INC 20 SECOR RO OSSINING, NY 10562 13-3204621 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7. RIVERS SCHOOL CORPORATION 333 WINTER ST WESTON, MA 02493 06-2104457 501 (C) 3 38,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>8. RIVERSIDE ARTS CENTER FOUNDATION INC 76 N HURON ST YPSILANTI, MI 48197 38-3328817 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>9. RIVERSIDE COMMUNITY CARE INC 270 BRIDGE ST STE 301 DEDHAM, MA 02026 04-3097170 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10. RIVERSIDE EDUCATIONAL CENTER PO BOX 4367 GRAND JUNCTION, CO 81502 20-5451295 501 (C) 3 35,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>11. RIVERSIDE MILITARY ACADEMY INC 2001 RIVERSIDE DR GAINESVILLE, GA 30501 58-0616994 501 (C) 3 31,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>12. RIVERSIDE PARK CONSERVANCY INC 475 RIVERSIDE DR STE 455 NEW YORK, NY 10015 13-3443825 501 (C) 3 72,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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   - **No**

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<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2</td>
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<td>16,500</td>
<td>FMV</td>
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<td>33-0374018</td>
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<td>5</td>
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<td>RIVERTREE CHURCH</td>
<td>63-1199744</td>
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<td>36-2911588</td>
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<td>RMHC CTMA</td>
<td>04-2971480</td>
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<tr>
<td>10</td>
<td>RMHC OF WESTERN NEW YORK INC</td>
<td>22-2438912</td>
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<td>7,000</td>
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<td>11</td>
<td>ROAD TO EMMAUS CHURCH</td>
<td>47-4051760</td>
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<td>FMV</td>
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<tr>
<td>12</td>
<td>ROADIE CLINIC INC</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>ROADS TO LIFE TANZANIA INC</td>
<td>26-2554449</td>
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<td>5</td>
<td>ROBBINSVILLE UNITED METHODIST CHURCH</td>
<td>56-0940986</td>
<td>501 (C) 3</td>
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<td>64-0536105</td>
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<td>6,000.</td>
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<td>8</td>
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<td>74-1652136</td>
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<td>13,000.</td>
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<td>36-3689171</td>
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<td>20,325.</td>
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<td>11</td>
<td>ROBERT W WOODRUFF ARTS CENTER INC</td>
<td>58-0633971</td>
<td>501 (C) 3</td>
<td>58,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ROBERTO CLEMENITE-SANTA ANA HEALTH CLINIC IN</td>
<td>71-0926873</td>
<td>501 (C) 3</td>
<td>6,821.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Name of the organization:** VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number:** 23-2888152

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROBIN HOOD FOUNDATION 826 BROADWAY PL 9 NEW YORK, NY 10003</td>
<td>13-3441066</td>
<td>501 (C) 3</td>
<td>616,290.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROC CHARLOTTE INC 1335 ALLEGRENY ST CHARLOTTE, NC 28208</td>
<td>82-3547898</td>
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<td>25,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ROC USA LLC 6 LOUDON RD STE 501 CONCORD, NH 3301</td>
<td>35-2319441</td>
<td>501 (C) 3</td>
<td>1,250,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROCHESTER AREA COMMUNITY FOUNDATION 500 EAST AVE ROCHESTER, NY 14607</td>
<td>23-7250641</td>
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<td>35,080.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROCHESTER AREA CRIME STOPPERS INC PO BOX 92208 ROCHESTER, NY 14692</td>
<td>16-1190497</td>
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<td>FMV</td>
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<td>ROCHESTER INSTITUTE OF TECHNOLOGY 46 LOMB MEMORIAL DR ROCHESTER, NY 14623</td>
<td>16-0743140</td>
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<td>58,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROCHESTER LAND TRUST INC PO BOX 337 ROCHESTER, MA 2770</td>
<td>04-3330724</td>
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<td>ROCHESTER PHILHARMONIC ORCHESTRA INC 255 EAST AVE ROCHESTER, NY 14604</td>
<td>16-0765613</td>
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<td>ROCHESTER REGIONAL HEALTH 100 KINGS HWY S ROCHESTER, NY 14617</td>
<td>47-1234999</td>
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<td>ROCHESTER REGIONAL HEALTH FOUNDATION 100 KINGS HWY S STE 2300 ROCHESTER, NY 1461</td>
<td>22-2229425</td>
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<td>30,000.</td>
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<td>ROCK AND ROLL HALL OF FAME AND MUSEUM INC 1100 ROCK AND ROLL BLVD CLEVELAND, OH 44114</td>
<td>15-0672095</td>
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<td>15,000.</td>
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<td>FMV</td>
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<td>ROCK CITY CHURCH 4311 ANSON DR HILLIARD, OH 43026</td>
<td>27-2242524</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

**Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**  
**Enter total number of other organizations listed in the line 1 table.**  

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990 Part IV, line 21. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. ROCK CREEK BAPTIST CHURCH</td>
<td>2009 ROCK CREEK RD, CROWLEY, TX 76036</td>
<td>75-1955283 501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2. ROCK CREEK CONSERVANCY INC</td>
<td>7200 WISCONSIN AVE, STE 500, BETHESDA, MD 208</td>
<td>20-3874333 501 (C) 3</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3. ROCK OF AGES LUTHERAN BRETHREN CHURCH</td>
<td>315 S 70TH ST, SEATTLE, WA 98103</td>
<td>91-6058676 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4. ROCK RIVER VALLEY FOOD Pantry</td>
<td>421 S ROCKTON AVE, ROCKFORD, IL 61102</td>
<td>36-3135643 501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. ROCK THE VOTE</td>
<td>1440 G ST NW, WASHINGTON, DC 20005</td>
<td>02-0767157 501 (C) 3</td>
<td>38,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. ROCKBRIDGE ACADEMY INC</td>
<td>680 EVERGREEN RD, CROWNSVILLE, MD 20132</td>
<td>52-1937967 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7. ROCKFELLER FAMILY FUND INC</td>
<td>475 RIVERSIDE DR, RM 900, NEW YORK, NY 10115</td>
<td>13-6257658 501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8. ROCKFELLER PHILANTHROPY ADVISORS INC</td>
<td>6 W 48TH ST FL, NEW NEW YORK, NY 10036</td>
<td>13-3615533 501 (C) 3</td>
<td>1,145,000.</td>
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<td>9. ROCKFELLER UNIVERSITY</td>
<td>1230 YORK AVE, NEW YORK, NY 10065</td>
<td>13-1624158 501 (C) 3</td>
<td>606,000.</td>
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<tr>
<td>10. ROCKETSHIP EDUCATION</td>
<td>350 TWIN DOLPHIN DR, STE 109, REDWOOD CITY, CA</td>
<td>20-4040597 501 (C) 3</td>
<td>113,200.</td>
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<tr>
<td>11. ROCKFORD AREA PREGNANCY CARE CENTER</td>
<td>4108 MORSAY DR, ROCKFORD, IL 61017</td>
<td>36-3209584 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>12. ROCKFORD COMMUNITY SERVICE CENTER</td>
<td>10075 NORTHLAND DR, NE, ROCKFORD, MI 49341</td>
<td>38-2066893 501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Schedule I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**: VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**: 23-2888152

---

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>ROCKFORD RESCUE MISSION MINISTRIES</td>
<td>715 W STATE ST ROCKFORD, IL 61102</td>
<td>36-6132381</td>
<td>501 (C) 3</td>
<td>55,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ROCKFORD UNIVERSITY</td>
<td>5050 E STATE ST ROCKFORD, IL 61108</td>
<td>36-2167842</td>
<td>501 (C) 3</td>
<td>63,000.</td>
<td>FMV</td>
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<tr>
<td>3</td>
<td>ROCKHURST HIGH SCHOOL</td>
<td>9301 STATE LINE RD KANSAS CITY, MO 64114</td>
<td>44-0662501</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>ROCKING THE BOAT INC</td>
<td>812 EDGEmEADRD BRONX, NY 10474</td>
<td>13-4177814</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ROCKLAND FARM ALLIANCE INC</td>
<td>220 S LITTLE TOR RD NEW CITY, NY 10956</td>
<td>27-1495030</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>ROCKLAND INDEPENDENT LIVING CENTER</td>
<td>2290 PALISADES CENTER DR WEST NYACK, NY 109</td>
<td>06-1227289</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>7</td>
<td>ROCKLAND MEMORIAL COMMUNITY CHURCH</td>
<td>17 S. MOUNT VERNON COUNTRY CLUB ROAD GOLDEN</td>
<td>84-0565102</td>
<td>501 (C) 3</td>
<td>35,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>ROCKPOINT CHURCH</td>
<td>5825 KELVIN AVE N LAKE ELMO, MN 55042</td>
<td>41-6111326</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>ROCKPOINTE CHURCH</td>
<td>4503 CROSS TIMBERS RD FLOWER MOUND, TX 7502</td>
<td>01-0583838</td>
<td>501 (C) 3</td>
<td>79,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>ROCKPORT ART ASSOCIATION INC</td>
<td>638 E MARKET ST ROCKPORT, TX 78382</td>
<td>74-1652612</td>
<td>501 (C) 3</td>
<td>11,325.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>ROCKVILLE UNITED METHODIST CHURCH INC</td>
<td>142 GROVE ST VERNON ROCKVILLE, CT 6066</td>
<td>06-1283681</td>
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<td>13,350.</td>
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<td>12</td>
<td>ROCKY BAYOU CHRISTIAN SCHOOL INCORPORATED</td>
<td>277 MAVA AVE NICEVILLE, FL 32578</td>
<td>59-1488143</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>2</td>
<td>ROCKY MOUNTAIN CHILDREN'S HEALTH FOUNDATION</td>
<td>26-3839761</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>ROCKY MOUNTAIN CONSERVANCY</td>
<td>84-0472090</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ROCKY MOUNTAIN DOWN SYNDROME ASSOCIATION IN</td>
<td>74-2237307</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ROCKY MOUNTAIN ELK FOUNDATION INC</td>
<td>81-0421425</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>ROCKY MOUNTAIN IMMIGRANT ADVOCACY NETWORK</td>
<td>84-1565542</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>7</td>
<td>ROCKY MOUNTAIN INSTITUTE</td>
<td>74-2244146</td>
<td>501 (C) 3</td>
<td>55,000.</td>
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<td>8</td>
<td>ROCKY MOUNTAIN PLANNED PARENTHOOD INC</td>
<td>84-0404253</td>
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<td>57,900.</td>
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<td>84-0510785</td>
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<td>31,100.</td>
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<td>10</td>
<td>ROCKY MOUNTAIN RIDING THERAPY</td>
<td>31-1528971</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>11</td>
<td>RODALE INSTITUTE</td>
<td>23-7206884</td>
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<td>FMV</td>
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<td>12</td>
<td>RODEPH SHALOM CONGREGATION</td>
<td>23-1365228</td>
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<td>13</td>
<td>ROESSLER-CRADWICK FOUNDATION</td>
<td>95-0615438</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>ROFEH CHOLIM CANCER SOCIETY INC</td>
<td>762 BEDFORD AVE BROOKLYN, NY 11205</td>
<td>11-3355081</td>
<td>501 (C) 3</td>
<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROGER BALDWIN FOUNDATION OF ACLU INC</td>
<td>150 N MICHIGAN AVE STE 600 CHICAGO, IL 60601</td>
<td>36-2682569</td>
<td>501 (C) 3</td>
<td>12,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROGER H STRAIT MEMORIAL FOUNDATION INC</td>
<td>PO BOX 2114 GOSHEN, WI 54903</td>
<td>46-4051226</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROGER WILLIAMS UNIVERSITY</td>
<td>1 OLD FERRY RD BRISTOL, RI 02809</td>
<td>05-0277222</td>
<td>501 (C) 3</td>
<td>12,613.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROGERSVILLE PUBLIC LIBRARY</td>
<td>74 BANK STREET ROGERSVILLE, AL 35652</td>
<td>63-6004553</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROGUE THEATRE</td>
<td>300 E UNIVERSITY BLVD TUCSON, AZ 85705</td>
<td>20-2501781</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>ROGUE VALLEY MANOR MEMORIAL FOUNDATION</td>
<td>1200 MIRA MAR AVE MEDFORD, OR 97504</td>
<td>93-0712867</td>
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<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ROGUE VALLEY UNITARIAN FELLOWSHIP</td>
<td>87 4TH ST ASHLAND, OR 97520</td>
<td>83-6090798</td>
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<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROLAND PARK COUNTRY SCHOOL INC</td>
<td>5204 ROLAND AVE BALTIMORE, MD 21210</td>
<td>52-0591631</td>
<td>501 (C) 3</td>
<td>64,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ROLE MODEL MOVEMENT INC NFP</td>
<td>8035 S WABASH AVE CHICAGO, IL 60619</td>
<td>46-2272700</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ROLL WITH COLE NFP</td>
<td>9142 STEPHENS MANOR DR MECHANICSVILLE, VA 23111</td>
<td>81-3963572</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ROLLING HARVEST FOOD RESCUE</td>
<td>3920 RIVER RD LUMBERTVILLE, PA 18933</td>
<td>27-4630639</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (Yes) (No)  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<td>ROLLING HILLS COMMUNITY CHURCH INC</td>
<td>32-0029492</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1810 COLUMBIA AVE STE 100 FRANKLIN, TN 3706</td>
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<tr>
<td>ROLLING HILLS COVENANT CHURCH ROLLING HILLS</td>
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<td>FMV</td>
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<td>2222 PALOS VERDES DR N ROLLING HILLS ESTATE</td>
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<td>ROLLING HILLS UNITED METHODIST CHURCH</td>
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<td>FMV</td>
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<tr>
<td>26438 CRENSHAW BLVD PALOS VERDES PENINSULA,</td>
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<tr>
<td>1000 HOLT AVE # 2715 WINTER PARK, FL 32789</td>
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<tr>
<td>ROMAN ARCHBISHOP OF LOS ANGELES A CORPORATI</td>
<td>95-1642382</td>
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<td>66 BROOKS DR BRAINTREE, MA 2184</td>
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<tr>
<td>ROMAN CATHOLIC ARCHBISHOP OF SAN FRANCISCO</td>
<td>94-1156707</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1 PETER YORKE WAY SAN FRANCISCO, CA 94109</td>
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<tr>
<td>ROMAN CATHOLIC ARCHBISHOP OF WASHINGTON</td>
<td>53-0196550</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5001 EASTERN AVE HYATTSVILLE, MD 20782</td>
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<td>ROMAN CATHOLIC ARCHDIOCESE OF ATLANTA</td>
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<td>22,800.</td>
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<tr>
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<td>ROMAN CATHOLIC BISHOP OF FALL RIVER CATHOLI</td>
<td>04-2131417</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>450 HIGHLAND AVE FALL RIVER, CA 2720</td>
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<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>336 CATHEDRAL WAY LAS VEGAS, NV 89109</td>
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<tr>
<td>ROMAN CATHOLIC BISHOP OF MANCHESTER A COPOR</td>
<td>02-6004670</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
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<tr>
<td>153 ASH ST MANCHESTER, NH 3104</td>
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<td></td>
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**Part II**

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</thead>
<tbody>
<tr>
<td>(1) ROMAN CATHOLIC BISHOP OF MONTEREY</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>5. ROMAN CATHOLIC DIOCESE OF DES MOINES</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

 Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

**Employer identification number**

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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Schedule I (Form 990) 2020

**JSA**

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**18674H 1467**

**V 20-7.21**
**SCHEDULE I**  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>RONALD MCDONALD HOUSE CHARITIES OF NASHVILLE</td>
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<td>62-1310717</td>
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<td>12,500.</td>
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<td>825 SW BUCHANAN ST TOPEKA, KS 66606</td>
<td>48-1022967</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BA</td>
<td>35 DAVIS BLVD TAMPA, FL 33606</td>
<td>59-1835985</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF THE CAPI</td>
<td>139 S LAKE AVE ALBANY, NY 12208</td>
<td>22-2356004</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF THE INLA</td>
<td>1015 W 5TH AVE SPOKANE, WA 99204</td>
<td>91-1176115</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>(9)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF THE OHIO</td>
<td>3540 WASHINGTON AVE EVANSVILLE, IN 47714</td>
<td>35-1748468</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF THE PHIL</td>
<td>3925 CHESTNUT ST PHILADELPHIA, PA 19104</td>
<td>23-7377505</td>
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<td>31,500.</td>
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<td>(11)</td>
<td>RONALD MCDONALD HOUSE CHARITIES OF WESTERN</td>
<td>5130 40TH AVE NE SEATTLE, WA 98105</td>
<td>91-1061044</td>
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<td>15,000.</td>
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<td>(12)</td>
<td>RONALD MCDONALD HOUSE CHARITIES UPPER MIDWE</td>
<td>818 FULTON STREET SE MINNEAPOLIS, MN 55414</td>
<td>41-1313107</td>
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<td>38,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
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<th>General Information on Grants and Assistance</th>
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<tbody>
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<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
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<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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| Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed. |

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) RONALD MCDONALD HOUSE CHARITIES-BAY AREA</td>
<td>94-2538615</td>
<td>501 (C) 3</td>
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<tr>
<td>(2) RONALD MCDONALD HOUSE OF CHAPEL HILL INC</td>
<td>56-1413188</td>
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<tr>
<td>(3) RONALD MCDONALD HOUSE OF NEW YORK INC</td>
<td>13-2933654</td>
<td>501 (C) 3</td>
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<td>(4) RONALD MCDONALD HOUSE OF SOUTHERN NEW JERSE</td>
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<td>(5) RONCALLI HIGH SCHOOL</td>
<td>35-1159685</td>
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<td>56-1837620</td>
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<td>43-1831334</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) ROOM IN THE INN I</td>
<td>62-0811413</td>
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<td>11,900.</td>
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<td>(9) ROOM TO GROW NATIONAL INC</td>
<td>13-4012096</td>
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<td>(10) ROOM TO READ</td>
<td>91-2003533</td>
<td>501 (C) 3</td>
<td>421,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(11) ROOSEVELT UNIVERSITY</td>
<td>36-2167854</td>
<td>501 (C) 3</td>
<td>16,300.</td>
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<td>N/A</td>
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<td>(12) ROOT &amp; REBOUND</td>
<td>46-3876220</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3. Enter total number of other organizations listed in the line 1 table
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
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<tr>
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<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>(1) ROOT AND BRANCH CHURCH</td>
<td>1156 E 57TH ST CHICAGO, IL 60637</td>
</tr>
<tr>
<td>(2) ROOTS &amp; CULTURE CONTEMPORARY ART CENTER</td>
<td>1034 N MILWAUKEE AVE CHICAGO, IL 60642</td>
</tr>
<tr>
<td>(3) ROOTS OF MUSIC INC</td>
<td>828 ROYAL ST # 521 NEW ORLEANS, LA 70116</td>
</tr>
<tr>
<td>(4) ROOTS YOUNG ADULT SHELTER</td>
<td>4541 19TH AVE NE SEATTLE, WA 98105</td>
</tr>
<tr>
<td>(5) ROPER ST FRANCIS FOUNDATION</td>
<td>8536 PALMETTO COMMERCE PKWY LADSON, SC 2945</td>
</tr>
<tr>
<td>(6) ROSA CLARK MEDICAL CENTER</td>
<td>301 MEMORIAL DR SENICA, SC 29672</td>
</tr>
<tr>
<td>(7) ROSE ANDON CENTER</td>
<td>1330 FOX ST DENVER, CO 80224</td>
</tr>
<tr>
<td>(8) ROSE HILL FOUNDATION</td>
<td>151 S OLD WOODWARD AVE STE 200 BIRMINGHAM,</td>
</tr>
<tr>
<td>(9) ROSE VALLEY MUSEUM AND HISTORICAL SOCIETY</td>
<td>41 ROSE VALLEY RD MEDIA, PA 19063</td>
</tr>
<tr>
<td>(10) ROSELAND CHRISTIAN MINISTRIES CENTER</td>
<td>10858 S MICHIGAN AVE CHICAGO, IL 60628</td>
</tr>
<tr>
<td>(11) ROSELLE CATHOLIC HIGH SCHOOL</td>
<td>350 RARITAN RD ROSELLE, NJ 7203</td>
</tr>
<tr>
<td>(12) ROSEMONT COLLEGE OF THE HOLY CHILD JESUS</td>
<td>1400 MONTGOMERY AVE ROSEMONT, PA 19010</td>
</tr>
</tbody>
</table>

2 | Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. | |

3 | Enter total number of other organizations listed in the line 1 table. | |
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>ROSENMOOR FOUNDATION INC</td>
<td>13-3281516</td>
<td>501 (C) 3</td>
<td>5,500</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>ROSENBAECH MUSEUM AND LIBRARY</td>
<td>23-1425055</td>
<td>501 (C) 3</td>
<td>66,500</td>
<td>FMV</td>
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<td>3</td>
<td>ROSENBERG FUND FOR CHILDREN INC</td>
<td>04-3095890</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ROSENTHAL CENTER FOR ADDICTION STUDIES INC</td>
<td>47-4114386</td>
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<td>FMV</td>
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<td>5</td>
<td>ROSEVILLE COVENANT CHURCH ROSEVILLE MN</td>
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<td>6</td>
<td>ROSIES PLACE INC</td>
<td>04-2582187</td>
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<td>7</td>
<td>ROSLYN SYNAGOGUE C O IRWIN M ECHTMAN</td>
<td>11-2394265</td>
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<td>8</td>
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<td>94-2838271</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>9</td>
<td>ROSSMOOR FUND</td>
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<td>10</td>
<td>ROSSVILLE CHRISTIAN CHURCH</td>
<td>48-0968335</td>
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<td>FMV</td>
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<td>11</td>
<td>ROSWELL PARK ALLIANCE FOUNDATION</td>
<td>16-1391608</td>
<td>501 (C) 3</td>
<td>8,000</td>
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<td>12</td>
<td>ROSWELL UNITED METHODIST CHURCH</td>
<td>58-1276063</td>
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<td>37,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

#### Part II

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<th>1(g) Description of non-cash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>1455 PALMER DR JANESVILLE, WI 53545</td>
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<td>PO BOX 382 GLENVIEW, IL 60025</td>
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<tr>
<td>PO BOX 22027 HOUSTON, TX 77227</td>
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<td>(7) ROTARY DISTRICT 5170 FOUNDATION</td>
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<td>2570 N 1ST ST SAN JOSE, CA 95131</td>
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<td>(8) ROUND HILL COMMUNITY CHURCH INC</td>
<td>04-0662171</td>
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<tr>
<td>(9) ROUND HOUSE THEATRE INC</td>
<td>52-1289737</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4545 EAST WEST HWY BETHESDA, MD 20814</td>
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<tr>
<td>(10) ROUND ROCK AREA SERVING CENTER INCORPORATED</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 5066 ROUND ROCK, TX 78683</td>
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<td>(11) ROUND THE BEND FARM INC</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>92 ALLEN NECK RD SOUTH DARTMOUTH, MA 2748</td>
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</tr>
<tr>
<td>(12) ROUNDABOUT THEATRE COMPANY INC</td>
<td>13-6192346</td>
<td>501 (C) 3</td>
<td>109,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>231 WEST 39TH ST 12TH FL NEW YORK, NY 10018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
## (Form 990)

## Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**OMB No. 1545-0047**

**2020**

**Open to Public Inspection**

---

## Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - Roundup Riders of the Rockies Heritage and</td>
<td>84-0933209</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2 - Ron New York Inc</td>
<td>11-3632924</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3 - Rowan Helping Ministries</td>
<td>56-1544532</td>
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<tr>
<td>4 - Rowan University Foundation Inc</td>
<td>22-2482802</td>
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<td>15,500.</td>
<td>FMV</td>
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<tr>
<td>5 - Rowland Hall-St Marks School</td>
<td>87-0212477</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>7 - Royal African Foundation Inc</td>
<td>82-0537124</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>8 - Royal Oak Foundation Inc</td>
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<td>FMV</td>
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<td>9 - Royal River Conservation Trust</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>10 - Royal Shakespeare Company America</td>
<td>52-1978194</td>
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<td>FMV</td>
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<td>12 - Ru4 Inc</td>
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<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

**3** Enter total number of other organizations listed in the line 1 table .................................................................
### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>RUBICAM FOUNDATION 1301 WALNUT ST PHILADELPHIA, PA 19107</td>
<td>83-1746423</td>
<td>501 (C) 3</td>
<td>$21,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2</td>
<td>RUBIN FOR KIDS INC PO BOX 1405 MADISON, WI 53701</td>
<td>39-1829020</td>
<td>501 (C) 3</td>
<td>$15,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>RUBIN MUSEUM OF ART 150 W 17TH ST NEW YORK, NY 10011</td>
<td>22-6799567</td>
<td>501 (C) 3</td>
<td>$25,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>RUCKUS SOCIETY INC PO BOX 28741 OAKLAND, CA 94604</td>
<td>81-0504390</td>
<td>501 (C) 3</td>
<td>$50,000</td>
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<td>N/A</td>
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<tr>
<td>5</td>
<td>RUDOLF STEINER FOUNDATION INC PO BOX 2007 SAN FRANCISCO, CA 94126</td>
<td>13-6082763</td>
<td>501 (C) 3</td>
<td>$10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>RUDOLF STEINER SCHOOL INC 15 E 79TH ST NEW YORK, NY 10075</td>
<td>13-1624162</td>
<td>501 (C) 3</td>
<td>$50,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>RUFFED GROUSE SOCIETY 451 MCCORMICK RD CORAOPOLIS, PA 15108</td>
<td>56-0846925</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8</td>
<td>RUFFED GROUSE SOCIETY 35 FARRISH ST DALLAS, PA 18612</td>
<td>26-2666546</td>
<td>501 (C) 3</td>
<td>$10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>RUMPLE MEMORIAL PRESBYTERIAN CHURCH PO BOX 393 BLOWING ROCK, NC 28605</td>
<td>56-0906210</td>
<td>501 (C) 3</td>
<td>$18,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>RUMSON COUNTRY DAY SCHOOL 35 BELLEVUE AVE RUMSON, NJ 7760</td>
<td>21-0639372</td>
<td>501 (C) 3</td>
<td>$52,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>RUN FOR THE STRIPES INC 7212 EXETER RD BETHESDA, MD 20814</td>
<td>46-2269088</td>
<td>501 (C) 3</td>
<td>$8,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>RURAL DEVELOPMENT INSTITUTE 1424 4TH AVE STE 300 SEATTLE, WA 98101</td>
<td>91-1158970</td>
<td>501 (C) 3</td>
<td>$520,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I
#### General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] 
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
#### Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>EIN</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RURAL HOPE FOUNDATION</td>
<td>971 W HOMESTEAD RD SUNNYVALE, CA 94087</td>
<td>46-4580837</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2</td>
<td>RURAL ORGANIZING PROJECT</td>
<td>PO BOX 664 COTTAGE GROVE, OR 97424</td>
<td>93-1159856</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>RUSH UNIVERSITY MEDICAL CENTER</td>
<td>1201 W HARRISON CHICAGO, IL 60607</td>
<td>36-2174823</td>
<td>501 (C) 3</td>
<td>93,500.</td>
<td>FMV</td>
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<tr>
<td>4</td>
<td>RUSSIA FAMILY HOMES</td>
<td>335 ARCADIA PL SAN ANTONIO, TX 78209</td>
<td>61-1643147</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5</td>
<td>RUSSIAN LEADERSHIP MINISTRIES</td>
<td>209 E LIBERTY DR WHEATON, IL 60187</td>
<td>20-0133008</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>6</td>
<td>RUSSIAN RIVER ALLIANCE</td>
<td>PO BOX 2 MONTE RIO, CA 95462</td>
<td>46-0847988</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>RUSSIAN UKRAINIAN EVANGELICAL BAPTIST UNION</td>
<td>574 ASHFORD CENTER RD ASHFORD, CT 6278</td>
<td>06-6056321</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
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<td>RUTGERS COMMUNITY CHRISTIAN CHURCH</td>
<td>71 CEDAR GROVE LN SOMERSET, NJ 8873</td>
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<td>501 (C) 3</td>
<td>21,300.</td>
<td>FMV</td>
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<td>9</td>
<td>RUTGERS PREPARATORY SCHOOL</td>
<td>1345 EASTON AVE SOMERSET, NJ 8873</td>
<td>22-1607926</td>
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<td>18,000.</td>
<td>FMV</td>
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<td>10</td>
<td>RUTGERS UNIVERSITY FOUNDATION</td>
<td>335 GEORGE ST NEW BRUNSWICK, NJ 8901</td>
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<td>392,391.</td>
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<td>11</td>
<td>RUTH BANCROFT GARDEN INC</td>
<td>1552 BANCROFT RD WALNUT CREEK, CA 94598</td>
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<td>23,500.</td>
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<tr>
<td>12</td>
<td>RUTHERFORD B H YATES MUSEUM INC</td>
<td>PO BOX 130726 HOUSTON, TX 77219</td>
<td>76-0536349</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I  
(Form 990)  
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
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Name of the organization  
VANGUARD CHARITABLE ENDOWMENT PROGRAM  
Employer identification number  
23-2888152  

Part I  
General Information on Grants and Assistance  
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
Yes  
No  

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.  

Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.  

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<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>RUTHERFORD HOUSING PARTNERSHIP INC</td>
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<td>501 (C) 3</td>
<td>7,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PO BOX 1525 RUTHERFORDTON, NC 28139</td>
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<td>RVA COMMUNITY DEVELOPMENT CORPORATION</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>PO BOX 7959 RICHMOND, VA 23223</td>
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<td>1225 S WELLER ST STE 400 SEATTLE, WA 98144</td>
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<tr>
<td>RYGA INC</td>
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<td>11,000. FMV</td>
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<td>PO BOX 867 STONE RIDGE, NY 12484</td>
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<tr>
<td>1653 RAMBLING LN MEDINA, WA 98039</td>
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<td>RYAN HOUSE</td>
<td>20-1852393</td>
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<td>6,000. FMV</td>
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<tr>
<td>110 W MUHAMMAD ALI WAY FL 1 PHOENIX, AZ 850</td>
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<tr>
<td>RYK COUNTRY DAY SCHOOL</td>
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<td>501 (C) 3</td>
<td>41,000. FMV</td>
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<tr>
<td>1 CEDAR ST RYE, NY 10580</td>
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<td>RYSE INC</td>
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<tr>
<td>4006 MACDONALD AVE RICHMOND, CA 94805</td>
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<td>RYTHIR</td>
<td>2400 NE 95TH ST SEATTLE, WA 98115</td>
<td>501 (C) 3</td>
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<td>S A F E HOUSE</td>
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<td>501 (C) 3</td>
<td>20,000. FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 25363 ALBUQUERQUE, NM 87125</td>
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<td>22-6082741</td>
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<td>2306 NE ANDRESEN RD VANCOUVER, WA 98661</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3 Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  
   - No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) S M A FATHERS INC 23 BLISS AVE TENAFLY, NJ 7670</td>
<td>22-6096615</td>
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<td>17,000.</td>
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<tr>
<td>(2) SACRAMENTO CHILDRENS HOME 2750 SUTTERVILLE RD SACRAMENTO, CA 95820</td>
<td>94-1156588</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(3) SACRAMENTO FOOD BANK SERVICES 3333 3RD AVE SACRAMENTO, CA 95817</td>
<td>94-3315566</td>
<td>501 (C) 3</td>
<td>31,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) SACRAMENTO LGBT COMMUNITY CENTER 1015 20TH ST SACRAMENTO, CA 95811</td>
<td>94-2502229</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>(5) SACRAMENTO LOAVES AND FISHES 1321 N C ST SACRAMENTO, CA 95811</td>
<td>68-0189897</td>
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<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) SACRED ART OF LIVING EDUCATION AND RETREAT PO BOX 8720 BEND, OR 97708</td>
<td>93-1258906</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) SACRED HEART ACADEMY EDUCATION FOUNDATION 1200 DAYTON ST NW GRAND RAPIDS, MI 49504</td>
<td>84-4727731</td>
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<td>20,000.</td>
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<td>(8) SACRED HEART ACADEMY INC 265 BENHAM ST HAMDEN, CT 6514</td>
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<td>(9) SACRED HEART CATHEDRAL CATHOLIC CHURCH 823 CATHEDRAL PL RICHMOND, VA 23220</td>
<td>54-0524504</td>
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<td>(10) SACRED HEART CATHOLIC CHURCH 520 GRAYDON AVENUE NORFOLK, VA 23507</td>
<td>54-0733015</td>
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<td>10,000.</td>
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<tr>
<td>(11) SACRED HEART CATHOLIC CHURCH PO BOX 1524 TAMPA, KS 66226</td>
<td>59-0624441</td>
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<td>(12) SACRED HEART CATHOLIC CHURCH 5505 MONTECILLO RD SHAWNEE, FL 33601</td>
<td>48-0625990</td>
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<td>FMV</td>
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3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>SACRED HEART CENTER INC 1400 PERRY ST RICHMOND, VA 23224</td>
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<td>SACRED HEART CHURCH 1321 CENTRE ST NEWTON CENTER, TX 77301</td>
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<td>06-0986964</td>
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<td>4</td>
<td>SACRED HEART CHURCH 704 OLD MONTGOMERY RD CONROE, TX 77304</td>
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<td>SACRED HEART CHURCH AND SCHOOL 701 FRANKLIN ST WEST READING, PA 19611</td>
<td>23-1547583</td>
<td>501 (C) 3</td>
<td>70,000</td>
<td>FMV N/A</td>
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<td>6</td>
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<td>7</td>
<td>SACRED HEART MONASTERY 6889 S LOVERS LANE RD FRANKLIN, WI 53132</td>
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<td>8</td>
<td>SACRED HEART OF JESUS CATHOLIC CHURCH TERRE 2322 N 13TH 1/2 ST TERRE HAUTE, IN 47804</td>
<td>35-0868062</td>
<td>501 (C) 3</td>
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<td>10</td>
<td>SACRED HEART OF MARY CATHOLIC PARISH IN BOU 6739 S BOULDER RD BOULDER, CO 80303</td>
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<td>11</td>
<td>SACRED HEART PARISH PO BOX 155 FREEMONT, MN 56331</td>
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<td>12</td>
<td>SACRED HEART RETREAT HOUSE INC 920 S ALHAMBRA RD ALHAMBRA, CA 91801</td>
<td>11-3835568</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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|3 | Enter total number of other organizations listed in the line 1 table ................................................................................................................................. |

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) SACRED HEART ROMAN CATHOLIC PARISH PRESCOTT</td>
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<td>183 BAYVIEW AVENUE JERSEY CITY, NJ 7305</td>
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<td>PO BOX 190 WALLS, MS 38680</td>
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<td>(7) SACRED HEART UNIVERSITY</td>
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<td>(11) SADDLEBACK COVENANT CHURCH INC</td>
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<td>23401 MADEO STR A MISSION VIEJO, CA 92691</td>
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<td>4800 W GATES PASS RD TUCSON, AZ 85745</td>
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</tbody>
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3. Enter total number of other organizations listed in the line 1 table.

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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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<th>(h) Purpose of grant or assistance</th>
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<td>57-1014137</td>
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<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAFE HORIZON INC</td>
<td>13-2946970</td>
<td>501 (C) 3</td>
<td>75,575.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAFE HOUSE PROJECT INC</td>
<td>82-3487081</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAFE PASSAGE</td>
<td>01-0532835</td>
<td>501 (C) 3</td>
<td>51,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAFECHILD</td>
<td>56-1817816</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SAFEHAVEN OF TARRANT COUNTY</td>
<td>75-1670281</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAFER FOUNDATION</td>
<td>36-2762168</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SAFESPACe CENTER INC</td>
<td>81-3898296</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ..................................................................................

3. Enter total number of other organizations listed in the line 1 table. ..................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I  
(Form 990)  

Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States  

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  

Attach to Form 990.  

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

Name of the organization  

VANGUARD CHARITABLE ENDOWMENT PROGRAM  

Employer identification number  

23-2888152  

Part I  
General Information on Grants and Assistance  

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

[ ] Yes  [ ] No  

2  Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.  

Part II  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.  

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| SAFESPACE INC  
612 SE DIXIE HWY STUART, FL 34994  
59-1983994  
501 (C) 3 | 17,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAFETY HARBOR NEIGHBORHOOD FAMILY CENTER IN  
1003 MARTIN LUTHER KING ST N SAFETY HARBOR,  
59-3006671  
501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAGA INNOVATIONS  
246 WALNUT ST STE 102 NEWTONVILLE, MA 2460  
47-2168942  
501 (C) 3 | 350,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAGE COLLEGES  
45 FERRY ST TROY, NY 12180  
14-1338488  
501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAGE HILL SCHOOL  
20402 NEWPORT COAST DR NEWPORT COAST, CA 92  
33-0729698  
501 (C) 3 | 65,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAGE RIDGE SCHOOL  
2515 CROSSBOW CT RENO, NV 89511  
86-0852480  
501 (C) 3 | 73,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAGEMONT CHURCH  
11300 S SAM HOUSTON Fwy E HOUSTON, TX 7708  
74-1557075  
501 (C) 3 | 11,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAHAR EDUCATION  
PO BOX 17672 SEATTLE, WA 98127  
26-4215477  
501 (C) 3 | 12,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAIL NEWPORT INC  
72 FORT ADAMS DR NEWPORT, RI 2840  
22-2560625  
501 (C) 3 | 45,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAILFISH POINT FOUNDATION INC  
2201 SE SAILFISH POINT BLVD STUART, FL 3499  
65-0978271  
501 (C) 3 | 19,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAINT AGNES FOUNDATION  
535 THOMAS AVE SAINT PAUL, MN 55103  
47-2976300  
501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SAINT ALBANS EPISCOPAL CHURCH  
885 SHORE RD CAPE ELIZABETH, ME 4107  
01-2040618  
501 (C) 3 | 54,900. | FMV | N/A | FOR RECIPIENT'S EXEM |
| Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

| Enter total number of other organizations listed in the line 1 table.  

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

Schedule I (Form 990) 2020  

JSA  
0E1288 1.000  

18674H 1467  

V 20-7.21
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SAINT AMBROSE ANGLICAN CHURCH P.O. BOX 45805 SEATTLE, WA 98145</td>
<td>88-2094703</td>
<td>501 (C) 3</td>
<td>36,462.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SAINT AMBROSE PARISH AND SCHOOL 2315 E REDONDO AVE SALT LAKE CITY, UT 84108</td>
<td>87-6112484</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SAINT ANDREW PRESBYTERIAN CHURCH 1300 MELROSE AVE IOWA CITY, IA 52246</td>
<td>42-0869916</td>
<td>501 (C) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SAINT ANDREWS EPISCOPAL CHURCH 1819 HEIGHTS BLVD HOUSTON, TX 77008</td>
<td>76-0096306</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SAINT ANDREWS EPISCOPAL MISSIONARY 2715 NW 39TH AVE GAINESVILLE, FL 32605</td>
<td>59-3172332</td>
<td>501 (C) 3</td>
<td>88,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>6</td>
<td>SAINT ANDREWS PRESBYTERIAN CHURCH 7650 N FASEO DEL NORTE TUCSON, AZ 85704</td>
<td>86-6052275</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SAINT ANDREWS SCHOOL 13601 SARATOGA AVE SARATOGA, CA 95070</td>
<td>94-1523245</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>8</td>
<td>SAINT ANN SCHOOL FOUNDATION INC 475 9TH AVE S NAPLES, FL 34102</td>
<td>59-2201867</td>
<td>501 (C) 3</td>
<td>5,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SAINT ANNS SCHOOL 129 PIERREFONT ST BROOKLYN, NY 11201</td>
<td>11-2604681</td>
<td>501 (C) 3</td>
<td>126,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SAINT ANSELM COLLEGE 100 SAINT ANSELM DR MANCHESTER, NH 3102</td>
<td>02-0222182</td>
<td>501 (C) 3</td>
<td>140,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>SAINT BONIFACE CHURCH 9367 WATTSBURG RD ERIE, PA 16509</td>
<td>25-1031947</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SAINT CAMILLUS CHURCH 1600 SAINT CAMILLUS DR SILVER SPRING, MD 20</td>
<td>52-0627775</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) SAINT CATHERINE GREEK ORTHODOX CHURCH</td>
<td>5555 SOUTH YOSEMITE STREET GREENWOOD VILLAGE</td>
<td>74-2298684</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SAINT CATHERINE OF SIENA CHURCH</td>
<td>1310 BAYSWATER AVE BURLINGAME, CA 94010</td>
<td>94-1156714</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SAINT DAMIEN PARISH OCEAN CITY NJ</td>
<td>1337 ASBURY AVE OCEAN CITY, NJ 8226</td>
<td>45-0949263</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SAINT DAVIDS SCHOOL</td>
<td>12 E 89TH ST NEW YORK, NY 10128</td>
<td>13-1655283</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SAINT DUNSTANS EPISCOPAL CHURCH</td>
<td>18 SPRINGDALE AVENUE PO BOX 515 DOVER, MA 2</td>
<td>04-3053827</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SAINT DUNSTAN'S EPISCOPAL PARISH</td>
<td>6556 PARK RIDGE BLVD SAN DIEGO, CA 92120</td>
<td>95-1971156</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) SAINT EDWARDS SCHOOL</td>
<td>1895 SAINT EDWARDS DR VERO BEACH, FL 32963</td>
<td>59-1059214</td>
<td>501 (C) 3</td>
<td>47,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) SAINT ELIZABETH ANN SETON CATHOLIC SCHOOL</td>
<td>10650 ABOITE CENTER RD FORT WAYNE, IN 46804</td>
<td>35-1743438</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) SAINT ELIZABETH CHURCH</td>
<td>PO BOX 695 UNCHLAND, PA 19480</td>
<td>23-3046502</td>
<td>501 (C) 3</td>
<td>28,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SAINT ELIZABETH SETON CATHOLIC CHURCH - NAP</td>
<td>5260 28TH AVENUE SOUTHWEST NAPLES, FL 34116</td>
<td>59-2011175</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SAINT ELIZABETH SETON CATHOLIC SCHOOL</td>
<td>2730 53RD TER SW NAPLES, FL 34116</td>
<td>59-2112451</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) SAINT ELIZABETH SHELTER CORPORATION</td>
<td>804 ALARID ST SANTA FE, NM 87505</td>
<td>85-0347650</td>
<td>501 (C) 3</td>
<td>49,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

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JSA 012391 0.000

18674h 1467 V 20–7.21
**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAINT ELIZABETH UNIVERSITY</td>
<td>22-1529785</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SAINT EUGENE PARISH</td>
<td>72 CULVERN ST ASHEVILLE, NC 28804</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SAINT FRANCIS HOUSE INC</td>
<td>39 BOYLSTON ST BOSTON, MA 2116</td>
<td>501 (C) 3</td>
<td>89,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SAINT FRANCIS UNIVERSITY</td>
<td>117 EVERGREEN DR LORETTO, PA 15940</td>
<td>501 (C) 3</td>
<td>314,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SAINT GABRIEL THE ARCHANGEL EPISCOPAL CHURCH</td>
<td>6190 E QUINCY AVE ENGELWOOD, CO 80111</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SAINT GABRIEL'S EPISCOPAL CHURCH</td>
<td>PO BOX 545 124 FRONT STREET MARION, MA 2738</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT HELENA CHURCH</td>
<td>1489 DEKALB PIKE BLUE BELL, PA 19422</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT IGNATIUS LOYOLA ACADEMY</td>
<td>300 E GITTINGS ST BALTIMORE, MD 21230</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT IGNATIUS MARTYN CATHOLIC SCHOOL</td>
<td>2309 EUCLID AVE AUSTIN, TX 78704</td>
<td>501 (C) 3</td>
<td>16,052.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT IGNATIUS PARISH</td>
<td>28 COMMONWEALTH AVE CHESTNUT HILL, MA 2467</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT JAMES EPISCOPAL CHURCH - LANCASTER, PA</td>
<td>119 NORTH DUKE STREET LANCASTER, PA 17602</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT JAMES- LITTLE ROCK UNITED METHODIST CHURCH</td>
<td>321 PLEASANT VALLEY DR LITTLE ROCK, AR 7221</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) SAINT JAMES LUTHERAN CHURCH</td>
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<td>(2) SAINT JAMES LUTHERAN CHURCH - LCMS</td>
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<td>FMV</td>
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<td>(3) SAINT JAMES SCHOOL</td>
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<td>3217 W CLEARFIELD ST PHILADELPHIA, PA 19132</td>
<td>45-2353683</td>
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<td>975 E WARNER RD TEMPE, AZ 85284</td>
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<td>501 (c) 3</td>
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<td>(5) SAINT JOHN EVANGELICAL LUTHERAN CHURCH</td>
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<td>(7) SAINT JOHN PAUL II</td>
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<td>3110 17 MILE RD NE CEDAR SPRINGS, MI 49319</td>
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<td>(10) SAINT JOHN THE EVANGELIST PARISH</td>
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<td>(11) SAINT JOHN VIANNEY CHURCH</td>
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<td>(12) SAINT JOHN XXIII UNIVERSITY PARISH</td>
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<td>6,000.</td>
<td>FMV</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ❌ No ✅

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>SAINT JOHN’S EPISCOPAL CHURCH</td>
<td>3245 CENTRAL AVENUE MEMPHIS, TN 38111</td>
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<td>FMV</td>
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<td>SAINT JOHNS HOSPITAL &amp; HEALTH CENTER FOUNDATION</td>
<td>2121 SANTA MONICA BLVD SANTA MONICA, CA 90404</td>
<td>501 (C) 3</td>
<td>105,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SAINT JOHNS LUTHERAN CHURCH</td>
<td>4536 S BUFFALO ST ORCHARD PARK, NY 14127</td>
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<td>31,900.</td>
<td>FMV</td>
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<td>SAINT JOHNS PREPARATORY SCHOOL</td>
<td>2121 CRESCENT ST ASTORIA, NY 11105</td>
<td>501 (C) 3</td>
<td>5,850.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT JOHNS UNIVERSITY</td>
<td>PO BOX 2222 COLLEGEVILLE, MN 56321</td>
<td>501 (C) 3</td>
<td>204,047.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SAINT JOSEPH ABBEY AND SEMINARY COLLEGE</td>
<td>75376 RIVER RD SAINT BENEDICT, LA 70459</td>
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<td>FMV</td>
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<td>SAINT JOSEPH CATHOLIC CHURCH</td>
<td>767 PROSPECT STREET MAPLEWOOD, NJ 7040</td>
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<td>SAINT JOSEPH CHURCH</td>
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<td>SAINT JOSEPH HIGH SCHOOL</td>
<td>145 PLAINFIELD RD METUCHEN, NJ 8840</td>
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<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT JOSEPH PARENTING CENTER</td>
<td>90 FAIRFIELD AVE STAMFORD, CT 6902</td>
<td>501 (C) 3</td>
<td>58,500.</td>
<td>FMV</td>
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<tr>
<td>SAINT JOSEPH PREPARATORY HIGH SCHOOL</td>
<td>637 CAMBRIDGE ST BRIGHTON, MA 2135</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAINT JOSEPH REGIONAL HIGH SCHOOL</td>
<td>40 CHESTNUT RIDGE RD MONTVALE, NJ 7645</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
## Schedule I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

Department of the Treasury
Internal Revenue Service

#### Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) SAINT JOSEPH SCHOOL, 123 FRANKLIN ST PETERSBURG, VA 23803</td>
<td>54-0594702</td>
<td>501 (C) 3</td>
<td>25,000.00</td>
<td>FMV</td>
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<td>(2) SAINT JOSEPH SCHOOL, 1200 SE 10TH ST STUART, FL 34996</td>
<td>59-1293630</td>
<td>501 (C) 3</td>
<td>10,000.00</td>
<td>FMV</td>
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<td>(3) SAINT JOSEPHS CHURCH, 34 YORKTOWN RD HILLSBOROUGH, NJ 8844</td>
<td>22-1811055</td>
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<td>23-11352674</td>
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<td>238,872.00</td>
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<td>(5) SAINT LAURENCE FOUNDATION INC, 5556 W 77TH ST BURBANK, IL 60459</td>
<td>46-1184417</td>
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<td>(6) SAINT LAWRENCE PARISH OF GRANT COUNTY, 113 S 6TH ST MILBANK, SD 57252</td>
<td>46-0228745</td>
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<td>(7) SAINT LAZARE CHARITABLE FUND INC, 1132 WOODSMERE AVE ORLANDO, FL 32839</td>
<td>47-3312166</td>
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<td>10,000.00</td>
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<td>26-0504152</td>
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<td>40,000.00</td>
<td>FMV</td>
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<td>(9) SAINT LOUIS SYMPHONY ORCHESTRA, 718 N GRAND BLVD SAINT LOUIS, MO 63103</td>
<td>43-0666769</td>
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<td>(10) SAINT LUKE CATHOLIC CHURCH, 7001 GEORGETOWN PIKE MCLEAN, VA 22101</td>
<td>54-0718928</td>
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<td>20,045.00</td>
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<td>(11) SAINT LUKES EPISCOPAL CHURCH, 11 SAINT LUKES LN SAN ANTONIO, TX 78209</td>
<td>74-0143124</td>
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<td>(12) SAINT LUKE'S EPISCOPAL CHURCH - BIRMINGHAM, 3736 MONTROSE ROAD BIRMINGHAM, AL 35213</td>
<td>63-0433818</td>
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<td>8,150.00</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

---

Schedule I (Form 990) 2020
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No ✗

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) SAINT LUKES FOUNDATION 901 E 104TH ST KANSAS CITY, MO 64131</td>
<td>44-6014699</td>
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<td>FMV</td>
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<td>(2) SAINT MARIA GORETTI PARISH 112 CHESTNUT ST LYNNFIELD, MA 1940</td>
<td>04-2274684</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) SAINT MARK'S CATHOLIC CHURCH 3736 SOUTH LEE’S SUMMIT ROAD INDEPENDENCE,</td>
<td>43-0835155</td>
<td>501 (C) 3</td>
<td>13,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) SAINT MARTIN DE FORRES HIGH SCHOOL 6202 SAINT CLAIR AVE CLEVELAND, OH 44103</td>
<td>52-2401852</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(5) SAINT MARY'S COLLEGE US 933 N NOTRE DAME, IN 46556</td>
<td>35-0868158</td>
<td>501 (C) 3</td>
<td>29,537.</td>
<td>FMV</td>
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<td>(6) SAINT MATTHEW GREENVILLE UNITED METHODIST CHURCH 701 CLEVELAND ST GREENVILLE, SC 29601</td>
<td>57-0403146</td>
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<td>FMV</td>
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<td>(7) SAINT MATTHEWS EPISCOPAL CHURCH 201 E FREDERICK DR STERLING, VA 20164</td>
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<td>(8) SAINT MATTHEW'S EPISCOPAL CHURCH 901 W ERIE ST CHANDLER, AZ 85225</td>
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<td>501 (C) 3</td>
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<td>(9) SAINT MATTHEWS ROMAN CATHOLIC CHURCH CORPORATION 216 SCRIBNER AVE NORWALK, CT 06854</td>
<td>06-0728319</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>(10) SAINT MATTHIAS CHURCH 128 BRYN MAWR AVE BALA CYNWYD, PA 19004</td>
<td>23-1352468</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SAINT MAXIMILIAN KOLBE ROMAN CATHOLIC CHURCH 5720 HAMILTON MASON RD LIBERTY TWP, OH 45014</td>
<td>31-1275691</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) SAINT MONICA CATHOLIC HIGH SCHOOL 1030 LINCOLN BLVD SANTA MONICA, CA 90403</td>
<td>23-7071304</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................................. ..............................

3. Enter total number of other organizations listed in the line 1 table. ..............................................................................................................

---

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

Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467 V 20-7.21
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. SAINT MONICA SCHOOL 5635 N SANTA MONICA BLVD MILWAUKEE, WI 5321</td>
<td>39-0807225</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. SAINT NICHOLAS LUTHERAN CHURCH 1450 PLUM POINT RD HUNTINGTOWN, MD 20639</td>
<td>52-1744570</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. SAINT PATRICK CHURCH 34 AMHERST STREET MILFORD, NH 3055</td>
<td>02-0226381</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. SAINT PATRICK CHURCH OF ARCOLA 12305 ARCOLA RD FORT WAYNE, IN 46818</td>
<td>35-1361282</td>
<td>501 (C) 3</td>
<td>7,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. SAINT PATRICKS EPISCOPAL CHURCH 164 FAIRVIEW RD MOORESVILLE, NC 28117</td>
<td>56-1776926</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. SAINT PATRICKS PARISH 118 S BROADWAY LAWRENCE, MA 1843</td>
<td>04-2106351</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. SAINT PAUL &amp; MINNESOTA FOUNDATION 101 5TH ST E STE 2400 SAINT PAUL, MN 55101</td>
<td>41-6031510</td>
<td>501 (C) 3</td>
<td>114,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. SAINT PAUL AREA SYND OF THE EVANGELICAL LU 105 UNIVERSITY AVE W SAINT PAUL, MN 55103</td>
<td>36-3514252</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>9. SAINT PAUL CHAMBER ORCHESTRA SOCIETY 408 ST PETER STREET ST PAUL, MN 55102</td>
<td>41-0829498</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. SAINT PAUL LUTHERAN CHURCH 2550 EDSEL ST TRENTON, IL 60056</td>
<td>38-6030924</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<tr>
<td>11. SAINT PAUL LUTHERAN CHURCH 100 S SCHOOL ST MOUNT PROSPECT, IL 60058</td>
<td>36-2307747</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. SAINT PAUL'S UNITED METHODIST CHURCH - WILMINGTON 1314 FOULK ROAD WILMINGTON, DE 19803</td>
<td>51-0068535</td>
<td>501 (C) 3</td>
<td>13,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
OE1288 1000

18674H 1467 V 20-7.21
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1.</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td>2.</td>
<td>SAINT PETER LUTHERAN CHURCH</td>
<td>06-0862649</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3.</td>
<td>SAINT PETER LUTHERAN CHURCH</td>
<td>38-1711440</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4.</td>
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<td>81-0305122</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5.</td>
<td>SAINT PETER'S BY THE SEA PRESBYTERIAN CHURCH</td>
<td>95-6006347</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6.</td>
<td>SAINT PETERS CHURCH IN THE GREAT VALLEY</td>
<td>23-6265609</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7.</td>
<td>SAINT PETER'S EPISCOPAL CHURCH</td>
<td>54-0699716</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8.</td>
<td>SAINT PETERS LUTHERAN CHURCH</td>
<td>13-1656685</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9.</td>
<td>SAINT PETERS LUTHERAN CHURCH</td>
<td>35-0883492</td>
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<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10.</td>
<td>SAINT PHILIP ORTHODOX CHURCH</td>
<td>22-1508627</td>
<td>501 (C) 3</td>
<td>262,125.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11.</td>
<td>SAINT PHILIP IN THE HILLS EPISCOPAL CHURCH</td>
<td>23-2144260</td>
<td>501 (C) 3</td>
<td>44,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12.</td>
<td>SAINT PIO FOUNDATION INC</td>
<td>86-0124188</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I (Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ❑ Yes ❑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SAINT RAYMOND’S CHURCH</td>
<td>2 MATILDA STREET PROVIDENCE, RI 2904</td>
<td>05-0259068 501 (C) 3</td>
<td>43,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SAINT ROCCE PARISH</td>
<td>PO BOX 1019 AVONDALE, PA 19311</td>
<td>27-3706229 501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) SAINT TERESA OF KOLKATA CHURCH</td>
<td>PO BOX 1076 MAYNAROVILLE, TN 37807</td>
<td>45-3854765 501 (C) 3</td>
<td>9,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SAINT THERESE PARISH OF MINNEHARVA COUNTY</td>
<td>901 N TAHOE TRL SIOUX FALLS, SD 57110</td>
<td>46-0250301 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SAINT THOMAS EPISCOPAL CHURCH</td>
<td>PO BOX 1070 SUN VALLEY, ID 83353</td>
<td>82-0457605 501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SAINT THOMAS MORE PARISH</td>
<td>6 MADbury RD DURHAM, NH 3824</td>
<td>02-0268964 501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7) SAINT TIKRONS THEOLOGICAL SEMINARY</td>
<td>PO BOX 130 SOUTH CANAAN, PA 18459</td>
<td>24-0798658 501 (C) 3</td>
<td>83,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SAINT TIMOTHY &amp; SAINT ATANASIUS COPTIC ORT</td>
<td>5415C BACKLICK RD SPRINGFIELD, VA 22151</td>
<td>45-4205634 501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) SAINT VINCENT COLLEGE</td>
<td>300 FRASER PURCHASE RD LATROBE, PA 15650</td>
<td>25-0964126 501 (C) 3</td>
<td>45,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SAINT XAVIER HIGH SCHOOL</td>
<td>1609 POPLAR LEVEL RD LOUISVILLE, KY 40217</td>
<td>61-0480949 501 (C) 3</td>
<td>7,510.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SAINTS FAITH HOPE &amp; CHARITY CHURCH</td>
<td>191 LINDEN ST WINNETKA, IL 60093</td>
<td>36-2179774 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) SAINTS PETER AND PAUL ROMAN CATHOLIC CHURCH</td>
<td>404 HUDSON ST HOOKEN, NJ 7030</td>
<td>22-1597125 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table...
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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | **SAIYA SIDDRANTRA ASHRAM**  
1819 2ND ST CONCORD, CA 94519 | 68-0351133 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | **SALANTEE AKIBA RIVERDALE ACADEMY**  
655 W 24TH ST BROOKLYN, NY 11231 | 13-2646185 | 501 (C) 3 | 261,960. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | **SALEM HARVEST**  
PO BOX 483 SALEM, OR 97308 | 45-3043885 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | **SALEM IN LADUE UNITED METHODIST CHURCH**  
1200 S LINDBERGH BLVD ST LOUIS, MO 63131 | 43-6003369 | 501 (C) 3 | 19,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | **SALEM LUTHERAN CHURCH**  
8311 GRAVUS RD SAINT LOUIS, CA 92869 | 43-0699802 | 501 (C) 3 | 5,880. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | **SALEM LUTHERAN CHURCH**  
6500 E SANTIAGO CANYON RD ORANGE, CA 63123 | 95-2623485 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | **SALEM Mennonite Home for the Aged**  
106 W 7TH ST FREMONT, SD 57029 | 46-0230431 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | **SALEM ROTARY FOUNDATION**  
PO BOX 3987 SALEM, OR 97302 | 23-7060946 | 501 (C) 3 | 31,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | **SALESIAN MISSIONS INC**  
2 LE FEVRES LN NEW ROCHELLE, NY 10801 | 80-0522035 | 501 (C) 3 | 9,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | **SALESIAN SOCIETY INC**  
148 E MAIN ST NEW ROCHELLE, NY 10801 | 13-6155183 | 501 (C) 3 | 16,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | **SALESIANUM SCHOOL INC**  
2012 N BROOM ST WILMINGTON, DE 19802 | 2012-0066743 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | **SALESMANSHIP CLUB CHARITABLE GOLF OF DALLAS**  
106 E 10TH ST # 200 DALLAS, TX 75203 | 86-1118804 | 501 (C) 3 | 38,800. | FMV | N/A | FOR RECIPIENT'S EXEM |

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### Part I General Information on Grants and Assistance

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   - No 

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### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>1 (h) Purpose of grant or assistance</th>
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<td>(1) SALINE AREA SOCIAL SERVICES INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3702 HEDGEROW DR SALINE, MI 48176</td>
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<td>(2) SALISBURY PRESBYTERIAN CHURCH</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>13621 W SALISBURY RD MIDLOTHIAN, VA 23113</td>
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<tr>
<td>(3) SALISBURY SCHOOL EDUCATIONAL FOUNDATION INC</td>
<td>45-2080993</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>6279 NOBS RD SALISBURY, MD 21804</td>
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<td>(4) SALISBURY SCHOOL INC</td>
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<td>(5) SALISBURY SCHOOL INC</td>
<td>52-0904771</td>
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<td>10,250.</td>
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<td>(6) SALISBURY UNIVERSITY FOUNDATION INC</td>
<td>52-1127396</td>
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<tr>
<td>PO BOX 2655 SALISBURY, MD 21802</td>
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<td>(7) SALK INSTITUTE FOR BIOLOGICAL STUDIES</td>
<td>95-2160097</td>
<td>501 (C) 3</td>
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<td>10010 N TORREY PINES RD LA JOLLA, CA 92037</td>
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<tr>
<td>(8) SALMON PUBLIC SCHOOL FOUNDATION INC</td>
<td>94-3112559</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 275 SALMON, ID 83467</td>
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<td>(9) SALMON WHITESTER PARK ASSOCIATION INC</td>
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<td>FMV</td>
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<td>195 HIGHWAY 93 S SALMON, ID 83467</td>
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<td>(10) SALT POND AREAS BIRD SANCTUARIES INC</td>
<td>04-6125554</td>
<td>501 (C) 3</td>
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<tr>
<td>PO BOX 535 WEST FALMOUTH, MA 2574</td>
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<td>(11) SALSUS UNIVERSITY</td>
<td>23-1413680</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8360 OLD YORK RD ELKINS PARK, PA 19027</td>
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<td>(12) SALVADORAN AMERICAN HUMANITARIAN FOUNDATION</td>
<td>59-2339140</td>
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<td>153,975.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2050 CORAL WAY STE 600 CORAL GABLES, FL 331</td>
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</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. SALVATION ARMY</td>
<td>16130 NORTHLAND DR SOUTHFIELD, MN 55113</td>
<td>38-1370971</td>
<td>501 (C) 3</td>
<td>72,215.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. SALVATION ARMY</td>
<td>2445 PRIOR AVE N SAINT PAUL, MI 48075</td>
<td>41-0698597</td>
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<td>171,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. SALVATION ARMY</td>
<td>3637 BROADWAY BLVD KANSAS CITY, MO 64111</td>
<td>44-0545998</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. SALVATION ARMY MEDICAL CARE TRUST</td>
<td>1525 W MT HARRIS BLVD MAC D1114-04 CHARLOTTE</td>
<td>74-2444170</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<tr>
<td>5. SALVATION ARMY NATIONAL CORP</td>
<td>615 SLATERS LN ALEXANDRIA, VA 22314</td>
<td>22-2406433</td>
<td>501 (C) 3</td>
<td>270,350.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. SALVATION ARMY SERVICES INC</td>
<td>5550 PRAIRIE ST PFW HOFFMAN ESTATES, IL</td>
<td>36-3805307</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7. SALVATION ARMY WORLD SERVICE OFFICE SANSO</td>
<td>615 SLATERS LN ALEXANDRIA, VA 22314</td>
<td>13-2923701</td>
<td>501 (C) 3</td>
<td>45,550.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. SALVATION FARMS INC</td>
<td>49 PORTLAND ST MORRISVILLE, VT 5661</td>
<td>45-2954564</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. SALVATORIAN FATHERS COMMUNITY OF TEXAS</td>
<td>PO BOX 10189 MERRILLVILLE, IN 46411</td>
<td>35-0992720</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. SALZBURG GLOBAL SEMINAR INC</td>
<td>1250 H ST NW STR 1150 WASHINGTON, DC 20005</td>
<td>04-2200147</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. SAM &amp; DEVORAH FOUNDATION FOR TRANS YOUTH IN</td>
<td>10 FAIRMOUNT AVENUE CHATMAN, NJ 7928</td>
<td>81-1969816</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. SAM DENNIS MINISTRIES</td>
<td>3809 STEEPLECHASE DR PLANO, TX 75093</td>
<td>82-1949235</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.
## Part I
**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [x]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>SAM HOUSTON STATE UNIVERSITY</td>
<td>74-6001430</td>
<td>501 (C) 3</td>
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<td>2</td>
<td>SAM JONES MEMORIAL METHODIST CHURCH</td>
<td>58-0670000</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SAMARITAN HOMELESS INTERIM PROGRAM</td>
<td>22-2971220</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>4</td>
<td>SAMARITAN HOUSE</td>
<td>23-7416272</td>
<td>501 (C) 3</td>
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<td>5</td>
<td>SAMARITAN HOUSE COMMUNITY CENTER</td>
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<td>6</td>
<td>SAMARITAN INN INC</td>
<td>1725 N MCDONALD ST MCKINNEY, TX 75071</td>
<td>75-1984285</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>SAMARITAN INNS INC</td>
<td>2523 14TH ST NW WASHINGTON, DC 20009</td>
<td>52-1474935</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SAMARITAN MINISTRIES</td>
<td>414 E NORTHWEST BLVD WINSTON SALEM, NC 2710</td>
<td>56-1490019</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>9</td>
<td>SAMARITANS INC</td>
<td>41 WEST ST FL 4 BOSTON, MA 2111</td>
<td>04-2643466</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SAMARITANS OF NEW YORK INC</td>
<td>13-3164446</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>SAMARITANS PURSE</td>
<td>PO BOX 1259 NEW YORK, NY 10159</td>
<td>13-3164446</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>SAMADH SOCIETY INC</td>
<td>6363 N 24TH ST KALAMAZOO, MI 49004</td>
<td>38-3375368</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” in Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) SAMFORD UNIVERSITY</td>
<td>800 LAKESHORE DR BIRMINGHAM, AL 35229</td>
<td>63-0312914</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SAMMAMISH PRESBYTERIAN CHURCH</td>
<td>22522 NE INGLEWOOD HILL RD SAMMAMISH, WA 98</td>
<td>91-1364639</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SAMSON DUBINA EDUCATIONAL TABLE TENNIS ACAD</td>
<td>2262 S ARLINGTON RD COVENTRY TOWNSHIP, OH 4</td>
<td>85-3802552</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SAMUEL OMODO FOUNDATION</td>
<td>1751 28TH ST SW WYOMING, MI 49519</td>
<td>45-4872020</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SAMUELI ACADEMY</td>
<td>1575 E 17TH ST SANTA ANA, CA 92705</td>
<td>45-3866750</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SAN ANTONIO ACADEMY OF TEXAS</td>
<td>117 E FRENCH PL SAN ANTONIO, TX 78212</td>
<td>74-0878670</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) SAN ANTONIO AREA FOUNDATION</td>
<td>303 PEARL PKWY STE 114 SAN ANTONIO, TX 7821</td>
<td>74-6065414</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SAN ANTONIO BOTANICAL GARDEN SOCIETY INC</td>
<td>555 FUNSTON PL SAN ANTONIO, TX 78209</td>
<td>74-2178792</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) SAN ANTONIO FOOD BANK INC</td>
<td>5200 ENRIQUE M BARRERA PKW SAN ANTONIO, TX</td>
<td>74-2122979</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SAN ANTONIO MARRIAGE INITIATIVE</td>
<td>23995 BAT CAVE RD STE 150 SAN ANTONIO, TX 7</td>
<td>75-2840842</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SAN ANTONIO METROPOLITIC MINISTRY INC</td>
<td>1919 NW LOOP 410 STE 100 SAN ANTONIO, TX 78225</td>
<td>74-2285793</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) SAN ANTONIO MUSEUM OF ART</td>
<td>200 W JONES AVE SAN ANTONIO, TX 78215</td>
<td>74-2689943</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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   - Yes ☑
   - No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>5 (e) Amount of non-cash assistance</th>
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<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. SAN ANTONIO PUBLIC LIBRARY FOUNDATION 625 SHOOK AVE SAN ANTONIO, TX 78212 74-2283582 501 (C) 3 6,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. SAN ANTONIO REPORT 126 GONZALES ST 100 SAN ANTONIO, TX 78205 47-4820476 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. SAN ANTONIO RIVER FOUNDATION PO BOX 830045 SAN ANTONIO, TX 78283 42-1602181 501 (C) 3 5,500. FMV N/A</td>
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<td>4. SAN ANTONIO ZOOLOGICAL SOCIETY INC 3903 N SAINT MARYS ST SAN ANTONIO, TX 78212 74-1323695 501 (C) 3 57,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. SAN DIEGO COMMUNITY COLLEGE AUXILIARY ORGAN 3375 CAMINO DEL RIO S # 210 SAN DIEGO, CA 92109 33-0428972 501 (C) 3 110,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. SAN DIEGO COUNTY BAR FOUNDATION 4747 N 1ST ST FRESNO, CA 93726 95-3366651 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7. SAN DIEGO FRENCH-AMERICAN SCHOOL 6550 SOLEDAD MOUNTAIN RD LA JOLLA, CA 92037 93-0992063 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. SAN DIEGO HUMAN SOCIETY &amp; SPCA</td>
<td>5500 GAINES ST SAN DIEGO, CA 92110 85-1661688 501 (C) 3 39,440. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>9. SAN DIEGO INSTITUTE OF BIOLOGICAL RESEARCH 41 SCHUBERT CT IRVINE, CA 92637 24-4460338 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10. SAN DIEGO JEWISH ACADEMY 11860 CARMEL CREEK RD SAN DIEGO, CA 92130 95-3287745 501 (C) 3 14,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. SAN DIEGO LESBIAN GAY BISEXUAL AND TRANSGEN 3909 CENTRE ST SAN DIEGO, CA 92103 23-7332048 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. SAN DIEGO MUSEUM OF ART 1450 EL PRADO SAN DIEGO, CA 92101 95-1696715 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1)</strong></td>
<td>SAN DIEGO MUSEUM OF MAN</td>
<td>1350 EL PRADO SAN DIEGO, CA 92101</td>
<td>95-1709290</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(2)</strong></td>
<td>SAN DIEGO OPERA ASSOCIATION</td>
<td>233 A ST STE 500 SAN DIEGO, CA 92101</td>
<td>95-6044429</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(3)</strong></td>
<td>SAN DIEGO ORGANIZING PROJECT</td>
<td>4305 UNIVERSITY AVE STE 530 SAN DIEGO, CA 9</td>
<td>95-3284521</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(4)</strong></td>
<td>SAN DIEGO POLICE FOUNDATION</td>
<td>444 W BEECH ST STE 250 SAN DIEGO, CA 92101</td>
<td>33-0785173</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(5)</strong></td>
<td>SAN DIEGO PUBLIC LIBRARY FOUNDATION</td>
<td>330 PARK BLVD SAN DIEGO, CA 92101</td>
<td>33-0959608</td>
<td>501 (C) 3</td>
<td>6,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(6)</strong></td>
<td>SAN DIEGO REPETORY THEATRE INC</td>
<td>79 HORTON PLZ SAN DIEGO, CA 92101</td>
<td>95-3032308</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(7)</strong></td>
<td>SAN DIEGO RESCUE MISSION INC</td>
<td>120 ELM ST SAN DIEGO, CA 92101</td>
<td>95-1874073</td>
<td>501 (C) 3</td>
<td>51,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(8)</strong></td>
<td>SAN DIEGO ROCK CHURCH</td>
<td>2277 ROSECRAINS ST SAN DIEGO, CA 92106</td>
<td>33-0888725</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(9)</strong></td>
<td>SAN DIEGO SOCIAL VENTURE PARTNERS INC</td>
<td>PO BOX 60234 SAN DIEGO, CA 92166</td>
<td>26-4671099</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(10)</strong></td>
<td>SAN DIEGO STATE UNIVERSITY FOUNDATION</td>
<td>5250 CAMPANILE DR # MC1947 SAN DIEGO, CA 92</td>
<td>95-6042721</td>
<td>501 (C) 3</td>
<td>48,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(11)</strong></td>
<td>SAN DIEGO SYMPHONY ORCHESTRA ASSOCIATION</td>
<td>1245 7TH AVE SAN DIEGO, CA 92101</td>
<td>95-2040874</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>(12)</strong></td>
<td>SAN DIEGO WORKFORCE PARTNERSHIP INC</td>
<td>9246 LIGHTWAVE AVE SAN DIEGO, CA 92123</td>
<td>33-0660504</td>
<td>501 (C) 3</td>
<td>425,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  ■  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<tr>
<td>(1)</td>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
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<tr>
<td>1</td>
<td>SAN DIEGUITO RIVER VALLEY LAND CONSERVANCY</td>
<td>33-0166275</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>SAN DOMENICO SCHOOL</td>
<td>94-6080077</td>
<td>501 (c) 3</td>
<td>25,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SAN FRANCISCO ART INSTITUTE</td>
<td>94-1196211</td>
<td>501 (c) 3</td>
<td>141,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SAN FRANCISCO BALLET ASSOCIATION</td>
<td>94-1415298</td>
<td>501 (c) 3</td>
<td>127,350.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SAN FRANCISCO BAY BIRD OBSERVATORY</td>
<td>94-2788588</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>SAN FRANCISCO BICYCLE COALITIONEDUCATION FU</td>
<td>20-5182730</td>
<td>501 (c) 3</td>
<td>27,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>SAN FRANCISCO BOTANICAL GARDEN SOCIETY AT S</td>
<td>94-6050168</td>
<td>501 (c) 3</td>
<td>18,450.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>SAN FRANCISCO CHANTICLEER INC</td>
<td>94-2746487</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SAN FRANCISCO CITY IMPACT</td>
<td>90-0332259</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SAN FRANCISCO COMMUNITY LAND TR</td>
<td>11-3700403</td>
<td>501 (c) 3</td>
<td>200,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>SAN FRANCISCO CONSERVATORY OF MUSIC INC</td>
<td>94-1156610</td>
<td>501 (c) 3</td>
<td>213,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>SAN FRANCISCO COURT APPOINTED SPECIAL ADVOC</td>
<td>94-3039028</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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</tr>
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<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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</tr>
<tr>
<td>(b) EIN</td>
<td></td>
</tr>
<tr>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
</tr>
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<td>1</td>
<td>SAN FRANCISCO DAY SCHOOL</td>
</tr>
<tr>
<td>350 MASONIC AVE SAN FRANCISCO, CA 94118</td>
<td>94-2570257</td>
</tr>
<tr>
<td>2</td>
<td>SAN FRANCISCO FILM SOCIETY</td>
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<tr>
<td>39 MESA ST STE 110 SAN FRANCISCO, CA 94129</td>
<td>94-2663216</td>
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<tr>
<td>3</td>
<td>SAN FRANCISCO FIRE FIGHTERS TOY PROGRAM</td>
</tr>
<tr>
<td>1139 MISSION ST SAN FRANCISCO, CA 94103</td>
<td>94-2598851</td>
</tr>
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<td>4</td>
<td>SAN FRANCISCO FIRST TEE</td>
</tr>
<tr>
<td>99 HARDING RD SAN FRANCISCO, CA 94132</td>
<td>94-2169009</td>
</tr>
<tr>
<td>5</td>
<td>SAN FRANCISCO FOOD BANK</td>
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<tr>
<td>900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94101</td>
<td>94-3041517</td>
</tr>
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<td>6</td>
<td>SAN FRANCISCO FOUNDATION</td>
</tr>
<tr>
<td>1 EMBARCADERO CTR STE 1400 SAN FRANCISCO, CA 94111</td>
<td>94-0679337</td>
</tr>
<tr>
<td>7</td>
<td>SAN FRANCISCO FRIENDS SCHOOL</td>
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<tr>
<td>250 VALENCIA ST SAN FRANCISCO, CA 94103</td>
<td>94-3397589</td>
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<td>8</td>
<td>SAN FRANCISCO GENERAL HOSPITAL FOUNDATION</td>
</tr>
<tr>
<td>PO BOX 410836 SAN FRANCISCO, CA 94141</td>
<td>94-3189424</td>
</tr>
<tr>
<td>9</td>
<td>SAN FRANCISCO JAZZ ORGANIZATION</td>
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<tr>
<td>201 FRANKLIN ST SAN FRANCISCO, CA 94102</td>
<td>94-2990335</td>
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<td>10</td>
<td>SAN FRANCISCO LESBIAN GAY BISEXUAL TRANSGEN</td>
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<tr>
<td>1800 MARKET ST SAN FRANCISCO, CA 94102</td>
<td>94-3236718</td>
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<td>11</td>
<td>SAN FRANCISCO MUSEUM OF MODERN ART</td>
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<tr>
<td>151 3RD ST SAN FRANCISCO, CA 94103</td>
<td>94-1156300</td>
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<td>12</td>
<td>SAN FRANCISCO OPERA ASSOCIATION</td>
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<tr>
<td>301 VAN NESS AVE SAN FRANCISCO, CA 94102</td>
<td>94-0836240</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3 Enter total number of other organizations listed in the line 1 table .................................................................................................

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>SAN FRANCISCO PARKS ALLIANCE</td>
<td>1074 FOLSOM ST SAN FRANCISCO, CA 94103</td>
<td>23-7131784</td>
<td>501 (C) 3</td>
<td>88,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>SAN FRANCISCO PERFORMANCE INC</td>
<td>500 SUTTER ST STE 710 SAN FRANCISCO, CA 94111</td>
<td>94-2600147</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SAN FRANCISCO SOCIETY FOR THE PREVENTION OF</td>
<td>OF CRUELTY TO ANIMALS 201 ALABAMA S SAN FRA</td>
<td>94-0836580</td>
<td>501 (C) 3</td>
<td>59,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SAN FRANCISCO SYMPHONY</td>
<td>201 VAN NESS AVE SAN FRANCISCO, CA 94102</td>
<td>94-1156284</td>
<td>501 (C) 3</td>
<td>130,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SAN FRANCISCO UNIFIED SCHOOL DISTRICT</td>
<td>135 VAN NESS AVE SAN FRANCISCO, CA 94102</td>
<td>94-6000416</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SAN FRANCISCO UNIVERSITY HIGH SCHOOL</td>
<td>3065 JACKSON ST SAN FRANCISCO, CA 94115</td>
<td>23-7313754</td>
<td>501 (C) 3</td>
<td>143,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SAN FRANCISCO ZEN CENTER</td>
<td>300 PAGE ST SAN FRANCISCO, CA 94102</td>
<td>94-3143976</td>
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<td>13,100.</td>
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<td>SAN FRANCISCO ZOOLOGICAL SOCIETY</td>
<td>1 EDDO RD SAN FRANCISCO, CA 94132</td>
<td>94-1429538</td>
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<td>9</td>
<td>SAN GERONIMO VALLEY COMMUNITY CENTER</td>
<td>PO BOX 194 SAN GERONIMO, CA 94963</td>
<td>23-7172128</td>
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<td>130,000.</td>
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<td>10</td>
<td>SAN JOSE INSTITUTE OF CONTEMPORARY ART</td>
<td>560 S 1ST ST SAN JOSE, 95113</td>
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<td>15,000.</td>
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<td>11</td>
<td>SAN JOSE MERCURY NEWS WISH BOOK FUND INC</td>
<td>4 N 2ND ST SUITE # 710 SAN JOSE, CA 95113</td>
<td>77-0229665</td>
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<td>47,200.</td>
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<td>12</td>
<td>SAN JOSE MUSEUM OF ART ASSOCIATION</td>
<td>110 S MARKET ST SAN JOSE, CA 95113</td>
<td>23-7062028</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) SAN JOSE MUSEUM OF QUILTS &amp; TEXTILES</td>
<td>520 S 1ST ST SAN JOSE, CA 95113</td>
<td>77-0123939</td>
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<td>(2) SAN JUAN CITIZENS ALLIANCE</td>
<td>PO BOX 2461 DURANGO, CO 81302</td>
<td>84-1447465</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3) SAN JUAN DIEGO ACADEMY</td>
<td>1650 GODFREY AVE SW WYOMING, MI 49509</td>
<td>45-2103252</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SAN JUAN PRESERVATION TRUST</td>
<td>PO BOX 759 FRIDAY HARBOR, WA 98250</td>
<td>91-1078355</td>
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<td>5,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) SAN LUCAS TOLMIA Scholar</td>
<td>34 HILLTOP LN SAINT PAUL, MN 55116</td>
<td>20-1512668</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(6) SAN MARCO CATHOLIC CHURCH - MARCO ISLAND, F</td>
<td>851 SAN MARCO ROAD MARCO ISLAND, FL 34145</td>
<td>59-1590829</td>
<td>501 (C) 3</td>
<td>20,900.</td>
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<tr>
<td>(7) SAN MATEO COUNTY HISTORICAL ASSOCIATION</td>
<td>2200 BROADWAY ST REDWOOD CITY, CA 94063</td>
<td>23-7186194</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) SAN MATEO COUNTY PARKS AND RECREATION FOUND</td>
<td>215 BAY RD MENLO PARK, CA 94025</td>
<td>94-3036697</td>
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<td>5,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) SAN MATEO POLICE ACTIVITIES LEAGUE</td>
<td>200 FRANKLIN Fwy SAN MATEO, CA 9403</td>
<td>31-1593896</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SAN MATEO PUBLIC LIBRARY FOUNDATION</td>
<td>55 W 3RD AVE SAN MATEO, CA 94402</td>
<td>94-3191775</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SAN MATEO-FOSTER CITY COMMUNITY EDUCATION F</td>
<td>1170 CHESS DR FOSTER CITY, CA 94404</td>
<td>94-3110731</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) SAN MIGUEL ACADEMY OF NEWBURY</td>
<td>245 RENICK ST NEWBURY, NY 12550</td>
<td>20-4717497</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:

3. Enter total number of other organizations listed in the line 1 table:
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>SAN MIGUEL COMMUNITY FOUNDATION</td>
<td>220 N ZAPATA HWY STE 11 LAREDO, TX 78043</td>
<td>74-1869975</td>
<td>501 (C) 3</td>
<td>47,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SAN MIGUEL EDUCATION CENTER</td>
<td>525 BRANCH AVE PROVIDENCE, RI 2904</td>
<td>22-3232973</td>
<td>501 (C) 3</td>
<td>777,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SAN MIGUEL EDUCATIONAL FUND</td>
<td>PO BOX 1069 TELLURIDE, CO 81435</td>
<td>22-7317485</td>
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<td>13,000.</td>
<td>FMV</td>
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<td>4</td>
<td>SAN MIGUEL OF TUCSON CORPORATION</td>
<td>6601 S SAN FERNANDO RD TUCSON, AZ 85756</td>
<td>48-1270906</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SAN MIGUEL-CASA INC</td>
<td>5501A BALCONES DR 188 AUSTIN, TX 78731</td>
<td>74-2837551</td>
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<td>200,000.</td>
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<td>6</td>
<td>SAN RAMON VALLEY UNITED METHODIST CHURCH</td>
<td>902 DANVILLE BOULEVARD ALAMO, CA 94507-2420</td>
<td>94-1562109</td>
<td>501 (C) 3</td>
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<td>7</td>
<td>SANCTITY OF LIFE MINISTRIES</td>
<td>3919 OLD LEE HWY STE 81B FAIRFAX, VA 22030</td>
<td>54-1377782</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>SANCTUARY CHURCH</td>
<td>244 WEYROSSET ST # 3PL PROVIDENCE, RI 2903</td>
<td>45-4276712</td>
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<td>9</td>
<td>SANCTUARY COVENANT CHURCH MINNEAPOLIS MN</td>
<td>710 W BROADWAY AVE MINNEAPOLIS, MN 55411</td>
<td>45-0508526</td>
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<td>16,300.</td>
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<td>10</td>
<td>SANCTUARY DOWNTOWN</td>
<td>3101 W 31ST AVE DENVER, CO 80211</td>
<td>24-1782512</td>
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<td>11</td>
<td>SANCTUARY FOR FAMILIES INC</td>
<td>120 BROADWAY NEW YORK, NY 10271</td>
<td>13-3193119</td>
<td>501 (C) 3</td>
<td>127,000.</td>
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<td>12</td>
<td>SANCTUARY GOLF CLUB FOUNDATION INC</td>
<td>2801 WULFERT RD SANIBEL, FL 33957</td>
<td>84-2898123</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>3</td>
<td>SAND POINT ELEMENTARY PTA</td>
<td>27-3673859</td>
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<td>4</td>
<td>SAND SPRINGS UNITED METHODIST CHURCH</td>
<td>72-1602637</td>
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<td>5</td>
<td>SANDALS FOUNDATION INC</td>
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<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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# SCHEDULE I
## (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

## Part I
### General Information on Grants and Assistance

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II
### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>1</td>
<td>SANDY SPRING MUSEUM INC</td>
<td>17901 BENTLEY RD SANDY SPRING, MD 20860</td>
<td>52-1224038</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>SANDY SPRINGS EDUCATION FORCE INC</td>
<td>7580 S SPALDING LAKE DR ATLANTA, GA 30350</td>
<td>58-2051101</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>SANFORD HEALTH FOUNDATION</td>
<td>PO BOX 5039 SIOUX FALLS, SD 57117</td>
<td>36-3297853</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>SANFORD HEALTH FOUNDATION NORTH</td>
<td>PO BOX 5039 SIOUX FALLS, SD 57117</td>
<td>45-0398104</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SANIBEL COMMUNITY CHURCH</td>
<td>1740 PERIWINKLE WAY SANIBEL, FL 33957</td>
<td>59-6509436</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
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<td>6</td>
<td>SANIBEL CONGREGATIONAL UNITED CHURCH OF CHR</td>
<td>2050 PERIWINKLE WAY SANIBEL, FL 33957</td>
<td>59-2395747</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>7</td>
<td>SANIBEL-CAPIVATIA CONSERVATION FOUNDATION INC</td>
<td>PO BOX 839 SANIBEL, FL 33957</td>
<td>59-1205087</td>
<td>501 (C) 3</td>
<td>226,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>SANKARA EYE FOUNDATION USA</td>
<td>1900 MCCARTHY BLVD STE 302 MILPITAS, CA 950</td>
<td>77-6141976</td>
<td>501 (C) 3</td>
<td>101,285.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>SANKARA NETHRALAYA OM TRUST INC</td>
<td>9710 TRAVILLE GATEWAY DR # 392 ROCKVILLE, M</td>
<td>52-1611548</td>
<td>501 (C) 3</td>
<td>9,301.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>SANLANDO UNITED METHODIST CHURCH</td>
<td>1890 W STATE ROAD 434 LONGWOOD, FL 32750</td>
<td>59-1716306</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>SANSKRUTI FOUNDATION</td>
<td>6808 HORNWOOD DR HOUSTON, TX 77074</td>
<td>77-0315501</td>
<td>501 (C) 3</td>
<td>6,001.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12</td>
<td>SANTA BARBARA COTTAGE HOSPITAL FOUNDATION</td>
<td>PO BOX 689 SANTA BARBARA, CA 93102</td>
<td>95-3802238</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SANTA BARBARA DANCE INSTITUTE</td>
<td>26-4255635</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SANTA BARBARA EDUCATION FOUNDATION</td>
<td>77-0071544</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SANTA BARBARA FOUNDATION</td>
<td>95-1866094</td>
<td>501 (C) 3</td>
<td>28,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA BARBARA INTERNATIONAL FILM FESTIVAL</td>
<td>77-0073674</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SANTA BARBARA MUSEUM OF ART</td>
<td>95-1664122</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SANTA BARBARA NEIGHBORHOOD CLINICS</td>
<td>77-0496382</td>
<td>501 (C) 3</td>
<td>1,004,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA BARBARA PUBLIC LIBRARY FOUNDATION</td>
<td>46-0750188</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SANTA CATALINA CATHOLIC CHURCH</td>
<td>86-0659644</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA CATALINA SCHOOL</td>
<td>94-1156652</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA CLARITA BAPTIST CHURCH AND SCHOOL</td>
<td>95-3646933</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA CRUZ CO ANIMAL SHELTER FOUNDATION</td>
<td>51-0439604</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SANTA CRUZ SPCA AND HUMANE SOCIETY</td>
<td>94-6171565</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a) Name and address of organization or government</td>
<td>(b) EIN</td>
</tr>
<tr>
<td>1 SANTA FE ANIMAL SHELTER INC</td>
<td>85-6000084</td>
</tr>
<tr>
<td>2 SANTA FE CHAMBER MUSIC FESTIVAL LTD</td>
<td>85-0224461</td>
</tr>
<tr>
<td>3 SANTA FE COMMUNICATIONS INC</td>
<td>39-1420941</td>
</tr>
<tr>
<td>4 SANTA FE COMMUNITY FOUNDATION</td>
<td>85-0300479</td>
</tr>
<tr>
<td>5 SANTA FE CONSERVATION TRUST</td>
<td>85-0035498</td>
</tr>
<tr>
<td>6 SANTA FE COMMUNITY FOUNDATION</td>
<td>82-0839645</td>
</tr>
<tr>
<td>7 SANTA FE DREAMERS PROJECT</td>
<td>85-0325494</td>
</tr>
<tr>
<td>8 SANTA FE SYMPHONY ORCHESTRA &amp; CHORUS INC</td>
<td>85-0331684</td>
</tr>
<tr>
<td>9 SANTA MARIA URBAN MINISTRY</td>
<td>91-1811780</td>
</tr>
<tr>
<td>10 SANTA MARIA VALLEY COMMUNITY FOUNDATION</td>
<td>75-2983776</td>
</tr>
<tr>
<td>11 SANTA MONICA MUSEUM OF ART</td>
<td>95-3992968</td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 
3 Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>SANTA MONICA SYNAGOGUE</td>
<td>95-3642823</td>
<td>501 (C) 3</td>
<td>9,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SANTA MONICA-MALIBU EDUCATION FOUNDATION</td>
<td>95-3787674</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SANTA YNEZ VALLEY CHRISTIAN ACADEMY</td>
<td>95-3668536</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>SANTA YNEZ VALLEY PEOPLE HELPING PEOPLE</td>
<td>77-0338060</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SANTIAM MEMORIAL HOSPITAL</td>
<td>93-0415219</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SANYAS HOPE FOR CHILDREN</td>
<td>81-4965534</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SARAH LAWRENCE COLLEGE</td>
<td>23-7223216</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>SARAH ROBERTS FRENCH HOME</td>
<td>74-1175881</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9</td>
<td>SARASOTA BALLET OF FLORIDA INC</td>
<td>65-0135900</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SARASOTA MEDICAL PREGNANCY CENTER INC</td>
<td>05-0533818</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>SARASOTA MEMORIAL HEALTHCARE FOUNDATION</td>
<td>51-0188568</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SARASOTA OPERA ASSOCIATION INC</td>
<td>23-7089047</td>
<td>501 (C) 3</td>
<td>17,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SARATOGA FEDERATED CHURCH</td>
<td>14370 SARATOGA AVE SARATOGA, CA 95070</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) SARATOGA SPONSOR-A- SCHOLAR</td>
<td>PO BOX 107 SARATOGA SPRINGS, NY 12866</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) SARATOGA SPRINGS PERFORMING ARTS CENTER INC</td>
<td>108 AVENUE OF THE Pines SARATOGA SPRINGS, NY</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) SARCOMA FOUNDATION OF AMERICA INC</td>
<td>9899 MAIN ST STE 204 DAMASCUS, MD 20872</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) SARDIS PRESBYTERIAN CHURCH</td>
<td>6100 SARDIS RD CHARLOTTE, NC 28270</td>
<td>501 (c) 3</td>
<td>18,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) Saron Evangelical Lutheran Church</td>
<td>510 MAIN STREET ST JOSEPH, MI 49085-1341</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(7) SARVA DHARMA SERVICE CENTER INC</td>
<td>144 W FARMS RD FARMINGDALE, NJ 7727</td>
<td>501 (c) 3</td>
<td>5,008.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SARvey WILDLIFE CARE CENTER</td>
<td>PO BOX 3590 ARLINGTON, VA 20223</td>
<td>501 (c) 3</td>
<td>12,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) SASH FOUNDATION</td>
<td>1045 SANSOME ST SAN FRANCISCO, CA 94111</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) SAT-7 NORTH AMERICA</td>
<td>29509 CANVASBACK DR STE 101 EASTON, MD 2160</td>
<td>501 (c) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) SATANIC TEMPLE</td>
<td>64 BRIDGE ST SALEM, MA 1970</td>
<td>501 (c) 3</td>
<td>6,166.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) SATELL INSTITUTE</td>
<td>384 TECHNOLOGY DR MALVERN, PA 19355</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes [X]  
   No [  ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
|1  | SATI SANGHA  
528 ARIZONA AVE STE 208 SANTA MONICA, CA 90120 | 81-3671039 | 501 (C) 3 | 7,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|2  | SAV-A-LIFE INC  
1480 MCGUIRE RD VESTAVIA HILLS, AL 35216 | 63-0963150 | 501 (C) 3 | 5,500 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|3  | SAVANNAH CHINESE CHRISTIAN CHURCH INC  
425 W MONTGOMERY XRD SAVANNAH, GA 31406 | 26-4232147 | 501 (C) 3 | 28,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|4  | SAVANNAH COUNTRY DAY SCHOOL INC  
824 STILLWOOD DR SAVANNAH, GA 31419 | 58-0655290 | 501 (C) 3 | 6,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|5  | SAVANNAH MUSIC FESTIVAL INC  
200 E SAINT JULIAN ST STE 601 SAVANNAH, GA 31401 | 58-1401616 | 501 (C) 3 | 20,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|6  | SAVANNAH PHILHARMONIC CORPORATION  
1515 ABERCORN ST SAVANNAH, GA 31401 | 26-4016312 | 501 (C) 3 | 11,500 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|7  | SAVANNAH STATE COLLEGE FOUNDATION INC  
PO BOX 20399 SAVANNAH, GA 31404 | 23-7305890 | 501 (C) 3 | 50,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|8  | SAVE A CHILD'S HEART FOUNDATION US I INC  
PO BOX 59172 POTOMAC, MD 20859 | 52-1783323 | 501 (C) 3 | 31,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|9  | SAVE A LEG SAVE A LIFE FOUNDATION INC  
108 INDIGO RUN PONTE VEDRA BEACH, FL 32082 | 32-0467696 | 501 (C) 3 | 18,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|10 | SAVE BARNEGAT BAY INC  
725B MANTOLOKING RD BRICK, NJ 8723 | 47-4130132 | 501 (C) 3 | 14,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|11 | SAVE GIRAFFES NOW  
5333 N DENTWOOD DR DALLAS, TX 75220 | 83-4423842 | 501 (C) 3 | 10,000 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |
|12 | SAVE MOUNT DIABLO  
1901 OLYMPIC BLVD STE 320 WALNUT CREEK, CA 94-2681735 | 501 (C) 3 | 12,700 |  | FMV  | N/A  | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
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<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAVE OUR WILD SALMON COALITION 811 1ST AVE STE 305 SEATTLE, WA 98104</td>
<td>91-1673170</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 929757 NEEDHAM, MA 2492</td>
<td>04-2966192</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>SAVE THE BAY 300 FRANK H OGAWA PLZ OAKLAND, CA 94612</td>
<td>94-6078420</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE THE BAY INC</td>
<td>05-3043046</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE THE CHILDREN FEDERATION INC</td>
<td>06-0726487</td>
<td>501 (C) 3</td>
<td>1,408,201.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE THE KIDS MILLER SLCC PSET 2700 410 W 9800 S SANDY, UT</td>
<td>84-1768076</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE THE REDWOODS LEAGUE 111 SUTTER ST FL 11 SAN FRANCISCO, CA 94104</td>
<td>94-0843915</td>
<td>501 (C) 3</td>
<td>328,350.</td>
<td>FMV</td>
<td>N/A</td>
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<td>SAVE THE STORKS 900 CHAPEL ST # 2202 NEW HAVEN, CT 6510</td>
<td>06-0990195</td>
<td>501 (C) 3</td>
<td>295,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE VENICE INC 4050 LEE VANCE VW # 300 COLORADO SPRINGS, CO</td>
<td>46-1031815</td>
<td>501 (C) 3</td>
<td>7,940.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE WEYERHAEUSER CAMPUS 133 E 58TH ST STE 501 NEW YORK, NY 10022</td>
<td>23-7199996</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SAVE LIFE FOUNDATION USA</td>
<td>81-3674786</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>200 E 61ST ST APT 2548 NEW YORK, NY 10065</td>
<td>36-4775715</td>
<td>501 (C) 3</td>
<td>625,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [x]  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td><strong>(1)</strong> SAVING GRACE BIBLE CHURCH INC</td>
<td>46-3978433</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2550 ENGLEWOOD RD ENGLEWOOD, FL 34223</td>
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<tr>
<td><strong>(2)</strong> SAVING INNOCENCE INC</td>
<td>45-2049173</td>
<td>501 (c) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1509 WINONA BLVD LOS ANGELES, CA 90027</td>
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<tr>
<td><strong>(3)</strong> SAVING NATURE INC</td>
<td>84-2412702</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1 BLAND SPRING PL DURHAM, NC 27713</td>
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<td><strong>(4)</strong> SAXAPAHAW COMMUNITY CHEST</td>
<td>56-6055790</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1624 JORDAN DRIVE SAXAPAHAW, NC 27340</td>
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<tr>
<td><strong>(5)</strong> SAY YES TO EDUCATION INC</td>
<td>22-3139858</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ONE STATE STREET HARTFORD, CT 6103</td>
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<tr>
<td><strong>(6)</strong> SAYAJI U BA KIHIN VIPASSANA FOUNDATION</td>
<td>94-2925011</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 1167 NORTH FORK, NY 93643</td>
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<tr>
<td><strong>(7)</strong> SCALES MOUND COMMUNITY FOUNDATION</td>
<td>37-1841833</td>
<td>501 (c) 3</td>
<td>120,546.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>210 MAIN ST SCALES MOUND, IL 61075</td>
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</tr>
<tr>
<td><strong>(8)</strong> SCAN-HARBOR INC</td>
<td>13-2912963</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>345 EAST 102ND ST 3RD FL NEW YORK, NY 10029</td>
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<tr>
<td><strong>(9)</strong> SCARSDALE SYNAGOGUE</td>
<td>13-2644427</td>
<td>501 (c) 3</td>
<td>5,910.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 OGDEN RD SCARSDALE, NY 10583</td>
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<tr>
<td><strong>(10)</strong> SCARSDALE VOLUNTEER AMBULANCE CORPS INC</td>
<td>23-7066618</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 NEEBER ST SCARSDALE, NY 10583</td>
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<tr>
<td><strong>(11)</strong> SCENIC HUDSON INC</td>
<td>13-2898799</td>
<td>501 (c) 3</td>
<td>51,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>1 CIVIC CENTER PLZ STE 200 FOUGHTKEEPERS, NY</td>
<td></td>
<td></td>
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<tr>
<td><strong>(12)</strong> SCHAEFFER ACADEMY</td>
<td>41-1728882</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2700 SCHAEFFER LN NE ROCHESTER, MN 55906</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1</td>
<td>Scheck Hillel Community School Inc</td>
<td>59-1296635</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>2</td>
<td>Schlarman Academy of Danville Inc</td>
<td>36-4527038</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>3</td>
<td>Scholarship America Inc</td>
<td>36-2928657</td>
<td>501 (C) 3</td>
<td>229,862.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>4</td>
<td>Scholarship Committee of Wyandanch</td>
<td>47-3379829</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>5</td>
<td>Scholarship Foundation of Santa Barbara</td>
<td>23-7087774</td>
<td>501 (C) 3</td>
<td>54,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>6</td>
<td>Scholarship Foundation of St Louis</td>
<td>43-6031234</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>7</td>
<td>Scholarship Fund for Inner-City Children</td>
<td>51-0546401</td>
<td>501 (C) 3</td>
<td>24,605.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>8</td>
<td>Scholarship Fund of Alexandria</td>
<td>20-0031464</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>9</td>
<td>School Choice Wisconsin Inc</td>
<td>38-3695127</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<td>10</td>
<td>School District No 308</td>
<td>37-6004693</td>
<td>501 (C) 3</td>
<td>59,247.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>School District of Abbotsford</td>
<td>39-6031442</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
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<tr>
<td>12</td>
<td>School of American Ballet Inc</td>
<td>13-1275970</td>
<td>501 (C) 3</td>
<td>108,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>For Recipient's Exem</td>
<td></td>
</tr>
</tbody>
</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes ☑  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SCHOOL OF THE HOLY CHILD</td>
<td>2225 WESTCHESTER AVE RYE, NY 10580</td>
<td>13-1635305</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SCHOOL OF THE PERFORMING ARTS IN THE RICHMO</td>
<td>2106 N HAMILTON ST RICHMOND, VA 23230</td>
<td>54-1271758</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SCHOOL ON WHEELS INC</td>
<td>PO BOX 23371 VENTURA, CA 93002</td>
<td>95-4422640</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SCHOOL SISTERS OF NOTRE DAME</td>
<td>MILWAUKEE PROVINCE, INC. 13105 WATERTOWN PL</td>
<td>39-0806379</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SCHOOL SISTERS OF NOTRE DAME CENTRAL PACIFIC</td>
<td>170 GOOD COUNSEL DR MKANTO, MN 56001</td>
<td>45-1296033</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>SCHOOL SISTERS OF NOTRE DAME INC</td>
<td>170 GOOD COUNSEL DR MKANTO, MN 56001</td>
<td>41-0693976</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>SCHOOL THE WORLD</td>
<td>376 BOYLSTON ST # ST203 BOSTON, MA 2116</td>
<td>27-0176563</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>SCHOOL YEAR ABROAD INC</td>
<td>120 WATER ST NORTH ANDOVER, MA 1845</td>
<td>04-2589375</td>
<td>501 (C) 3</td>
<td>12,850.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SCHOOLSHOUSE CONNECTION</td>
<td>4401 CONNECTICUT AVE NW # 145 WASHINGTON,</td>
<td>81-5042929</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SCHOOLS FOR SALONE</td>
<td>PO BOX 25314 SEATTLE, WA 98165</td>
<td>26-1157489</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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<td>11</td>
<td>SCHOOLS MENTORING &amp; RESOURCE TEAM</td>
<td>1061 MARKET ST SAN FRANCISCO, CA 94103</td>
<td>94-3287468</td>
<td>501 (C) 3</td>
<td>15,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>SCHOOLS OF THE SACRED HEART-SAN FRANCISCO</td>
<td>2222 BROADWAY ST SAN FRANCISCO, CA 94115</td>
<td>94-1156671</td>
<td>501 (C) 3</td>
<td>143,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (c) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>SCHOOLYARD FILMS INC</td>
<td>26-1167783</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SCHLUCKILL RIVER DEVELOPMENT CORPORATION</td>
<td>23-2690558</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SCHUILLKILL RIVER GREENWAY ASSN</td>
<td>23-2048152</td>
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<td>31-1640316</td>
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<td>SCHWARTZ UNITED METHODIST CHURCH</td>
<td>43-0864708</td>
<td>501 (c) 3</td>
<td>10,500</td>
<td>FMV</td>
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<td>SCIENCE COUNCIL FOR GLOBAL INITIATIVES INC</td>
<td>26-4258384</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
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<td>13-4252173</td>
<td>501 (c) 3</td>
<td>11,000</td>
<td>FMV</td>
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<tr>
<td>SCIENCE HISTORY INSTITUTE</td>
<td>22-2817365</td>
<td>501 (c) 3</td>
<td>40,000</td>
<td>FMV</td>
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<td>SCIENCE LEADERSHIP ACADEMY RSA</td>
<td>61-1513400</td>
<td>501 (c) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>SCIENCE MUSEUM OF MINNESOTA</td>
<td>41-0706172</td>
<td>501 (c) 3</td>
<td>17,850</td>
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<td>SCIENCE MUSEUM OF VIRGINIA FOUNDATION INC</td>
<td>23-7185836</td>
<td>501 (c) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
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<td>(g) Description of noncash assistance</td>
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<tr>
<td>1</td>
<td>SCIENCE OF MIND FOUNDATION INC</td>
<td>27-0231514</td>
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<td>25,000.</td>
<td>FMV</td>
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<td>2</td>
<td>SCIENCE OF SPORT</td>
<td>46-3843390</td>
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<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SCIOTO RIDGE UNITED METHODIST CHURCH</td>
<td>31-0795017</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SCITUATE CORSE FOUNDATION</td>
<td>20-4264838</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SCLERODERMA FOUNDATION</td>
<td>52-1375827</td>
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<td>21,500.</td>
<td>FMV</td>
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<td>6</td>
<td>SCLERODERMA RESEARCH FOUNDATION</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>SCOPA HAS A DREAM INC</td>
<td>27-3044487</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>8</td>
<td>SCORE INTERNATIONAL INC</td>
<td>54-1605736</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SCOTTLAND MEMORIAL FOUNDATION INC</td>
<td>58-1828201</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>10</td>
<td>SCOTT &amp; WHITE HEALTHCARE FOUNDATION</td>
<td>27-3513154</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>11</td>
<td>SCOTT HANNON MEMORIAL FOUNDATION</td>
<td>58-2472057</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SCOTT ROBERTSON MEMORIAL JUNIOR GOLF ACADEMY</td>
<td>20-1237999</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   X Yes  ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. SCOTTSDALE BIBLE CHURCH 7601 E SHEA BLVD SCOTTSDALE, AZ 85260 86-0179808 501 (C) 3</td>
<td>19,900.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. SCOVILLE MEMORIAL LIBRARY ASSOCIATION INC 38 MAIN ST SALISBURY, CT 6068 06-0653164 501 (C) 3</td>
<td>12,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. SCRANTON PREPARATORY SCHOOL 1000 WYOMING AVE SCRANTON, PA 18509 23-2029472 501 (C) 3</td>
<td>6,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. SCRC 9795 CARRINI DR STE 208 BURBANK, CA 91504 23-7241858 501 (C) 3</td>
<td>20,000.</td>
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<tr>
<td>5. SCRIPPS COLLEGE 1030 COLUMBIA AVE CLAREMONT, CA 91711 95-1664123 501 (C) 3</td>
<td>150,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. SCRIPPS HEALTH 10140 CAMPUS POINT DR SAN DIEGO, CA 92121 95-1684089 501 (C) 3</td>
<td>39,001.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD LA JOLLA, CA 92037 33-0435954 501 (C) 3</td>
<td>1,017,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. SCRIPTURE UNION PO BOX 215 VALLEY FORGE, PA 19481 25-1228715 501 (C) 3</td>
<td>12,500.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. SCULPTURE CENTER INC 4419 PURVES ST LONG ISLAND CITY, NY 11101 13-1669204 501 (C) 3</td>
<td>115,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. SCULPTURE WALK INC 2 NORBERTA WAY JACKSONVILLE BEACH, FL 32250 47-5113603 501 (C) 3</td>
<td>12,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. SEA EDUCATION ASSOCIATION INC 171 WOODS HOLE RD FALMOUTH, MA 2540 04-2702102 501 (C) 3</td>
<td>63,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. SEA ISLAND PRESBYTERIAN CHURCH P.O. BOX 966 BEAUFORT, SC 29901 57-0878446 501 (C) 3</td>
<td>15,000.</td>
<td>FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
**Schedule I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>PO BOX 268 JOHNS ISLAND, SC 29457</td>
<td>47-2730495</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 65 THE SEA RANCH, CA 95497</td>
<td>94-2197071</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 8628 ALEXANDRIA, VA 22306</td>
<td>93-0792021</td>
<td>501 (C) 3</td>
<td>313,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2226 EASTLAKE AVE E # 108 SEATTLE, WA 98102</td>
<td>47-2272507</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 268 JOHNS ISLAND, SC 29457</td>
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<td>501 (C) 3</td>
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<tr>
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<td>94-2197071</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
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**SCHEDULE I**  
(Form 990)

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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---

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   **Answer:** Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<td>(1)</td>
<td>SEARCH AND CARE INC 1844 2ND AVE NEW YORK, NY 10128</td>
<td>23-7444790</td>
<td>501 (C) 3</td>
<td>102,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(2)</td>
<td>SEARCH FOR COMMON GROUND 1730RHOSE IS AVE 11TH FL WASHINGTON, DC 200</td>
<td>52-1257425</td>
<td>501 (C) 3</td>
<td>100,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>SEARCH HOMELESS SERVICES 2015 CONGRESS ST HOUSTON, TX 77002</td>
<td>76-0260403</td>
<td>501 (C) 3</td>
<td>43,416.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4)</td>
<td>SEARCH INC 1925 N CLYBOURN AVENUE CHICAGO, IL 60614</td>
<td>23-7058758</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5)</td>
<td>SEARCH MINISTRIES INC 4330 W VICKERY BLVD STE 150 FORT WORTH, TX</td>
<td>75-1627393</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>SEASIDE PRESBYTERIAN 367 LA VETA AVENUE ENCINITAS, CA 92024</td>
<td>33-0743811</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>SEAT OF WISDOM LIBRARY 297 E JEFFERSON AVE HAMPSHIRE, IL 60140</td>
<td>26-3360130</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>SEATON CATHOLIC SCHOOLS INC 3501 S LAKE DR SAINT FRANCIS, WI 53235</td>
<td>42-1630884</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>SEATTLE AQUARIUM SOCIETY-SEAS 1483 ALASKAN WAY PIER 59 SEATTLE, WA 98101</td>
<td>91-1189249</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101</td>
<td>91-0640788</td>
<td>501 (C) 3</td>
<td>22,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>SEATTLE ARTS AND LECTURES INC 340 15TH AVE E STE 301 SEATTLE, WA 98112</td>
<td>91-1384964</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>SEATTLE CANCER CARE ALLIANCE PO BOX 19223 SEATTLE, WA 98109</td>
<td>91-1935159</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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</tr>
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<tbody>
<tr>
<td>1</td>
<td>SEATTLE CHAMBER MUSIC FESTIVAL</td>
<td>91-1169836</td>
<td>501 (C) 3</td>
<td>60,750.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>SEATTLE CHILDRENS HOSPITAL</td>
<td>75-3202608</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SEATTLE CHILDRENS HOSPITAL</td>
<td>91-0564748</td>
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<td>FMV</td>
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<td>4</td>
<td>SEATTLE CHILDRENS HOSPITAL FOUNDATION</td>
<td>91-1345918</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SEATTLE CHILDRENS HOSPITAL GUILD ASSOCIATION</td>
<td>91-1156519</td>
<td>501 (C) 3</td>
<td>84,630.</td>
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<td>6</td>
<td>SEATTLE CHRISTIAN ASSEMBLY</td>
<td>91-1394056</td>
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<td>16,500.</td>
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<td>7</td>
<td>SEATTLE CHRISTIAN ASSEMBLY - SHORELINE, WA</td>
<td>91-1208213</td>
<td>501 (C) 3</td>
<td>7,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>SEATTLE COLLEGES FOUNDATION</td>
<td>83-0551671</td>
<td>501 (C) 3</td>
<td>68,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SEATTLE FASTPITCH CLUB</td>
<td>30-0284574</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>SEATTLE HEJBREW ACADEMY</td>
<td>91-0581660</td>
<td>501 (C) 3</td>
<td>16,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>SEATTLE INSTITUTE FOR EARLY CHILD DEVELOPMENT</td>
<td>91-0894643</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ❌

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>1.1 SEATTLE OPERA</td>
<td>91-0760426</td>
<td>501 (C) 3</td>
<td>12,820.</td>
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<td>N/A</td>
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<tr>
<td>1.2 SEATTLE PACIFIC UNIVERSITY</td>
<td>91-0565553</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1.3 SEATTLE PARKS FOUNDATION</td>
<td>91-1998597</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1.4 SEATTLE PREPARATORY SCHOOL</td>
<td>91-0644000</td>
<td>501 (C) 3</td>
<td>18,575.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.5 SEATTLE PRO MUSICA</td>
<td>51-0157286</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.6 SEATTLE PUBLIC LIBRARY FOUNDATION</td>
<td>91-1140642</td>
<td>501 (C) 3</td>
<td>47,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1.7 SEATTLE REPERTORY THEATRE</td>
<td>91-0756535</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>1.8 SEATTLE SHAKESPEARE FESTIVAL</td>
<td>91-1512717</td>
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<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.9 SEATTLE SYMPHONY ORCHESTRA INC</td>
<td>91-0667412</td>
<td>501 (C) 3</td>
<td>58,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.10 SEATTLE THEATRE GROUP</td>
<td>94-3130227</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.11 SEATTLE TIMES FUND FOR THE NEEDY</td>
<td>94-1081445</td>
<td>501 (C) 3</td>
<td>33,834.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1.12 SEATTLE UNIVERSITY</td>
<td>91-0565006</td>
<td>501 (C) 3</td>
<td>1,083,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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### Part I  General Information on Grants and Assistance

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   ![Yes][1] ![No](false)

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.**

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<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>[1] SEATTLES UNION GOSPEL MISSION 3800 S OTHELLO ST SEATTLE, WA 98118</td>
<td>91-0595029</td>
<td>501 (C) 3</td>
<td>87,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[2] SEBASTIAN UNITED METHODIST CHURCH 1029 MAIN STREET SEBASTIAN, FL 32958</td>
<td>59-6136385</td>
<td>501 (C) 3</td>
<td>10,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[3] SECOND AMENDMENT FOUNDATION 12500 NE 10TH PL BELLEVUE, WA 98005</td>
<td>91-6184167</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[4] SECOND BAPTIST CHURCH 1280 SUMMIT ST ELGIN, TX 77057</td>
<td>36-2907506</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[5] SECOND BAPTIST CHURCH 6400 WOODWAY DR HOUSTON, IL 60120</td>
<td>74-1222252</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[6] SECOND CHANCE ANIMAL RESCUE FOUNDATION PO BOX 44 LAMAR, CO 81052</td>
<td>20-1988456</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>[7] SECOND CHANCE EDUCATIONAL ALLIANCE INC 100 PEARL ST WATERTOWN, CT 6103</td>
<td>81-1725510</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[8] SECOND CHANCE INC 1700 RIDGELY ST BALTIMORE, MD 21230</td>
<td>52-2276640</td>
<td>501 (C) 3</td>
<td>110,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[9] SECOND CHANCE STABLES INC 6819 JOE BRANSON RD BENNETT, NC 27208</td>
<td>83-4632354</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[10] SECOND CONGREGATIONAL CHURCH OF BOXFORD MAS PO BOX 508 WEST BOXFORD, MA 1885</td>
<td>04-6051066</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[11] SECOND CONGREGATIONAL CHURCH OF GREENWICH, CT 139 EAST PUTNAM AVENUE GREENWICH, CT 6830</td>
<td>06-0646893</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>[12] SECOND HARVEST 624 CLAY ST PITTSBURGH, PA 15215</td>
<td>84-2075119</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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**Schedule I (Form 990) 2020**

VSA 0E1288.1.000 18674H 1467 V 20-7.21
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I**  General Information on Grants and Assistance

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   ![Yes][1]

   X Yes  

   ![No][2]

   No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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</thead>
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<tr>
<td>(1) SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA</td>
<td>411 MERCY DR ORLANDO, FL 32805</td>
<td>59-2142315</td>
<td>501 (C) 3</td>
<td>92,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SECOND HARVEST FOOD BANK OF EAST TENNESSEE</td>
<td>136 HARVEST LN MARYVILLE, TN 37801</td>
<td>58-1450139</td>
<td>501 (C) 3</td>
<td>34,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SECOND HARVEST FOOD BANK OF GREATER NEW ORL</td>
<td>700 EDWARDS AVE NEW ORLEANS, LA 70123</td>
<td>72-0956468</td>
<td>501 (C) 3</td>
<td>36,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SECOND HARVEST FOOD BANK OF METROLINA INC</td>
<td>500 SPRATT ST STE B CHARLOTTE, NC 28206</td>
<td>56-1352593</td>
<td>501 (C) 3</td>
<td>41,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SECOND HARVEST FOOD BANK OF MIDDLE TENNESSE</td>
<td>331 GREAT CIRCLE RD NASHVILLE, TN 37228</td>
<td>62-1049447</td>
<td>501 (C) 3</td>
<td>450,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SECOND HARVEST FOOD BANK OF NORTHEAST TENNE</td>
<td>1020 JERICHO DR KINGSPORT, TN 37663</td>
<td>62-1303822</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<tr>
<td>(7) SECOND HARVEST FOOD BANK OF NORTHWEST NORTH</td>
<td>3655 REED ST WINSTON SALEM, NC 27107</td>
<td>58-1457912</td>
<td>501 (C) 3</td>
<td>84,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) SECOND HARVEST FOOD BANK OF NORTHWEST PENNS</td>
<td>1507 GRIMM DR ERIE, PA 16501</td>
<td>25-1405798</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) SECOND HARVEST FOOD BANK OF ORANGE COUNTY I</td>
<td>8014 MARINE WAY IRVINE, CA 92618</td>
<td>32-0362611</td>
<td>501 (C) 3</td>
<td>131,333.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) SECOND HARVEST FOOD BANK OF ORANGE COUNTY I</td>
<td>8014 MARINE WAY IRVINE, CA 92618</td>
<td>32-0362611</td>
<td>501 (C) 3</td>
<td>11,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY</td>
<td>800 OHLONE PKWY WATSONVILLE, CA 95076</td>
<td>77-0326685</td>
<td>501 (C) 3</td>
<td>121,406.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) SECOND HARVEST FOODBANK OF NORTH CENTRAL OH</td>
<td>5510 BAUMHART RD LORAIN, OH 44053</td>
<td>34-1446685</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: __________________________

3. Enter total number of other organizations listed in the line 1 table: __________________________

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

» Attach to Form 990.

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

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| 1 | (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|--------------------------------------------------|--------|-------------------------------|------------------------|-------------------------------|----------------------------------|---------------------------------|---------------------------------
| (1) | SECOND HARVEST FOODBANK OF SOUTHERN WISCONS | 2802 DAIRY DR MADISON, WI 53718 | 501 (C) 3 | 104,150. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (2) | SECOND HARVEST FOODBANK OF THE MAHONING VAL | 2805 SALT SPRINGS RD YOUNGSTOWN, OH 44509 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (3) | SECOND HARVEST HEARTLAND | 7101 WINNETKA AVE N MINNEAPOLIS, MN 55428 | 501 (C) 3 | 607,025. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (4) | SECOND HARVEST INLAND NORTHWEST | 1234 E FRONT AVE SPOKANE, WA 99202 | 501 (C) 3 | 47,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (5) | SECOND HARVEST NORTHERN LAKES FOOD BANK | 4503 AIRPARK BLVD DULUTH, MN 55811 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (6) | SECOND HARVEST OF SILICON VALLEY | 750 CURTNER AVE SAN JOSE, CA 95125 | 501 (C) 3 | 1,290,383. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (7) | SECOND HARVEST OF THE GREATER VALLEY | 1220 VANDERBILT CIR MANTECA, CA 95337 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (8) | SECOND HELPINGS ATLANTA INC | PO BOX 720582 ATLANTA, GA 30358 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (9) | SECOND HELPINGS INC | 1121 SOUTHEASTERN AVE INDIANAPOLIS, IN 46202 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (10) | SECOND PLACE | 25657 S KENSINGTON LN MONEE, IL 60449 | 501 (C) 3 | 16,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (11) | SECOND PRESBYTERIAN CHURCH | 5 NORTH FIFTH STREET RICHMOND, VA 23219 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| | | | | | | | |
| (12) | SECOND PRESBYTERIAN CHURCH | 3511 BELMONT BOULEVARD NASHVILLE, TN 37215 | 501 (C) 3 | 30,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
OE12881.000
18674H 1467 V 20-7.21
SCHEDULE I (Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  ☐ No  ☑

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECOND PRESBYTERIAN CHURCH 4055 POPLAR AVE MEMPHIS, AR 72227</td>
<td>62-0483212</td>
<td>501 (C) 3</td>
<td>7,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND PRESBYTERIAN CHURCH 318 E 55TH ST KANSAS CITY, MO 64113</td>
<td>44-0545831</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND PRESBYTERIAN CHURCH 600 PLEASANT VALLEY DR LITTLE ROCK, TN 3811</td>
<td>71-0236919</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND SERVINGS OF HOUSTON 8825 KNIGHT RD HOUSTON, TX 77054</td>
<td>47-1173622</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND STAGE THEATRE 1501 BROADWAY NEW YORK, NY 10036</td>
<td>13-3021180</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND STEP INC PO BOX 602213 NEWTONVILLE, MA 2460</td>
<td>22-2868513</td>
<td>501 (C) 3</td>
<td>106,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND STONE INC 6205 NORTDALE DR BLACK HAWK, SD 57718</td>
<td>85-3062954</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND UNITARIAN CHURCH 656 W BARRY AVE CHICAGO, IL 60657</td>
<td>36-2961333</td>
<td>501 (C) 3</td>
<td>16,320.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SECOND WIND FUND INC 303 E 17TH AVE STE 405 DENVER, CO 80203</td>
<td>73-1701536</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECOND WIND PROGRAMS INC 402 OFFICE PARK DR STE 310 MOUNTAIN BRK, AL</td>
<td>68-0174970</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECU FAMILY HOUSE AT UNC HOSPITALS 123 OLD MASON FARM RD CHAPEL HILL, NC 27517</td>
<td>91-2108125</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SECULAR ORDER OF THE SERVANTS OF MARY 3120 W JACKSON BLVD CHICAGO, IL 60612</td>
<td>45-5474676</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SECULAR STUDENT ALLIANCE</td>
<td>41-1967141</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>SECUREFUTURES FOUNDATION INC</td>
<td>20-5203533</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3</td>
<td>SECURING AMERICAS FUTURE ENERGY FOUNDATION</td>
<td>20-1727977</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>SEDALIA SCHOOL DISTRICT FOUNDATION INC</td>
<td>43-1753783</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>SEE JESUS NET</td>
<td>23-3000534</td>
<td>501 (C) 3</td>
<td>69,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6</td>
<td>SEE YOU AT THE TOP INC</td>
<td>45-2392163</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SEED AUSTIN INC</td>
<td>27-2647668</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>SEED BASKET INC</td>
<td>45-2255258</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>SEED FOUNDATION INC</td>
<td>54-1850819</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>SEED GLOBAL HEALTH INC</td>
<td>45-3064098</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>SEED SAVERS EXCHANGE INC</td>
<td>43-1214133</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>SEEDLING FOUNDATION</td>
<td>331-1427991</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| SELAMTA FAMILY PROJECT INC  
PO BOX 1857 LAKE PLACID, FL 33862  
20-2199559 501 (C) 3  
15,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELF ENHANCEMENT INC  
3920 N KERBY AVE PORTLAND, OR 97227  
93-1086629 501 (C) 3  
15,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELF HELP INTERNATIONAL  
207 20TH ST NW SUITE A WASHINGTON, DC 20007  
42-0844679 501 (C) 3  
11,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELFHELP COMMUNITY SERVICES FOUNDATION INC  
520 EIGHTH AVENUE NEW YORK, NY 10018  
13-5654450 501 (C) 3  
6,750.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELFHELP COMMUNITY SERVICES INC  
520 EIGHTH AVENUE NEW YORK, NY 10018  
13-1624178 501 (C) 3  
34,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELFLESS LOVE FOUNDATION INC  
1095 MILITARY TRl FL JUPITER, FL 33458  
47-4544148 501 (C) 3  
6,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SELF-REALIZATION FELLOWSHIP CHURCH  
3880 SAN RAFAEL AVE LOS ANGELES, CA 90065  
95-1942336 501 (C) 3  
96,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |
| SEMILLA NUEVA  
3909 W CAMAS ST BOISE, ID 83705  
36-4671687 501 (C) 3  
30,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM | | | | | | | |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I - General Information on Grants and Assistance

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   - Yes [X]  
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### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. | SEMINOLE BOOSTERS INC  
    PO BOX 1353 TALLAHASSEE, FL 32302 | 59-1561180 | 501 (C) 3 | 43,020. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2. | SEMIOTEXTE LIMITED  
    2571 W 5TH ST LOS ANGELES, CA 90057 | 13-4003149 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3. | SEMPER FI & AMERICAS FUND  
    825 COLLEGE BLVD STE 102 PMB 609 OCEANSIDE, | 26-0086305 | 501 (C) 3 | 257,800. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4. | SEMPERVIRENS FUND  
    419 S SAN ANTONIO RD STE 211 LOS ALTOS, CA | 94-2155097 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5. | SENATOR GEORGE J MITCHELL SCHOLARSHIP RESEA  
    75 WASHINGTON AVE STE 2E PORTLAND, ME 4101 | 01-0523390 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6. | SEND INTERNATIONAL OF THE UNITED STATES INC  
    PO BOX 513 FARMINGTON, MI 48332 | 41-0713904 | 501 (C) 3 | 19,899. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7. | SEND NORTH  
    4227 SPENARD RD UNIT B ANCHORAGE, AK 99517 | 92-0021800 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8. | SEND RELIEF INC  
    4200 N POINT PKWY ALPHARETTA, GA 30022 | 75-1977130 | 501 (C) 3 | 57,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9. | SENIOR DOG LODGE & ANIMAL RESCUE  
    997 MILL CREEK RD SUNBRIGHT, TN 37872 | 45-2654722 | 501 (C) 3 | 9,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10. | SENIOR DOG SANCTUARY OF MARYLAND INC  
    8336 WB AND A RD SEVERN, MD 21144 | 47-3708109 | 501 (C) 3 | 30,325. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11. | SENIOR SERVICES FOR NORTHERN CALIFORNIA  
    1525 POST ST SAN FRANCISCO, CA 94109 | 94-6615829 | 501 (C) 3 | 6,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12. | SENS FOUNDATION INC  
    110 PIONEER WAY STE J MOUNTAIN VIEW, CA 940 94-3473864 | 96-3473864 | 501 (C) 3 | 115,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I
**(Form 990)**

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - **Yes**
   - **No**

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>SENT NETWORK INC</td>
<td>46-0750704</td>
<td>501 (C) 3</td>
<td>10,700</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>SENTIENT MEDIA</td>
<td>83-0804345</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>SEOUL NATIONAL UNIVERSITY FOUNDATION INC</td>
<td>26-2615329</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>SEPHARDIC CENTER FOR RABBINICAL AND SECULAR</td>
<td>13-4062240</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SEQUIM COMMUNITY CHURCH</td>
<td>91-0917399</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
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<td>6</td>
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<td>7</td>
<td>SEQUOIA HIGH SCHOOL EDUCATION FOUNDATION</td>
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<td>9</td>
<td>SERENDIPITY EQUINE INC</td>
<td>83-3658982</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>SERENITY BAPTIST CHURCH INC.</td>
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<td>15,000</td>
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<tr>
<td>11</td>
<td>SERENITY HOUSE OF CLALLAM COUNTY</td>
<td>91-1180069</td>
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<tr>
<td>12</td>
<td>SEREOlIPI NOMADIC EDUCATION FOUNDATION INC</td>
<td>41-2189604</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1</td>
<td>SERGE GLOBAL INC</td>
<td>23-2223692</td>
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<td>2</td>
<td>SERIOUS FUN CHILDRENS NETWORK INC</td>
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<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
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<td>3</td>
<td>SERUM INC</td>
<td>84-3946685</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>4</td>
<td>SERVANT FOUNDATION</td>
<td>43-1890105</td>
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<td>35,000.</td>
<td>FMV</td>
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<td>6</td>
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<td>13-1740039</td>
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<td>FMV</td>
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<td>7</td>
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<td>36-6055873</td>
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<td>54-1962908</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>SERVICE EDUCATION &amp; ADVENTURE</td>
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<td>15,000.</td>
<td>FMV</td>
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<td>10</td>
<td>SERVICE TO SCHOOL</td>
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<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>SERVICE YEAR EXCHANGE INC</td>
<td>47-4970343</td>
<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SERVICES &amp; ADVOCACY FOR GAY LESBIAN BISEXUA</td>
<td>13-2947657</td>
<td>501 (C) 3</td>
<td>24,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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▶ Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERVICES FOR THE UNDERSERVED INC</td>
<td>463 FASHION AVE FL 17 NEW YORK, NY 10018</td>
<td>91-1918247</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SERVICESOURCE FOUNDATION INC</td>
<td>10467 WHITE GRANITE DR OAKTON, VA 22124</td>
<td>20-1438270</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SERVING PARAGUAY</td>
<td>8405 SHADOWOOD AVE BROKEN ARK, OK 74011</td>
<td>27-1490467</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SERVITE HIGH SCHOOL ALUMNI ASSOCIATION</td>
<td>1952 W LA PALMA AVE ANAHEIM, CA 92801</td>
<td>95-3807071</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SESAME WORKSHOP</td>
<td>1900 BROADWAY NEW YORK, NY 10023</td>
<td>13-2655731</td>
<td>501 (C) 3</td>
<td>13,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SET FREE MINISTRIES</td>
<td>700 36TH ST STE 108 GRAND RAPIDS, MI 495</td>
<td>38-3497803</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SETI INSTITUTE</td>
<td>189 BERNARDO AVE STE 100 MOUNTAIN VIEW, CA</td>
<td>94-2951356</td>
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<td>177,000.</td>
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<tr>
<td>SETON EDUCATION PARTNERS</td>
<td>1935 CRANE AVE CINCINNATI, OH 45207</td>
<td>26-2782492</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
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<td>SETON HALL PREPARATORY SCHOOL</td>
<td>170 NORTHFIELD AVE WEST ORANGE, NJ 7052</td>
<td>22-2807217</td>
<td>501 (C) 3</td>
<td>12,000.</td>
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<td>SETON HALL UNIVERSITY</td>
<td>400 S ORANGE AVE SOUTH ORANGE, NJ 7079</td>
<td>22-1500645</td>
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<td>SEVA FOUNDATION</td>
<td>1786 5TH ST BERKELEY, CA 94710</td>
<td>38-2231279</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SEVALAYA USA INC</td>
<td>PO BOX 1209 CUPERTINO, CA 95015</td>
<td>82-1291775</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SEVEN HILLS CHURCH 6800 HAZEL CT FLORENCE, KY 41042</td>
<td>31-1083473</td>
<td>501 (C) 3</td>
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<tr>
<td>(2) SEVEN HILLS SCHOOL 1311 OVERTREE RD RICHMOND, VA 23223</td>
<td>56-2030262</td>
<td>501 (C) 3</td>
<td>7,500. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SEVEN HILLS SCHOOL 875 S SAN CARLOS DR WALNUT CREEK, CA 93220</td>
<td>94-1628213</td>
<td>501 (C) 3</td>
<td>58,510. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SEVEN MILE ROAD CHURCH 84 GREEN ST MELROSE, MA 02176</td>
<td>20-4192247</td>
<td>501 (C) 3</td>
<td>13,050. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td>(5) SEVEN RIVERS PRESBYTERIAN CHURCH 4221 W GULF TO LAKE HWY LECANTO, FL 34461</td>
<td>59-2276512</td>
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<td>15,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
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<tr>
<td>(6) SEVENTH REGIMENT ARMY CONSERVANCY INC 643 PARK AVE E 3 NEW YORK, NY 10065</td>
<td>13-4086800</td>
<td>501 (C) 3</td>
<td>130,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) SEVENTH-DAY ADVENTISTS LOMA LINDA UNIVERSITY PO BOX 2000 LOMA LINDA, CA 92354</td>
<td>95-3522679</td>
<td>501 (C) 3</td>
<td>12,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SEVERAL SOURCES FOUNDATION INC 300 AIRMOUNT AVE RAGET, NJ 7446</td>
<td>22-2368937</td>
<td>501 (C) 3</td>
<td>40,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(9) SEVERN LEADERSHIP GROUP INC 564 TREMONT AV ANNA NOTALIS, MD 21409</td>
<td>82-1721118</td>
<td>501 (C) 3</td>
<td>75,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) SEN POWERFUL 6327 FRANKLIN AVE SE AUBURN, WA 98092</td>
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<tr>
<td>(11) SEN PRODUCTIONS INC 762 FULTON ST SAN FRANCISCO, CA 94102</td>
<td>94-2748213</td>
<td>501 (C) 3</td>
<td>15,000. FMV</td>
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<tr>
<td>(12) SENA INTERNATIONAL INC 100 W OAKS MALL HOUSTON, TX 77082</td>
<td>20-0638718</td>
<td>501 (C) 3</td>
<td>166,858. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
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<tbody>
<tr>
<td>(1) SENWARK JEWISH PRESCHOOL CO-OP</td>
<td>1625 S COLUMBIAN WAY SEATTLE, WA 98108</td>
<td>73-1652321</td>
<td>501 (C) 3</td>
<td>5,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SEXUAL MINORITY YOUTH ASSISTANCE LEAGUE</td>
<td>410 7TH ST SE WASHINGTON, DC 20003</td>
<td>52-1394900</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SEXUALITY INFORMATION AND EDUCATION COUNCIL</td>
<td>1012 14TH ST NW STE 1108 WASHINGTON, DC 20005</td>
<td>13-2508249</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SF NEW DEAL</td>
<td>2501 PHELPS ST SAN FRANCISCO, CA 94124</td>
<td>85-0498939</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) SGI CAT ALLIES INC</td>
<td>PO BOX 903 APALACHICOLA, FL 32329</td>
<td>47-1636160</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SHA AR ZAHAY</td>
<td>290 DOLORES ST SAN FRANCISCO, CA 94103</td>
<td>94-2477006</td>
<td>501 (C) 3</td>
<td>8,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) SHAAREI BRACHA</td>
<td>860 GATEWAY STREET HILLSIDE, NJ 7205</td>
<td>83-3109736</td>
<td>501 (C) 3</td>
<td>206,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) SHABBAT PROJECT INC</td>
<td>79 MADISON AVE FL 4 NEW YORK, NY 10016</td>
<td>46-4715368</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) SHADE</td>
<td>PO BOX 398 GREAT FALLS, VA 22066</td>
<td>47-1489275</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SHADES MOUNTAIN BAPTIST CHURCH</td>
<td>2017 COLUMBIANA RD VESTAVIA HILLS, AL 35216</td>
<td>63-0348133</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) SHADES MOUNTAIN INDEPENDENT CHURCH</td>
<td>2281 OLD TYLER RD HOOVER, AL 35226</td>
<td>63-0590152</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) SHADOW MOUNTAIN COMMUNITY CHURCH</td>
<td>2100 GREENFIELD DR EL CAJON, CA 92019</td>
<td>95-1642389</td>
<td>501 (C) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SHADOW WOOD CHARITABLE FOUNDATION INC</td>
<td>24600 S TAMiami TRL BONITA SPRINGS, FL 3413</td>
<td>38-3881140</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) SHADY GROVE UNITED METHODIST CHURCH</td>
<td>4825 POuncey TRACT RD GLEN ALLEN, VA 23059</td>
<td>54-0678505</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) SHADY HILL SCHOOL</td>
<td>178 CoolIDGE HL CAMBRIDGE, MA 2138</td>
<td>04-2103628</td>
<td>501 (C) 3</td>
<td>176,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) SHADY SIDE ACADEMY</td>
<td>ALUMNI &amp; DEVELOPMENT OFFICE 423 FOX CHAPEL</td>
<td>25-0965561</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) SHAKE-A-LEG MIAMI INC</td>
<td>2620 S BAYSHORE DR MIAMI, FL 33133</td>
<td>65-0611917</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) SHAKESPEARE THEATRE</td>
<td>516 8TH ST SE WASHINGTON, DC 20003</td>
<td>52-1405988</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) SHAKESPEARE-SAN FRANCISCO</td>
<td>PO Box 460937 SAN FRANCISCO, CA 94146</td>
<td>94-2867269</td>
<td>501 (C) 3</td>
<td>82,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SHALOM FOUNDATION</td>
<td>845 3RD AVE FL 6 NEW YORK, NY 10022</td>
<td>13-3941865</td>
<td>501 (C) 3</td>
<td>130,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) SHALOM AUSTIN</td>
<td>7300 HART LN AUSTIN, TX 78731</td>
<td>74-1469465</td>
<td>501 (C) 3</td>
<td>9,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) SHALOM FOUNDATION</td>
<td>412 CUMMINS ST FRANKLIN, TN 37064</td>
<td>95-4894733</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) SHALOM HOUSE</td>
<td>9 S 15TH ST HARRISBURG, PA 17104</td>
<td>23-2447254</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) SHALOM TORAH CENTERS</td>
<td>70 AMBOY RD MORGANVILLE, NJ 7751</td>
<td>22-2259792</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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**Attach to Form 990.**

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## Part I

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SHAMBHALA MOUNTAIN CENTER</td>
<td>84-1535130</td>
<td>501 (c) 3</td>
<td>20,000.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SHANDON BAPTIST CHURCH</td>
<td>57-0341196</td>
<td>501 (c) 3</td>
<td>17,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SHANDON UNITED METHODIST CHURCH</td>
<td>57-0366558</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SHANES KINDNESS</td>
<td>81-1232651</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>SHANTI BHAVAN CHILDREN'S PROJECT</td>
<td>26-4188445</td>
<td>501 (c) 3</td>
<td>7,775.</td>
<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7</td>
<td>SHACHANNAHS HOPE INC</td>
<td>32-0011220</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>8</td>
<td>SHARAY TORAH CONGREGATION OF THE CITY OF CA</td>
<td>34-0753558</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>9</td>
<td>SHARE AND CARE FOUNDATION FOR INDIA</td>
<td>22-2458395</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SHARE FOOD PROGRAM INC</td>
<td>23-2360819</td>
<td>501 (c) 3</td>
<td>96,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SHARE MY MEALS</td>
<td>84-4149439</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SHARE OUR STRENGTH</td>
<td>52-1367538</td>
<td>501 (c) 3</td>
<td>2,021,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHARE THE HOPE</td>
<td>30-0077193</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHARED HOPE INTERNATIONAL</td>
<td>91-1938635</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHARED INTEREST INC</td>
<td>13-3836581</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHAREWELL</td>
<td>20-1470992</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHARING AND CARING HANDS INC</td>
<td>36-3412619</td>
<td>501 (C) 3</td>
<td>72,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHARON ACADEMY</td>
<td>03-0350587</td>
<td>501 (C) 3</td>
<td>90,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>SHARON DAY CARE CENTER INC</td>
<td>22-2595916</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>SHARPERET INC</td>
<td>13-4198529</td>
<td>501 (C) 3</td>
<td>29,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHATTERPROOF A NONPROFIT CORP</td>
<td>45-4619712</td>
<td>501 (C) 3</td>
<td>111,256.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHAW UNIVERSITY</td>
<td>56-0530235</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHE IS SAFE INC</td>
<td>22-3882094</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHEBOYGAN COUNTY FOOD BANK INC</td>
<td>39-1733883</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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|        | Yes ☑ No ❌ |
| 2      | Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. |

<table>
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<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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<td></td>
</tr>
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</tr>
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<td>(d) Amount of cash grant</td>
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<td>(e) Amount of non-cash assistance</td>
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</tr>
<tr>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td></td>
</tr>
<tr>
<td>(g) Description of noncash assistance</td>
<td></td>
</tr>
<tr>
<td>(h) Purpose of grant or assistance</td>
<td></td>
</tr>
</tbody>
</table>

1. SHEBOYGAN COUNTY HUMANE SOCIETY  
   3107 N 20TH ST SHEBOYGAN, WI 53083  
   39-1050684  501 (C) 3  
   12,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

2. SHEEP DOG IMPACT ASSISTANCE  
   1200 W WALNUT ST ROGERS, AR 72756  
   26-4521779  501 (C) 3  
   10,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

3. SHEEP MOUNTAIN ALLIANCE  
   PO BOX 389 TELLURIDE, CO 81435  
   84-1294894  501 (C) 3  
   5,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

4. SHEFA SCHOOL  
   180 AMSTERDAM AVE NEW YORK, NY 10023  
   47-2048496  501 (C) 3  
   5,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

5. SHELBURNE FARMS  
   1611 HARBOR RD SHEL BURNE, VT 5482  
   03-0229347  501 (C) 3  
   174,700.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

6. SHELBURNE MUSEUM INCORPORATED  
   PO BOX 10 SHEL BURNE, VT 5482  
   03-0179436  501 (C) 3  
   24,200.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

7. SHELL MUSEUM AND EDUCATIONAL FOUNDATION INC  
   PO BOX 1580 SANIBEL, FL 33957  
   59-2775992  501 (C) 3  
   7,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

8. SHELL POINT VILLAGE CHURCH OF THE CHRISTIAN  
   15100 SHELL POINT BLVD FORT MYERS, FL 33908  
   23-7202327  501 (C) 3  
   18,300.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

9. SHELTER ASSOCIATION OF WASHTENAW  
   PO BOX 7370 ANN ARBOR, MI 48107  
   38-2533030  501 (C) 3  
   7,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

10. SHELTER BOX USA  
    8374 MARKET ST # 203 LAK EWOOD RANCH, FL 342  
    20-0471604  501 (C) 3  
    260,500.  
    FMV  
    N/A  
    FOR RECIPIENT'S EXEM

11. SHELTER HOUSE COMMUNITY SHELTER AND TRANSIT  
    429 SOUTH GATE AVE IOWA CITY, IA 52240  
    42-1231451  501 (C) 3  
    10,000.  
    FMV  
    N/A  
    FOR RECIPIENT'S EXEM

12. SHELTER INC  
    1333 WILLOW PASS RD STE 206 CONCORD, CA 945  
    68-0117241  501 (C) 3  
    8,500.  
    FMV  
    N/A  
    FOR RECIPIENT'S EXEM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  
3 Enter total number of other organizations listed in the line 1 table  

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   ![Yes][No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
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<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHELTER INTERNATIONAL PO BOX 82325 PORTLAND, OR 97282</td>
<td>46-3048723</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SHELTER ISLAND MUNICIPAL GOLF COURSE INC PO BOX 852 SHELTER ISLAND HEIGHTS, NY 11965</td>
<td>83-3886098</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SHELTER ISLAND UNION FREE SCHOOL DISTRICT ATTN: DEBBIE VECCHIO, DISTRICT TREASURER PO BOX 501015 DALLAS, TX 75251</td>
<td>11-6001970</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SHELTER MINISTRIES OF DALLAS PO BOX 151085 DALLAS, TX 75315</td>
<td>75-1881365</td>
<td>501 (C) 3</td>
<td>33,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHELTER MUSIC BOSTON INC 1337 MASSACHUSETTS AVE # 116 ARLINGTON, MA</td>
<td>27-4269849</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHELTER ROCK JEWISH CENTER 272 SHELTER ROCK ROAD ROSLYN, NY 11576-3299</td>
<td>11-2000270</td>
<td>501 (C) 3</td>
<td>7,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHELTERCARE 499 W 4TH AVE EUGENE, OR 97401</td>
<td>23-7115003</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SHELTERED LIVING INC 3401 SW HARRISON ST TOPEKA, KS 66611</td>
<td>48-0379679</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHELTERED YOGA PO BOX 8295 TRENTON, NJ 8650</td>
<td>46-5193885</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHELTERHOUSE: FORMERLY DROP INN CENTER P.O. BOX 643924 CINCINNATI, OH 45264-3924</td>
<td>31-0920479</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHELTERING ARMS FOUNDATION 8226 MEADOWBRIDGE RD MECHANICSVILLE, VA 231</td>
<td>54-1615559</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHELTERING TREE INC 1323 WILLIAM ST OMAHA, NE 68108</td>
<td>03-0605993</td>
<td>501 (C) 3</td>
<td>38,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>No.</th>
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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>SHENANDOAH COUNTY PUBLIC SCHOOLS</td>
<td></td>
<td>501 (C)</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>SHENANDOAH NATIONAL PARK TRUST</td>
<td></td>
<td>501 (C)</td>
<td>56,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>SHENANDOAH UNIVERSITY</td>
<td></td>
<td>501 (C)</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>SHEPHERD CENTER INC</td>
<td></td>
<td>501 (C)</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5)</td>
<td>SHEPHERD OF THE GLADES LUTHERAN CHURCH</td>
<td></td>
<td>501 (C)</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6)</td>
<td>SHEPHERD OF THE HILLS LUTHERAN CHURCH</td>
<td></td>
<td>501 (C)</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>SHEPHERD OF THE HILLS LUTHERAN CHURCH</td>
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<td>501 (C)</td>
<td>35,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>SHEPHERD OF THE HILLS LUTHERAN CHURCH</td>
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<td>501 (C)</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>SHEPHERD OF THE HILLS LUTHERAN CHURCH</td>
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<td>501 (C)</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>SHEPHERD OF THE HILLS UNITED METHODIST CHUR</td>
<td></td>
<td>501 (C)</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11)</td>
<td>SHEPHERD OF THE HILLS-HILLCREST CHRISTIAN C</td>
<td></td>
<td>501 (C)</td>
<td>2,568,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>SHEPHERD OF THE VALLEY LUTHERAN SCHOOL</td>
<td></td>
<td>501 (C)</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SHEPHERD UNIVERSITY FOUNDATION INC</td>
<td>55-6020064</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 5000 SHEPHERDSTOWN, WV 25443</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(2) SHEPHERDS GATE</td>
<td>94-2902803</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>1660 PORTOLA AVE LIVERMORE, CA 94551</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(3) SHEPHERDS GREEN SANCTUARY</td>
<td>63-1617521</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>139 COPELAND LN COOKEVILLE, TN 38506</td>
<td></td>
<td></td>
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<tr>
<td>(4) SHEPHERDS HOUSE INC</td>
<td>61-1105573</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>635 MAXWELTON CT LEXINGTON, KY 40508</td>
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<tr>
<td>(5) SHEPHERDS HOUSE MINISTRIES</td>
<td>75-3207723</td>
<td>501 (C) 3</td>
<td>44,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 5484 BEND, OR 97708</td>
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<tr>
<td>(6) SHEPHERDS HOUSE MINISTRIES INC</td>
<td>65-1228030</td>
<td>501 (C) 3</td>
<td>24,829.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 617105 ORLANDO, FL 32861</td>
<td></td>
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<tr>
<td>(7) SHEPHERDS STAFF MISSION FACILITATORS INC</td>
<td>91-2057718</td>
<td>501 (C) 3</td>
<td>12,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6739 ACADEMY RD NE STE 320 ALBUQUERQUE, NM</td>
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<tr>
<td>(8) SHERIAR FOUNDATION</td>
<td>57-0915828</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>603 BRIARWOOD DR MYRTLE BEACH, SC 29572</td>
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<tr>
<td>(9) SHERIDAN COUNTY MEMORIAL HOSPITAL FOUNDATION</td>
<td>74-1905155</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 391 SHERIDAN, WY 82801</td>
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<tr>
<td>(10) SHERIFFS MEADOW FOUNDATION</td>
<td>04-6111529</td>
<td>501 (C) 3</td>
<td>438,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>PO BOX 1088 VINEYARD HAVEN, MA 2568</td>
<td></td>
<td></td>
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<tr>
<td>(11) SHERRYS PLACE RESCUE</td>
<td>47-2338743</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7210 HARRIDGE CT PENNSAUKEN, NJ 8109</td>
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<tr>
<td>(12) SHERWOOD FOREST CAMC</td>
<td>43-0653401</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2708 SUTTON BLVD SAINT LOUIS, MO 63143</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

Enter total number of other organizations listed in the line 1 table: ........................................................................................................

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes** ☑️  
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| SHERWOOD FOREST FRIENDS  
PO BOX 212 CEDAR MOUNTAIN, NC 28718 | 82-1825571 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHES THE FIRST INC  
590 AVENUE OF THE AMERICAS FL 8 NEW YORK, N | 65-1321437 | 501 (C) 3 | 12,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHIKAR-SAFAI CLUB INTERNATIONAL FOUNDATION  
PO BOX 7426 NAPLES, FL 34101 | 23-7444819 | 501 (C) 3 | 10,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHILOH BAPTIST CHURCH  
10395 BLANCHARD LATEX RD MOORINGSPO | 40-0005692 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHILOH BIBLE CAMP INC  
753 BURNT MEADOW RD HEWITT, NJ 7 | 22-2761276 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHILOH MISSIONARY BAPTIST CHURCH  
185 EDDIE ROBINSON SR DRIVE BATON ROU | 90-0160970 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHILOH UNITED METHODIST CHURCH  
P.O. BOX 267 GASTON, NC 27832 | 56-1274337 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHINE GLOBAL INC  
350 W 42ND ST APT 419 NEW YORK, NY 1 | 20-3476559 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHINING HOPE FOR COMMUNITIES INC  
175 VARICK ST FL 6 NEW YORK, NY 10014 | 27-1493201 | 501 (C) 3 | 5,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHIPLEY SCHOOL  
814 YARROW ST BRYN MAWR, PA 19010 | 23-1352677 | 501 (C) 3 | 195,600. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHIPPENSBURG UNIVERSITY FOUNDATION  
1871 OLD Main Dr SHIPPENSBURG, PA 17257 | 23-2046093 | 501 (C) 3 | 6,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| SHIR HADASH RECONSTRUCTIONIST COMMUNITY  
721 MIDDLE POLO DR SAINT LOUIS, MO 63105 | 20-3463256 | 501 (C) 3 | 5,400. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>SHIR TIKVAN 5000 GIRARDE AVE S MINNEAPOLIS, MN 55419</td>
<td>41-1632627</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHIRDI SAI DARBAR 870 LAKENWOOD DR SUNNYVALE, CA 94089</td>
<td>27-3235464</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHOALS CHRISTIAN SCHOOL 301 HEATHROW DR FLORENCE, AL 35633</td>
<td>72-1390270</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHORE CLUBHOUSE 279 BROADWAY STE 400 LONG BRANCH, NJ 7740</td>
<td>26-3674925</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHOREFAST US FUND PO BOX 82 CONWAY, WA 98238</td>
<td>84-1733717</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHORELINE COMMUNITY CHURCH 125 NE 185TH ST SHORELINE, WA 98155</td>
<td>91-0863601</td>
<td>501 (C) 3</td>
<td>8,416.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHORELINE SOUP KITCHENS &amp; PANTRIES 10 PROSPECT ST ESSEX, CT 6426</td>
<td>46-3773017</td>
<td>501 (C) 3</td>
<td>14,147.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SHORERIVERS INC 114 S WASHINGTON ST STE 301 EASTON, MD 2160</td>
<td>26-3187608</td>
<td>501 (C) 3</td>
<td>22,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHOTGUN PLAYERS INC 1901 ASHYB AVE BERKELEY, CA 94703</td>
<td>94-3265879</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHOTOKAN KARATE OF AMERICA INC 222 S HEMITT ST # 7 LOS ANGELES, CA 90012</td>
<td>95-3214144</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SHOWER POWER INC PO BOX 1891 NEW YORK, NY 10163</td>
<td>82-2732545</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHRIMAD RAJCHANDRA MISSION DHARAMPUR-USA-IN 12 N COUNTRY LAKES DR MARLTON, NJ 8053</td>
<td>20-5906652</td>
<td>501 (C) 3</td>
<td>9,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>SHRINE MONT INC</td>
<td>217 SHRINE MONT CIRCLE ORKNEY SPRINGS, VA 2</td>
<td>54-0326490</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>PO BOX 1237 LA CROSSE, WI 54602</td>
<td>39-1982320</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SHRINERS HOSPITALS FOR CHILDREN</td>
<td>1000 N ROCKY POINT DR TAMPA, FL 33607</td>
<td>36-2193608</td>
<td>501 (C) 3</td>
<td>433,237.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SHRIVER CENTER ON POVERTY LAW</td>
<td>67 E MADISON ST STE 2000 CHICAGO, IL 60603</td>
<td>36-3151279</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SHROPShIRE MUSIC FOUNDATION</td>
<td>2012 W PEACH BLOSSOM DR KAYSVILLE, UT 84037</td>
<td>95-4780064</td>
<td>501 (C) 3</td>
<td>16,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SHUL OF BAL HARBOUR INC</td>
<td>9540 COLLINS AVE SURFSIDE, FL 33154</td>
<td>59-2302315</td>
<td>501 (C) 3</td>
<td>369,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SHUPPIKE</td>
<td>815 SEATTLE BLVD S # 215 SEATTLE, WA 98134</td>
<td>91-2138554</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Siasconset Beach Preservation Fund Inc</td>
<td>PO BOX 2279 NANTUCKET, MA 2584</td>
<td>04-3212914</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Sibley Memorial Hospital Foundation</td>
<td>5255 LOUGHBORO RD NW WASHINGTON, DC 20016</td>
<td>45-0562642</td>
<td>501 (C) 3</td>
<td>42,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Sidwell Friends School</td>
<td>3825 WISCONSIN AVE NW WASHINGTON, DC 20016</td>
<td>53-0196519</td>
<td>501 (C) 3</td>
<td>47,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SIEMPRE Unidos</td>
<td>1001 SMITH RD MILL VALLEY, CA 94941</td>
<td>20-1316120</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>Siena Catholic Schools of Racine Inc</td>
<td>1200 PARK AVE RACINE, WI 53403</td>
<td>82-2591859</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA

18674H 1467 V 20-7.21
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td></td>
<td></td>
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<td></td>
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</tr>
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| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ........................................ | |
| 3 Enter total number of other organizations listed in the line 1 table ........................................................................... | |

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### SCHEDULE I
**Form 990**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - [X] Yes
   - [ ] No

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<th>4 (d) Amount of cash grant</th>
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<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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1. SIGMA PHI EPSILON EDUCATIONAL FOUNDATION  
   310 S ARTHUR ASHE BLVD RICHMOND, VA 23220  
   EIN 54-6053821  
   IRC section 501 (c) 3  
   Amount of cash grant 13,000.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

2. SIGMA TAU EDUCATIONAL FOUNDATION  
   14800 NE NORTH WOODINVILLE WAY WOODINVILLE,  
   EIN 91-1569892  
   IRC section 501 (c) 3  
   Amount of cash grant 10,000.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

3. SIGN FRACTURE CARE INTERNATIONAL  
   451 HILLS ST STE B RICHLAND, WA 99354  
   EIN 91-1952283  
   IRC section 501 (c) 3  
   Amount of cash grant 15,000.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

4. SIGNAL MOUNTAIN PRESBYTERIAN CHURCH  
   612 JAMES BLVD SIGNAL MOUNTAIN, TN 37377  
   EIN 62-0530886  
   IRC section 501 (c) 3  
   Amount of cash grant 14,000.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

5. SIGNAL TECHNOLOGY FOUNDATION  
   650 CASTRO ST STE 120 # 223 MOUNTAIN VIEW,  
   EIN 82-4506840  
   IRC section 501 (c) 3  
   Amount of cash grant 15,001.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

6. SIGNATURE THEATRE COMPANY  
   480 W 42ND ST NEW YORK, NY 10036  
   EIN 13-3641560  
   IRC section 501 (c) 3  
   Amount of cash grant 38,500.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

7. SIGNATURE THEATRE INC  
   4200 CAMPBELL AVE ARLINGTON, VA 22206  
   EIN 62-1417785  
   IRC section 501 (c) 3  
   Amount of cash grant 7,350.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

8. SIGNET SOCIETY  
   46 DUNSTER ST CAMBRIDGE, MA 2138  
   EIN 04-1833930  
   IRC section 501 (c) 3  
   Amount of cash grant 22,500.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

9. SIKH AMERICAN LEGAL DEFENSE AND EDUCATION F  
   1050 CONN AVE NW STE 500 WASHINGTON, DC 200  
   EIN 04-3382840  
   IRC section 501 (c) 3  
   Amount of cash grant 7,600.  
   Method of valuation FMV  
   Purpose of grant or assistance FOR RECIPIENT'S EXEM

10. SIKH COALITION INC  
    50 BROAD ST STE 504 NEW YORK, NY 10004  
    EIN 22-3834037  
    IRC section 501 (c) 3  
    Amount of cash grant 9,001.  
    Method of valuation FMV  
    Purpose of grant or assistance FOR RECIPIENT'S EXEM

11. SIKH DHARMA INTERNATIONAL  
    218 E SOMBRILLO RD ESPANOLA, NM 87532  
    EIN 23-7268751  
    IRC section 501 (c) 3  
    Amount of cash grant 18,000.  
    Method of valuation FMV  
    Purpose of grant or assistance FOR RECIPIENT'S EXEM

12. SIKH DHARMSAL  
    6002 CAMP BULLIS RD SAN ANTONIO, TX 78257  
    EIN 45-4428841  
    IRC section 501 (c) 3  
    Amount of cash grant 15,000.  
    Method of valuation FMV  
    Purpose of grant or assistance FOR RECIPIENT'S EXEM

---

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

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For Paperwork Reduction Act Notice, see the instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tr>
<td>1</td>
<td>SIKH FOUNDATION</td>
<td>12269 OAK KNOLL RD POWAY, CA 92064</td>
<td>33-0900214</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>SIKH GURDWARA SAN JOSE CALIFORNIA</td>
<td>3636 GURDWARA AVE SAN JOSE, CA 95148</td>
<td>77-0090048</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>SILICON SCHOOLS FUND INC</td>
<td>827 BROADWAY STE 300 OAKLAND, CA 94607</td>
<td>45-4860788</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>SILICON VALLEY BICYCLE COALITION</td>
<td>96 N 3RD ST STE 375 SAN JOSE, CA 95112</td>
<td>77-0338658</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>SILICON VALLEY CHINESE ASSOCIATION FOUNDATION</td>
<td>39510 PASEO PADRE PKWY FREMONT, CA 94538</td>
<td>47-3798752</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>SILICON VALLEY COMMUNITY FOUNDATION</td>
<td>2440 W EL CAMINO REAL STE 300 MOUNTAIN VIEW</td>
<td>20-5205488</td>
<td>501 (C) 3</td>
<td>130,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>SILICON VALLEY INTERNATIONAL SCHOOL</td>
<td>151 LAURA LN PALO ALTO, CA 94303</td>
<td>94-2599581</td>
<td>501 (C) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>SILICON VALLEY SOCIAL VENTURE FUND</td>
<td>350 TWIN DOLPHIN DR STE 103 REDWOOD CITY, CA 94063</td>
<td>51-0644783</td>
<td>501 (C) 3</td>
<td>36,833.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SILK ROAD PROJECT INC</td>
<td>175 N HARVARD ST ALLSTON, MA 2134</td>
<td>04-3444069</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SILOAM HEALTH</td>
<td>820 GALE LN NASHVILLE, TN 37204</td>
<td>58-1867940</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>11</td>
<td>SILVER &amp; BLACK GIVE BACK</td>
<td>1 AT AND T CENTER PKWY SAN ANTONIO, TX 78216</td>
<td>74-2509544</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SILVER CITY CHURCH</td>
<td>1723 SCHAER ST NORTH LITTLE ROCK, AR 72114</td>
<td>71-0808258</td>
<td>501 (C) 3</td>
<td>25,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. ✔ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) SILVER HILL HOSPITAL INC</td>
<td>06-0655139</td>
<td>501 (C) 3</td>
<td>360,000</td>
<td>FMV</td>
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<td>208 VALLEY RD NEW CANAAN, CT 6840</td>
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<td>(2) SILVER LAKE PRESERVATION ASSOCIATION INC</td>
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<td>PO BOX 22 LACONIA, WI 54541</td>
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<td>(3) SILVER LINING MENTORING INC</td>
<td>04-3575764</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>727 ATLANTIC AVE FL 3 BOSTON, MA 2111</td>
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<td>(4) SILVER SHIELD ASSOCIATION EDUCATION FUND IN</td>
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<td>FMV</td>
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<td>PO BOX 8154 GREENWICH, CT 6836</td>
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<td>(5) SILVER SPRING NEIGHBORHOOD CENTER INC</td>
<td>39-0966281</td>
<td>501 (C) 3</td>
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<td>(6) SILVER SPRINGS MARTIN LUTHER SCHOOL</td>
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<td>FMV</td>
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<td>(7) SILVERTON HIGH SCHOOL ALUMNI ASSOCIATION</td>
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<td>(9) SIMA STUDIOS</td>
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<td>1700 KENNEDY CAUSEWAY 132A NORTH BAY VILLAGE</td>
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<td>(11) SIMCHAS KALLAH INC</td>
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<td>(12) SIMMARON RESEARCH INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table ......................................................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
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<td>23-2888152</td>
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<td>2</td>
<td>SIMMONS UNIVERSITY</td>
<td>04-2103629</td>
<td>501 (C) 3</td>
<td>124,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>SIMON WIESENTHAL CENTER</td>
<td>95-3964928</td>
<td>501 (C) 3</td>
<td>64,140.</td>
<td>FMV</td>
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<td>4</td>
<td>SIMONS FUND</td>
<td>20-2771448</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>SINFUSO KAVOD FUND</td>
<td>83-2780438</td>
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<td>300,000.</td>
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<td>6</td>
<td>SIMPSON HOUSING SERVICES INC</td>
<td>41-1759477</td>
<td>501 (C) 3</td>
<td>24,800.</td>
<td>FMV</td>
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<td>7</td>
<td>SIMPSON UNITED METHODIST CHURCH</td>
<td>51-0272776</td>
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<td>9,733.</td>
<td>FMV</td>
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<td>8</td>
<td>SIMPSONVILLE BAPTIST CHURCH</td>
<td>61-0872175</td>
<td>501 (C) 3</td>
<td>19,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SIMSBURY UNITED METHODIST CHURCH</td>
<td>22-2487294</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SINAI HEALTH SYSTEM</td>
<td>36-3166895</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>SINAI SPECIAL NEEDS INSTITUTE</td>
<td>22-2942402</td>
<td>501 (C) 3</td>
<td>27,900.</td>
<td>FMV</td>
<td>N/A</td>
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<td>12</td>
<td>SINAI TEMPLE</td>
<td>95-2103898</td>
<td>501 (C) 3</td>
<td>9,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>13</td>
<td>SINAPI FOUNDATION INC</td>
<td>46-0653354</td>
<td>501 (C) 3</td>
<td>26,815.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ____________________________

Enter total number of other organizations listed in the line 1 table: ____________________________

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

| 1 | Name and address of organization or government | 2 | EIN | 3 | IRC section (if applicable) | 4 | Amount of cash grant | 5 | Amount of non-cash assistance | 6 | Method of valuation (book, FMV, appraisal, other) | 7 | Description of noncash assistance | 8 | Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (1) | SINAPIS GROUP | 27-1549182 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | SING FOR HOPE INC | 01-0856384 | 501 (C) 3 | 12,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | SINGLE MOMM | 26-3544089 | 501 (C) 3 | 40,007 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | SINGLE PARENT SCHOLARSHIP FUND OF BENTON CO | 71-0816518 | 501 (C) 3 | 6,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | SINGLE PARENT SCHOLARSHIP FUND OF NORTHWEST | 68-0498770 | 501 (C) 3 | 12,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | SINSINAWA DOMINICANS INC | 39-0816854 | 501 (C) 3 | 160,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | SIOUX EMPIRE PIT BULL RESCUE INC | 71-1051859 | 501 (C) 3 | 12,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | SIOUX EMPIRE UNITED WAY INC | 46-0233701 | 501 (C) 3 | 72,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | SIOUX FALLS AREA COMMUNITY FOUNDATION INC | 31-1748533 | 501 (C) 3 | 35,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | SIOUX FALLS CARES INC | 46-0450382 | 501 (C) 3 | 6,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | SIOUX FALLS CATHOLIC SCHOOLS | 46-0413591 | 501 (C) 3 | 15,250 | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | SIOUX FALLS MINISTRY CENTER | 26-4760861 | 501 (C) 3 | 50,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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| 1. | SIPS & KICKS FOUNDATION  
8 JEWETT AVE TENAFLY, NJ 7670 | 81-3480073 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2. | SIRAT CHICAGO  
45 T2 S LAKE PARK AVE CHICAGO, IL 60653 | 47-4847994 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3. | SISKIYOU FIELD INSTITUTE  
PO BOX 207 SEDALIA, OR 7670 | 20-1285400 | 501 (C) 3 | 5,800. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4. | SISKIYOU MOUNTAIN CLUB  
33 3RD ST ASHLAND, OR 97520 | 27-3418419 | 501 (C) 3 | 8,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5. | SISTER CARMEN COMMUNITY CENTER INC  
655 ASPEN RIDGE DR LAFAYETTE, CO 80026 | 84-0820308 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6. | SISTER COMMUNITIES OF SAN RAMON NICARAGUA  
PO BOX 766 DURHAM, NC 27702 | 56-2161698 | 501 (C) 3 | 29,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7. | SISTER SONG INC  
1237 RALPH DAVID ABERNATHY BLVD SW ATLANTA, 1 | 51-0544927 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8. | SISTERCARE INC  
1820 MORLAINE DR CAYCE, SC 29033 | 57-0722427 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9. | SISTERS OF CHARITY OF BLESSED VIRGIN MARY  
1100 CARMEL DR DUBUQUE, IA 52003 | 42-0680320 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10. | SISTERS OF CHARITY OF ST ELIZABETH CONVENT  
PO BOX 474 CONVENT STATION, NJ 7961 | 22-1487343 | 501 (C) 3 | 18,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11. | SISTERS OF CHRIST THE LIGHT INC  
506 N CHURCH ST WILMINGTON, DE 19801 | 47-1233391 | 501 (C) 3 | 37,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12. | SISTERS OF LIFE  
38 MONTEBELLO RD SUFFERN, NY 10901 | 06-1579167 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>SISTERS OF LORETTO-LORETTO CENTER</td>
<td>84-0610297</td>
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<td>SISTERS OF MERCY OF THE AMERICAS SOUTH CENT</td>
<td>11-3816411</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SISTERS OF SAINT ANN ANNA MARIA COLLEGE</td>
<td>84-2002060</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SISTERS OF SAINT DOMINIC</td>
<td>23-7251465</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SISTERS OF SAINT JOSEPH IN CALIFORNIA</td>
<td>95-1922232</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>SISTERS OF SAINT FRANCIS OF COLORADO SPRINGS</td>
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<td>FMV</td>
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<td>SISTERS OF SAINT JOSEPH NEIGHBORHOOD NETWORK I</td>
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<td>501 (C) 3</td>
<td>7,002.</td>
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<tr>
<td>10</td>
<td>SISTERS OF SAINT JOSEPH OF NORTHWESTERN PENNA</td>
<td>25-0965595</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>SISTERS OF ST. FRANCIS</td>
<td>35-0868953</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12</td>
<td>SISTERS OF THE DIVINE COMPASSION OF THE STA</td>
<td>13-1740396</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SISTERS OF THE HOLY FAMILY OF NAZARETH</td>
<td>310 N RIVER RD DES PLAINES, IL 60016</td>
<td>20-5728349</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE HOLY NAMES OF JESUSAND MARY</td>
<td>PO BOX 398 MARYLHURST, OR 97036</td>
<td>20-4366910</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE HOLY SPIRIT AND MARY IMMACUL</td>
<td>300 YUCCA ST SAN ANTONIO, TX 78203</td>
<td>74-1395191</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE IMMUCULATE HEART OF MARY</td>
<td>1 OUR LADYS CIR MALVERN, PA 19355</td>
<td>23-1352556</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE ORDER OF SAINT BENEDICT</td>
<td>104 CHAPEL LN SAINT JOSEPH, MN 56374</td>
<td>41-095523</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE ORDER OF ST DOMINIC OF GRAND</td>
<td>2025 FULTON ST E GRAND RAPIDS, MI 49503</td>
<td>38-1360581</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS OF THE ROAD</td>
<td>133 NW 6TH AVE PORTLAND, OR 97209</td>
<td>93-0748169</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SISTERS SERVANTS OF THE BLESSED SACRAMENT</td>
<td>3173 WINNETKA DR BONITA, CA 91902</td>
<td>32-0329611</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SITKA MUSIC FESTIVAL INC</td>
<td>PO BOX 3333 SITKA, AK 99835</td>
<td>92-0075160</td>
<td>501 (C) 3</td>
<td>30,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SIUT NORTH AMERICA INC</td>
<td>1 RIVER CIR HOUSTON, TX 77063</td>
<td>76-0656947</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SIXTEENTH STREET COMMUNITY HEALTH CENTERS I</td>
<td>1337 S CESAR E CHAVEZ DR FL 2 MILWAUKEE, WI</td>
<td>39-1180475</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SIXTH &amp; I SYNAGOGUE INC</td>
<td>601 I ST NW WASHINGTON, DC 20001</td>
<td>33-1036146</td>
<td>501 (C) 3</td>
<td>40,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>IRC section (if applicable)</th>
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<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJOGRENS SYNDROME FOUNDATION INC</td>
<td>10701 PARKRIDGE BLVD STE 170 RESTON, VA 201</td>
<td>11-2779073</td>
<td>501 (C) 3</td>
<td>7,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKAGIT HOSPICE FOUNDATION</td>
<td>227 FREEWAY DR STE A MOUNT VERNON, WA 98273</td>
<td>91-2094966</td>
<td>501 (C) 3</td>
<td>9,750. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKAGIT LAND TRUST</td>
<td>PO BOX 1017 MOUNT VERNON, WA 98273</td>
<td>91-1533402</td>
<td>501 (C) 3</td>
<td>62,100. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKANEATELES LAKE ASSOCIATION INC</td>
<td>PO BOX 182 SKANEATELES, NY 13152</td>
<td>23-7045486</td>
<td>501 (C) 3</td>
<td>8,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKIDMORE COLLEGE</td>
<td>LOCAL SARATOGA SPRINGS, NY 12866</td>
<td>14-1338562</td>
<td>501 (C) 3</td>
<td>1,636,250. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKILLED VOLUNTEERS FOR ISRAEL</td>
<td>1755 YORK AVE APT 19C NEW YORK, NY 10128</td>
<td>27-1761653</td>
<td>501 (C) 3</td>
<td>15,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKILLS FOR CHICAGOLANDS FUTURE</td>
<td>191 N WACKER DR STE 1150 CHICAGO, IL 60606</td>
<td>45-1287418</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKIN CANCER FOUNDATION INC</td>
<td>205 LEXINGTON AVE FL 11 NEW YORK, NY 10016</td>
<td>13-2948778</td>
<td>501 (C) 3</td>
<td>5,400. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKONEHEGAN SCHOOL OF PAINTING AND SCULPTURE</td>
<td>136 W 22ND ST NEW YORK, NY 10011</td>
<td>01-0263908</td>
<td>501 (C) 3</td>
<td>113,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SKY CROSS INC</td>
<td>11118 WURZBACH RD STE 300 SAN ANTONIO, TX 7</td>
<td>74-2735853</td>
<td>501 (C) 3</td>
<td>8,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKY HIGH FOR ST JUDES INC</td>
<td>PO BOX 80263 LAFAYETTE, LA 70598</td>
<td>26-0465972</td>
<td>501 (C) 3</td>
<td>7,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SKYLIGHT MUSIC THEATRE CORP</td>
<td>158 NORTH BROADWAY MILWAUKEE, WI 53202</td>
<td>39-0975379</td>
<td>501 (C) 3</td>
<td>10,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | SKYLINE AT FIRST HILL RESIDENTS ASSOCIATION  
725 9TH AVE SEATTLE, WA 98104 | 23-1979966 | 501 (C) 3 | 7,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | SKYLINE VIEW BRETHREN IN CHRIST CHURCH  
7733 HILLCREST AVE HARRISBURG, PA 17112 | 23-6415240 | 501 (C) 3 | 35,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | SKYWORD MINISTRIES  
PO BOX 10 GLENVIEW, IL 60025 | 30-0055689 | 501 (C) 3 | 18,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | SLATE HILL MENNONITE CHURCH  
1352 SLATE HILL ROAD CAMP HILL, PA 17011 | 23-6281755 | 501 (C) 3 | 17,900 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | SLAVERY NO MORE  
12000 ANCIENT CREST CIR APT 12208 FRANKLIN, TN 37208 | 45-2050961 | 501 (C) 3 | 150,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | SLOWIK MUSIC INSTITUTE  
65 E COLLEGE ST OBERLIN, OH 44074 | 20-1125494 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | SLP SEEDS  
3260 GORHAM AVENUE SOUTH ST LOUIS PARK, MN 63042 | 31-0790793 | 501 (C) 3 | 5,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | SMALL STEPS NURTURING CENTER  
2902 JENSEN DR HOUSTON, TX 77026 | 76-0471755 | 501 (C) 3 | 13,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | SMALL WORLD YOGA INC  
5000 GEORGIA AVE NASHVILLE, TN 37209 | 46-5278254 | 501 (C) 3 | 71,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | SMART READING  
101 SW MARKET ST PORTLAND, OR 97201 | 93-1051724 | 501 (C) 3 | 28,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | SMILE NETWORK INTERNATIONAL  
108 W 14TH ST MINNEAPOLIS, MN 55403 | 90-0088719 | 501 (C) 3 | 25,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | SMILE TRAIN INC  
633 THIRD AVE 9TH FLOOR NEW YORK, NY 10017 | 13-3661416 | 501 (C) 3 | 303,275 | FMV | N/A | FOR RECIPIENT'S EXEM |

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

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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**Part I**  
**General Information on Grants and Assistance**

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**  
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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>SMITH CHIROPRACTIC FOUNDATION</td>
<td>51-0583956</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SMITH FARM LTD</td>
<td>52-1977976</td>
<td>501 (C) 3</td>
<td>390,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SMITH MEDICAL CLINIC INC</td>
<td>57-0786699</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SMITH MEMORIAL PLAYGROUNDS</td>
<td>23-1353547</td>
<td>501 (C) 3</td>
<td>107,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SMITHSONIAN INSTITUTE</td>
<td>53-0206027</td>
<td>501 (C) 3</td>
<td>912,749.</td>
<td>FMV</td>
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<td>7</td>
<td>SMOKEY ACRES</td>
<td>36-4800007</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>SMOKEY TIMBERS FOUNDATION</td>
<td>26-2029888</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SMS RESEARCH FOUNDATION</td>
<td>27-2906662</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SMuin BALLETs-SF</td>
<td>94-3197247</td>
<td>501 (C) 3</td>
<td>70,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>SMYRNA PRESBYTERIAN CHURCH</td>
<td>58-6035393</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>SNACK &amp; FRIENDS INC</td>
<td>20-5934666</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) Snohomish Community Food Bank
PO Box 1364 Snohomish, WA 98291 | 91-1334772 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) Snoqualmie Valley Alliance Church
PO Box 2178 North Bend, WA 98045 | 91-1956220 | 501 (C) 3 | 19,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) Snow Cap Community Charites
PO Box 160 Fairview, OR 97024 | 23-7121915 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) Snow College Foundation
150 College Ave Ephraim, UT 84627 | 94-2785555 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) So What Else Inc
1 Preserve Pkwy Rockville, MD 20852 | 27-1219231 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) Soar Foundation
39812 Mission Blvd Ste 203 Fremont, CA 9453 | 94-3255490 | 501 (C) 3 | 27,400. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) Soaring Eagle Education Foundation
PO Box 411236 Los Angeles, CA 90041 | 95-4692591 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) Soaring Heights Communities Inc
2250 Wren Rd SE Conyers, GA 30094 | 82-1445409 | 501 (C) 3 | 50,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) Social Advocates for Youth San Diego Inc
4775 Viewridge Ave San Diego, CA 92123 | 23-7107958 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) Social and Environmental Entrepreneurs Inc
23564 Calabasas Rd Ste 201 Calabasas, CA 91 | 95-4116679 | 501 (C) 3 | 72,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) Social Finance Inc
2 Atlantic Ave 5th Floor Boston, MA 2110 | 27-4620963 | 501 (C) 3 | 900,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) Social Fundraising and Gatherings Inc
340 E Township Line Rd Chester Springs, PA | 46-5216201 | 501 (C) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ...............................................

3. Enter total number of other organizations listed in the line 1 table: .............................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) SOCIAL GOOD FUND</td>
<td>2393 COLLINS AVE PIGGLE, CA 94564</td>
<td>46-1323531</td>
<td>501 (C) 3</td>
<td>1,070,092.</td>
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<td>(2) SOCIAL IMPACT CENTER</td>
<td>600 HAVENFORD RD STE 101 HAVENFORD, PA 1904</td>
<td>81-3367199</td>
<td>501 (C) 3</td>
<td>11,800.</td>
<td>FMV</td>
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<td>(3) SOCIAL JUSTICE FUND NORTHWEST</td>
<td>1904 3RD AVE STE 806 SEATTLE, WA 98101</td>
<td>91-1036971</td>
<td>501 (C) 3</td>
<td>2,457,507.</td>
<td>FMV</td>
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<tr>
<td>(4) SOCIAL MOTION INC</td>
<td>1450 W SAM HOUSTON PFWY N HOUSTON, TX 77043</td>
<td>47-4785251</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>(5) SOCIAL VENTURE CIRCLE</td>
<td>4225 SOLANO AVE 709 NAPA, CA 94558</td>
<td>65-0055983</td>
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<td>35,000.</td>
<td>FMV</td>
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<td>(6) SOCIAL VENTURE PARTNERS</td>
<td>220 2ND AVE SOUTH 3RD FLOOR SEATTLE, WA 98121</td>
<td>91-1894424</td>
<td>501 (C) 3</td>
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<tr>
<td>(7) SOCIAL VENTURE PARTNERS BOSTON</td>
<td>71 COMMERCIAL ST # 139 BOSTON, MA 2109</td>
<td>45-4230249</td>
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<td>(8) SOCIAL VENTURE PARTNERS MN</td>
<td>2751 HENNEPIN AVE S 152 MINNEAPOLIS, MN 554</td>
<td>03-0612359</td>
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<td>12,000.</td>
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<tr>
<td>(9) SOCIETY FOR FINANCIAL EDUCATION &amp; PROFESSION</td>
<td>700 LOCH NESS CIR FORT WASHINGTON, MD 20744</td>
<td>52-2116419</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<tr>
<td>(10) SOCIETY FOR INDUSTRIAL AND APPLIED MATHEMAT</td>
<td>3600 MARKET ST FL 6 PHILADELPHIA, PA 19104</td>
<td>23-1496016</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(11) SOCIETY FOR ORPHANED ARMENIAN RELIEF</td>
<td>150 NORTHERN CHESTER RD WAYNE, PA 19087</td>
<td>20-4095458</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) SOCIETY FOR PROTESTANT REFORMED SECONDARY E</td>
<td>1401 FERNADE AVE SW GRAND RAPIDS, MI 49534</td>
<td>38-1858512</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

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**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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   - No

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>(1) SOCIETY FOR SCIENCE &amp; THE PUBLIC</td>
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<td>1719 N ST NW WASHINGTON, DC 20036</td>
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<td>(2) SOCIETY FOR THE ADVANCEMENT OF JUDAISM</td>
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<td>15 W 86TH ST NEW YORK, NY 10024</td>
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<td>5 WOODLAND LN KIRKSVILLE, MO 63501</td>
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<td>PO BOX 148 COLD SPRING HARBOR, NY 11724</td>
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<td>(7) SOCIETY FOR THE PREVENTION OF CRUELTY TO AN</td>
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<td>1002 MONTEREY SALINAS HWY 68 RD SALINAS, CA</td>
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<td>(8) SOCIETY FOR THE PROPAGATION OF THE FAITH MI</td>
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<td>FMV</td>
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<td>PO BOX 070912 MILWAUKEE, WI 53207</td>
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<td>(9) SOCIETY FOR THE PROTECTION OF NEW HAMPSHIRE</td>
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<td>54 PORTSMOUTH ST CONCORD, NH 3301</td>
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<td>896 US HIGHWAY 63 BALDWIN, WI 54002</td>
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<td>1061 E MAIN ST STE 300 EAST DUNDEE, IL 6011</td>
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</table>

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

**Schedule I (Form 990) 2020**

JSA 0E1288 1.000

18674H 1467 V 20-7.21
**Part I**

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<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>2. SOCIETY OF ILLUSTRATORS INC</td>
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<td>74-1464210</td>
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<tr>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Schedule I (Form 990) 2020
## SCHEDULE I
(form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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► Attach to Form 990.

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department of the treasury
internal revenue service

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. SOCIETY OF ST VINCENT DE PAUL MARY QUEEN OF</td>
<td>601 HILL N DALE RD LEXINGTON, KY 40503</td>
<td>27-1284772 501 (C) 3</td>
<td>16,000. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. SOCIETY OF ST VINCENT DE PAUL PARTICULAR CO</td>
<td>50 N B ST SAN MATEO, CA 94401</td>
<td>94-1375833 501 (C) 3</td>
<td>22,250. FMV N/A</td>
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<tr>
<td>3. SOCIETY OF ST VINCENT DEPAUL PARTICULAR COU</td>
<td>1125 BANK ST CINCINNATI, OH 45214</td>
<td>31-0537510 501 (C) 3</td>
<td>48,500. FMV N/A</td>
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<tr>
<td>4. SOCIETY OF ST VINCENT DEPAUL ST MICHAEL THE</td>
<td>4491 SPRINGFIELD RD GLEN ALLEN, VA 23060</td>
<td>81-4678250 501 (C) 3</td>
<td>5,550. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5. SOCIETY OF THE DIVINE SAVIOR</td>
<td>1303 MILWAUKEE DR NEW HOLSTEIN, WI 53061</td>
<td>39-0806210 501 (C) 3</td>
<td>19,250. FMV N/A</td>
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<td>6. SOCIETY OF THE FOUR ARTS</td>
<td>100 FOUR ARTS PLZ PALM BEACH, FL 33480</td>
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<td>7. SOCIETY OF THE ROMAN CATHOLIC CHURCH OF THE</td>
<td>414 IRIS ST LAKE CHARLES, LA 70601</td>
<td>72-0883986 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. SOCIETY OF THE SACRED HEART UNITES STATES C</td>
<td>4120 FOREST PARK AVE SAINT LOUIS, MO 63108</td>
<td>43-1272049 501 (C) 3</td>
<td>122,500. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>9. SOCIETY OF THE THIRD STREET MUSIC SCHOOL SE</td>
<td>235 E 11TH ST NEW YORK, NY 10003</td>
<td>13-5596825 501 (C) 3</td>
<td>13,500. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10. SOCIETY OF WOMEN ENGINEERS</td>
<td>130 E RANDOLPH ST STE 3500 CHICAGO, IL 6060</td>
<td>13-1947735 501 (C) 3</td>
<td>6,500. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>11. SOCIETY ST VINCENT DE PAUL ALAMEDA</td>
<td>2272 SAN PABLO AVE OAKLAND, CA 94612</td>
<td>94-1156493 501 (C) 3</td>
<td>28,000. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12. SOYA MOUNTAIN WILDERNESS COUNCIL INC</td>
<td>PO BOX 512 ASHLAND, OR 97520</td>
<td>94-3138410 501 (C) 3</td>
<td>53,000. FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

JSA

OE1288 1.000

18674H 1467 V 20-7.21
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes ☑  No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>#</th>
<th>Name and address of organization or government</th>
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<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>SOFTWARE FREEDOM CONSERVANCY INC</td>
<td>41-2203632</td>
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<td>2</td>
<td>SOFTWARE IN THE PUBLIC INTEREST INC</td>
<td>11-3390208</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>SOGOREA TE LAND TRUST</td>
<td>82-4415931</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>SOHO REPERTORY THEATRE INC</td>
<td>13-2885288</td>
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<td>FMV</td>
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<td>5</td>
<td>SOI DOG</td>
<td>27-1600444</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SOJOURN CHURCH OF TRAVERSE CITY</td>
<td>38-1815752</td>
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<td>17,112.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>SOJOURNER CENTER</td>
<td>94-2465081</td>
<td>501 (C) 3</td>
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<td>8</td>
<td>SOJOURNERS</td>
<td>23-7380554</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>SOKA GAKKAI INTERNATIONAL-USA</td>
<td>95-2265667</td>
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<td>FMV</td>
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<tr>
<td>10</td>
<td>SOLA I CAN FOUNDATION</td>
<td>85-2469821</td>
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<td>FMV</td>
<td>N/A</td>
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<td>11</td>
<td>SOLANA BEACH PRESBYTERIAN CHURCH</td>
<td>95-2129111</td>
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<td>FMV</td>
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<td>12</td>
<td>SOLAR COOKERS INTERNATIONAL</td>
<td>68-0153141</td>
<td>501 (C) 3</td>
<td>27,025.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Em 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>SOLAR ELECTRIC LIGHT FUND</td>
<td>52-1701564</td>
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<td>45,000.</td>
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<td>N/A</td>
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<td>2</td>
<td>SOLDIERS ANGELS</td>
<td>20-0583415</td>
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<td>N/A</td>
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<td>3</td>
<td>SOLE EFFECTS</td>
<td>47-3099057</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SOLES 4 SOULS</td>
<td>20-4023482</td>
<td>501 (C) 3</td>
<td>28,400.</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>SOLE CHAMBER ENSEMBLE</td>
<td>74-2718783</td>
<td>501 (C) 3</td>
<td>11,600.</td>
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<td>N/A</td>
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<td>6</td>
<td>SOLID FOUNDATION SKATEPARK INC</td>
<td>77-0617835</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7</td>
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<td>23-7421892</td>
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<td>8</td>
<td>SOLID ROCK FOUNDATION</td>
<td>86-0808609</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SOLID ROCK MISSIONS</td>
<td>34-1719319</td>
<td>501 (C) 3</td>
<td>23,600.</td>
<td>FMV</td>
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<td>10</td>
<td>SOLID ROCK OUTDOOR MINISTRY</td>
<td>83-0268957</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>SOLIDAIRES NETWORK</td>
<td>84-2130536</td>
<td>501 (C) 3</td>
<td>267,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>SOLIDARITY</td>
<td>51-0490821</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>SOLO PARENT SOCIETY 321 INWOOD WAY FRANKLIN, TN 37064</td>
<td>82-1112575</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOLOMON R GUGGENHEIM FOUNDATION 1071 5TH AVE NEW YORK, NY 10128</td>
<td>13-5562233</td>
<td>501 (C) 3</td>
<td>28,505.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SOLOMON SCHECHTER DAY SCHOOL INC 125 WELLS AVE NEWTON CENTER, MA 2459</td>
<td>04-2303212</td>
<td>501 (C) 3</td>
<td>23,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOLOMON SCHECHTER DAY SCHOOL OF METROPOLITA 3210 DUNDEE RD NORTHBROOK, IL 60062</td>
<td>36-2493769</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOLVE ME CFS INITIATIVE INC 611 N BRAND BLVD GLENDALE, CA 91203</td>
<td>56-1683450</td>
<td>501 (C) 3</td>
<td>18,511.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOMALI SUCCESS SCHOOL 2812 E 26TH ST MINNEAPOLIS, MN 55406</td>
<td>20-3021208</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOME INC 60 O ST NW WASHINGTON, DC 20001</td>
<td>23-7098123</td>
<td>501 (C) 3</td>
<td>297,102.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOMERSET HEALTH CARE FOUNDATION INC 110 REHILL AVE SOMERVILLE, NJ 08876</td>
<td>32-3294408</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOMERSET HILLS LEARNING INSTITUTE INC 1810 BURNT MILLS RD HEDMINSTER, NJ 7921</td>
<td>22-3593804</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOMERVILLE COMMUNITY CORPORATION INC 337 SOMERVILLE AVE FL 2 SOMERVILLE, MA 2143</td>
<td>23-7293380</td>
<td>501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SOMERVILLE HOMELESS COALITION INCORPORATED 1 DAVIS SQ SOMERVILLE, MA 2144</td>
<td>04-2897447</td>
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<td>26,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SOMOS UNIDOS FOUNDATION 3500 CENTRAL AVE SE STE 2 ALBUQUERQUE, NM 87106</td>
<td>84-4283142</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tbody>
<tr>
<td>(1) SONIA NABETA FOUNDATION</td>
<td>4705 5TH ST LONG ISLAND CITY, NY 11101</td>
<td>35-2553949</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SONOMA COMMUNITY CENTER</td>
<td>276 E NAPA ST SONOMA, CA 95476</td>
<td>94-1566728</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) SONOMA COUNTY LOCAL NEWS INITIATIVE</td>
<td>230 CENTER ST STE 1 HEALDSBURG, CA 95448</td>
<td>84-5044460</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) SONOMA FAMILY MEAL</td>
<td>2210 BELL FLOWER LN SANTA ROSA, CA 95404</td>
<td>82-3332331</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SONOMA LAND TRUST</td>
<td>822 5TH ST SANTA ROSA, CA 95404</td>
<td>51-0197006</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) SONOMA STATE UNIVERSITY</td>
<td>1801 E COTATI AVE Rohnert Park, CA 94928</td>
<td>68-0338225</td>
<td>501 (C) 3</td>
<td>13,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) SONOMA VALLEY EDUCATION FOUNDATION</td>
<td>17878 RAILROAD AVE SONOMA, CA 95476</td>
<td>68-0279152</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) SONOMA VALLEY HOSPITAL FOUNDATION</td>
<td>347 ANDRIEUX ST SONOMA, CA 95476</td>
<td>94-2832488</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9) SONOMA VALLEY MENTORING ALLIANCE INC</td>
<td>916 1ST ST W SONOMA, CA 95476</td>
<td>68-0432128</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) SONOMA VALLEY MUSEUM OF ART</td>
<td>PO BOX 322 SONOMA, CA 95476</td>
<td>68-0969459</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11) SONOMA VALLEY MUSEUM OF ART</td>
<td>PO BOX 322 SONOMA, CA (BLANK)</td>
<td>68-049459</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) SONOMA VALLEY TEEN SERVICES</td>
<td>17440 SONOMA HWY SONOMA, CA 95476</td>
<td>68-0390038</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-28888152</td>
<td>501 (c) 3</td>
<td>57,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>SONS OF THE REVOLUTION IN THE STATE OF NEW YORK</td>
<td>13-5563011</td>
<td>501 (c) 3</td>
<td>80,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SONSCAPE MINISTRIES</td>
<td>74-2372030</td>
<td>501 (c) 3</td>
<td>10,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>SOPHIA ACADEMY</td>
<td>31-1736069</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SOPHIA OXFORD INC</td>
<td>157 GRANITE ST ROCKPORT, MA 1966</td>
<td>82-5328966</td>
<td>501 (c) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SOROPTIMIST INTERNATIONAL OF THE AMERICAS I</td>
<td>91-6057498</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SOS MINISTRIES INC</td>
<td>74-2726646</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>SOS OUTREACH</td>
<td>84-1332544</td>
<td>501 (c) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SOTERIA WORLD OUTREACH MINISTRIES INC</td>
<td>58-2475280</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10</td>
<td>SOTERIOLOGY 101</td>
<td>7001 CALM MEADOW CT GARLAND, TX 75044</td>
<td>82-5000409</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>SOUL FIRE FARM INSTITUTE INC</td>
<td>47-2549969</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SOUL RYEDERS INC</td>
<td>47-3803900</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

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<tr>
<td>1. SOULCALL INC 77 WESTVIEW AVE COLUMBUS, OH 43214</td>
<td>20-8473695</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2. SOUND GENERATIONS 2208 2ND AVE SEATTLE, WA 98121</td>
<td>91-0823767</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>3. SOUND WATERS INC COVE ISLAND PARK STAMFORD, CT 6902</td>
<td>06-1263947</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. SOUNDSTROM 1498 PACIFIC AVE STE 400 TACOMA, WA 98402</td>
<td>83-4636138</td>
<td>501 (C) 3</td>
<td>26,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5. SOUP CAFE 220 N 23RD ST BISMARCK, ND 58501</td>
<td>26-4411573</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6. SOUP KITCHEN IN PROVICENTOWN INC PO BOX 538 PROVICENTOWN, MA 2657</td>
<td>04-3380230</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7. SOUTH AMERICAN MISSIONARY SOCIETY U SA 1013 MERCHANT ST AMBRIDGE, PA 15003</td>
<td>04-2647396</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>8. SOUTH ASIAN YOUTH ACTION SAYA INC 5405 SEABURY ST ELMHURST, NY 11373</td>
<td>13-3943630</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9. SOUTH BAY CHRISTIAN CHURCH A CONGREGATION O PO BOX 24589 SAN JOSE, CA 95154</td>
<td>43-1989277</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>10. SOUTH BEND SYMPHONY ORCHESTRA ASSOCIATION I 127 N MICHIGAN ST SOUTH BEND, IN 46601</td>
<td>35-6042189</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. SOUTH BRITAIN CONGREGATIONAL CHURCH PO BOX 64 SOUTH BRITAIN, CT 6487</td>
<td>06-6060191</td>
<td>501 (C) 3</td>
<td>6,406.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>12. SOUTH BRONX UNITED INC PO BOX 1267 BROX, NY 10451</td>
<td>26-4064041</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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> Attach to Form 990.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>131 SPRING ST STE A CHARLESTON, SC 29403</td>
<td>57-0887278</td>
<td>501 (C) 3</td>
<td>124,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 5087 COLUMBIA, SC 29250</td>
<td>57-0687517</td>
<td>501 (C) 3</td>
<td>7,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td>7979 KALAMAZOO AVE SE BYRON CENTER, MI 49311</td>
<td>38-1497205</td>
<td>501 (C) 3</td>
<td>12,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>655 TOWN CENTER DR COSTA MESA, CA 92626</td>
<td>95-6122708</td>
<td>501 (C) 3</td>
<td>27,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1066 SOUTH EAST STREET AMHERST, MA 1002</td>
<td>04-6108989</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1885 BAY RD EAST PALO ALTO, CA 94303</td>
<td>94-3372130</td>
<td>501 (C) 3</td>
<td>26,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>100 KENYON AVE WAKEFIELD, RI 2879</td>
<td>05-0445136</td>
<td>501 (C) 3</td>
<td>21,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 296 PIERRE, SD 57501</td>
<td>46-0398115</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>330 E KANSAS CITY ST STE 200 RAPID CITY, SD</td>
<td>46-6011771</td>
<td>501 (C) 3</td>
<td>22,526</td>
<td>FMV</td>
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<td>815 MEDARY AVE BROOKINGS, SD 57006</td>
<td>46-0273801</td>
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<td>FMV</td>
<td>N/A</td>
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<td>301 S MAIN AVE SIOUX FALLS, SD 57104</td>
<td>46-6017026</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6560 S BROADWAY LITTLETON, CO 80121</td>
<td>84-0797760</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>SOUTH FLORIDA ACADEMY OF LEARNING INC</td>
<td>501 (C) 3</td>
<td>3700 COCONUT CREEK PKWY COCONUT CREEK, FL 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTH FLORIDA PBS INC</td>
<td>501 (C) 3</td>
<td>14901 NE 20TH AVE NORTH MIAMI, FL 33181</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SOUTH HOLI R 1 SCHOOL DISTRICT</td>
<td>501 (C) 3</td>
<td>201 SOUTH BARBOUR OREGON, MO 64473</td>
<td>201,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH KENT SCHOOL CORP</td>
<td>501 (C) 3</td>
<td>40 BULLS BRIDGE RD SOUTH KENT, CT 6785</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH KING COUNTY FOOD COALITION</td>
<td>501 (C) 3</td>
<td>PO BOX 98863 DES MOINES, WA 98198</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH MAIN CHAPEL AND MERCY CENTER</td>
<td>501 (C) 3</td>
<td>PO BOX 13545 2408 S MAIN ST ANDERSON, SC 29</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH MOUNTAIN YMCA</td>
<td>501 (C) 3</td>
<td>201 CUSHION PEAK RD REINHOLDS, PA 17569</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH PARK INN INC</td>
<td>501 (C) 3</td>
<td>75 MAIN ST HARTFORD, CT 6106</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SOUTH PENINSULA HEBREW DAY SCHOOL</td>
<td>501 (C) 3</td>
<td>1030 ASTORIA DR SUNNYVALE, CA 94087</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH PLAINS COLLEGE FOUNDATION</td>
<td>501 (C) 3</td>
<td>1401 COLLEGE AVE LEVELAND, TX 79336</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH PLAINS SPCA</td>
<td>501 (C) 3</td>
<td>8901 HIGHWAY 87 UNIT 119 LUBBOCK, TX 79423</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>SOUTH POTOMAC CHURCH</td>
<td>501 (C) 3</td>
<td>4915 CRAIN HWY WHITE PLAINS, MD 20695</td>
<td>10,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

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</table>
| 1 | SOUTH PUGET SOUND COMMUNITY COLLEGE FOUNDAT  
2011 MOTTMAN RD SW TUMWATER, WA 98512 | 91-1174940 | 501 (C) 3 | 32,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | SOUTH RENO UNITED METHODIST CHURCH  
200 DE SPAIN LN RENO, NV 89511 | 88-0253270 | 501 (C) 3 | 13,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | SOUTH SHORE COMMUNITY ACTION COUNCIL, INC.  
71 OBERRY ST. PLYMOUTH, MA 2360 | 04-6125732 | 501 (C) 3 | 27,900 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | SOUTH SHORES BAPTIST CHURCH  
32712 CROWN VALLEY PKWY DANA POINT, CA 9262 | 95-2557130 | 501 (C) 3 | 17,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | SOUTH SHORES CHURCH FOUNDATION  
32712 CROWN VALLEY PKWY DANA POINT, CA 9262 | 87-0696604 | 501 (C) 3 | 8,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | SOUTH SIDE BIBLE CHURCH  
4515 BECKLEY RD BATTLE CREEK, MI 49015 | 23-7404551 | 501 (C) 3 | 43,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | SOUTH SUBURBAN EVANGELICAL FREE CHURCH  
12600 JOHNNY CAKE RIDGE RD SAINT PAUL, MN 5 | 41-1418444 | 501 (C) 3 | 22,900 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | SOUTHAMPTON HISTORY MUSEUM  
PO BOX 303 SOUTHAMPTON, NY 11969 | 11-6027807 | 501 (C) 3 | 5,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | SOUTHAMPTON HOSPITAL FOUNDATION INC  
240 MEETING HOUSE LN SOUTHAMPTON, NY 11968 | 11-3468516 | 501 (C) 3 | 54,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | SOUTHCORER COMMUNITY FOUNDATION INC  
128 UNION ST STE 403 NEW BEDFORD, MA 2740 | 04-3280353 | 501 (C) 3 | 278,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | SOUTHCORER RECONSTRUCTIONIST HAVURAH  
3400 MICHELSON DR IRVINE, CA 92612 | 33-0254944 | 501 (C) 3 | 35,519 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | SOUTHEAST ALASKA INDEPENDENT LIVING INC  
3225 HOSPITAL DR UNIT 300 JUNEAU, AK 99801 | 92-0144370 | 501 (C) 3 | 50,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
<th>(h)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation (book, FMV, appraisal, other)</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
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<tr>
<td>SOUTHEAST ASIAN MAA COALITION INC</td>
<td>22-2541120</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHEAST CHRISTIAN CHURCH OF JEFFERSON COU</td>
<td>61-0850307</td>
<td>501 (C) 3</td>
<td>27,600</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SOUTHEAST COMMUNITY SERVICES INC</td>
<td>35-1318068</td>
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<td>FMV</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>56-0649251</td>
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<tr>
<td>SOUTHEASTERN GUIDE DOGS INC</td>
<td>59-2252352</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SOUTHEASTERN PENNSYLVANIA SYNOD OF THE EVAN</td>
<td>36-3514278</td>
<td>501 (C) 3</td>
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<td>N/A</td>
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<tr>
<td>SOUTHEASTERN SYNOD OF THE EVANGEL LUTHERAN</td>
<td>58-1536326</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SOUTHERN ARKANSAS UNIVERSITY FOUNDATION INC</td>
<td>71-0549140</td>
<td>501 (C) 3</td>
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<td>SOUTHERN BAPTIST THEOLOGICAL SEMINARY</td>
<td>61-0500919</td>
<td>501 (C) 3</td>
<td>117,095</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN CALIFORNIA CHILDREN'S MUSEUM INC</td>
<td>45-5489506</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
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<td>SOUTHERN CALIFORNIA GOLDEN RETRIEVER RESCUE</td>
<td>30-0454968</td>
<td>501 (C) 3</td>
<td>7,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>SOUTHERN CALIFORNIA PUBLIC RADIO</td>
<td>95-4765734</td>
<td>501 (C) 3</td>
<td>42,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN CENTER FOR HUMAN RIGHTS</td>
<td>62-1025326</td>
<td>501 (C) 3</td>
<td>170,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN ENVIRONMENTAL LAW CENTER</td>
<td>52-1436778</td>
<td>501 (C) 3</td>
<td>136,700</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN GRIT GROWTH INC</td>
<td>82-2539184</td>
<td>501 (C) 3</td>
<td>121,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE F</td>
<td>37-1019805</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN INSTITUTE FOR APPROPRIATE TECHNOLO</td>
<td>63-0776048</td>
<td>501 (C) 3</td>
<td>120,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN LAKES AREA LOVE INC</td>
<td>39-1485975</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN METHODIST UNIVERSITY</td>
<td>75-0800089</td>
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<td>122,250</td>
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<td>N/A</td>
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<td>SOUTHERN NEVADA PUBLIC TELEVISION</td>
<td>23-7169328</td>
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<td>18,600</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SOUTHERN POVERTY LAW CENTER INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>SOUTHERN SCHOLARSHIP FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>48,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SOUTHERN SUDAN HEALTH CARE ORGANIZATION</td>
<td>26-2293084</td>
<td>501 (C) 3</td>
<td>13,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................................................  X Yes  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>SOUTHERN SUN FARM SANCTUARY INC</td>
<td>75-4762605</td>
<td>501 (c)(3)</td>
<td>10,000.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SOUTHERN UTAH WILDERNESS ALLIANCE</td>
<td>87-1000301</td>
<td>501 (c)(3)</td>
<td>111,450.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SOUTHERN VALLEY ALLIANCE</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>6,900.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SOUTHFIELD COMMUNITY CHURCH</td>
<td>01-4582566</td>
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<td>32,950.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SOUTHLAND CHRISTIAN CHURCH OF LEXINGTON KEN</td>
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<td>6</td>
<td>SOUTMINISTER INC</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>25,000.</td>
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<tr>
<td>7</td>
<td>SOUTMINISTER PRESBYTERIAN CHURCH</td>
<td>01-4582566</td>
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<td>59,300.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>SOUTBRIDGE REFORMED CHURCH</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>12,000.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SOUTHSIDE CHURCH OF CHRIST</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>11,600.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SOUTHSIDE COMMUNITY LAND TRUST</td>
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<td>16,000.</td>
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<td>11</td>
<td>SOUTHSIDE MINISTRIES, INC.</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>15,000.</td>
<td>FMV  N/A</td>
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<td>12</td>
<td>SOUTHSIDE SOCIETY FOR THE PREVENTION OF CRU</td>
<td>01-4582566</td>
<td>501 (c)(3)</td>
<td>14,993.</td>
<td>FMV  N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020

JSA
0E1288 1.000

18674H 1467  V 20-7.21
### Part I  General Information on Grants and Assistance

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   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>SOUTHSIDE VIRGINIA COMMUNITY COLLEGE FOUNDATION</td>
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<tr>
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<td>FMV</td>
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<td>SOUTHWEST FLORIDA SYMPHONY ORCHESTRA AND CH</td>
<td>59-1350404</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>SOUTHWEST HARBOR PUBLIC LIBRARY</td>
<td>01-0241528</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>SOUTHWEST HUMAN DEVELOPMENT</td>
<td>86-0407179</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>SOUTHWEST INDIAN FOUNDATION</td>
<td>85-0203522</td>
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<td>10,605.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>SOUTHWEST SEATTLE HISTORICAL SOCIETY</td>
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<td>FMV</td>
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<tr>
<td>SOUTHWEST WILDLIFE CONSERVATION CENTER</td>
<td>86-0765249</td>
<td>501 (C) 3</td>
<td>11,500.</td>
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<td>SOUTHWESTERN BAPTIST THEOLOGICAL SEMINARY</td>
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<tr>
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<td>100,000.</td>
<td>FMV</td>
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<tr>
<td>SOUTHWESTERN ILLINOIS COLLEGE FOUNDATION</td>
<td>51-0186120</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>SOUTHWESTERN MEDICAL FOUNDATION</td>
<td>75-0945939</td>
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<td>112,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
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</tbody>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SOUTHWESTERN UNIVERSITY</td>
<td>1001 E UNIVERSITY AVE GEORGETOWN, TX 78626</td>
<td>74-1233796</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) SOUTHWESTERN VERMONT HEALTH CARE CORPORATIO</td>
<td>100 HOSPITAL DR BENNINGTON, VT 5201</td>
<td>03-0179435</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) SOUTHWESTERN VERMONT HEALTH CARE FOUNDATION</td>
<td>100 HOSPITAL DR BENNINGTON, VT 5201</td>
<td>45-3362785</td>
<td>501 (C) 3</td>
<td>58,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) SOUTHWESTERN VERMONT MEDICAL CENTER INC</td>
<td>100 HOSPITAL DR BENNINGTON, VT 5201</td>
<td>22-2563241</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) SOUTHWOOD BAPTIST CHURCH</td>
<td>11 GRISCOM LANE WEST DEPTFORD, NJ 8086</td>
<td>22-2403560</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) SOVEREIGN GRACE CHURCH INC</td>
<td>111 GREENTREE RD MARLTON, NJ 8053</td>
<td>22-3210213</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) SOVEREIGN GRACE PRESBYTERIAN CHURCH</td>
<td>3326 ARCHDALE DRIVE CHARLOTTE, NC 28210</td>
<td>41-2266378</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) SOVEREIGN MILITARY HOSPITAL ORDER OF ST</td>
<td>1011 1ST AVE NEW YORK, NY 10022</td>
<td>23-7095245</td>
<td>501 (C) 3</td>
<td>35,250.</td>
<td>FMV</td>
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<tr>
<td>(9) SOVEREIGN MILITARY ORDER OF MALTA FEDERAL A</td>
<td>1730 M ST NW STE 403 WASHINGTON, DC 20036</td>
<td>52-1113253</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) SOW GOOD NOW</td>
<td>80 LANCASTER AVE STE 100UIF DEVON, PA 19333</td>
<td>83-0997543</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>(11) SOW GOOD SEEDS FOUNDATION</td>
<td>414 CASA LOMA CT SAN JOSE, CA 95129</td>
<td>82-1973537</td>
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<td>7,500.</td>
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<tr>
<td>(12) SOZO COALITION</td>
<td>7262 ASHINGTON DR DALLAS, TX 75225</td>
<td>81-4593402</td>
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<td>63,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>8(h) Purpose of grant or assistance</th>
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<tr>
<td>SPANISH PEAKS COMMUNITY FOUNDATION</td>
<td>37-1729310</td>
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<td>47-4568396</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SPARK YOUTH NYC INC</td>
<td>13-3037380</td>
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<td>FMV</td>
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<td>501 (C) 3</td>
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<td>SPAULDING FOR CHILDREN</td>
<td>74-2116380</td>
<td>501 (C) 3</td>
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<td>38-4034286</td>
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<td>SPCA OF TEXAS</td>
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<td>SPEAK UP INC</td>
<td>84-2765230</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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## Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [ ]
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1</td>
<td>SPEARFISH FOUNDATION FOR PUBLIC EDUCATION A</td>
<td>71-0865732</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>SPECIAL DELIVERY SAN DIEGO</td>
<td>33-0475238</td>
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<td>FMV</td>
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<td>3</td>
<td>SPECIAL EDUCATION LEGAL FUND INC</td>
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<td>FMV</td>
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<td>SPECIAL K RANCH INC</td>
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<td>SPECIAL OLYMPICS INC</td>
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<td>23-7328374</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SPECIAL OLYMPICS NORTH CAROLINA INC</td>
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<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPECIAL OLYMPICS PENNSYLVANIA INC</td>
<td>23-2078543</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FMV</td>
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<tr>
<td>SPECIAL OLYMPICS TEXAS INC</td>
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<tr>
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<td>47-2423530</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPECTRUM CHURCH SAN JOSE CORP</td>
<td>46-5546289</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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

| (Form 990) | 2020 | Open to Public Inspection |

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  X Yes   No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPECTRUM DESIGNS FOUNDATION LTD 416 MAIN ST PORT WASHINGTON, NY 11050 27-5020830 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>SPECTRUM INC 31 ELMOOD AVE BURLINGTON, VT 05401 03-0253232 501 (C) 3 5,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>SPEECH &amp; LANGUAGE CENTER OF NORTH VIRGINIA 1125 SAVILLE LN MC LEAN, VA 22101 54-0993569 501 (C) 3 16,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPENCE-CHAPIN SERVICES TO FAMILIES AND CHILDREN 410 E 92ND ST NEW YORK, NY 10128 13-1834590 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPEYER LEGACY SCHOOL 925 9TH AVE NEW YORK, NY 10019 26-4274070 501 (C) 3 381,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPHINX ORGANIZATION INC 2200 HUNT ST STE 461 DETROIT, MI 48207 38-3283759 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPIKES K9 FUND 1706 MERRIS AVE NORFOLK, VA 23509 47-2144242 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPIVA BIFIDA ASSOCIATION OF AMERICA 1600 WILSON BLVD STE 800 ARLINGTON, VA 2220 58-1342181 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPIRIT OF AMERICA WORLDWIDE 3033 WILSON BLVD ARLINGTON, VA 22201 20-1687786 501 (C) 3 28,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>SPIRIT OF ELIJAH MINISTRIES INTERNATIONAL PO BOX 377 BULLVERDE, TX 78163 74-2923374 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>SPIRIT OF JOY LUTHERAN CHURCH 2208 W LAQUINTA ST SIOUX FALLS, SD 57108 46-0457455 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<tbody>
<tr>
<td>1</td>
<td>SPIRIT ROCK MEDITATION CENTER</td>
<td>94-2971001</td>
<td>501 (C) 3</td>
<td>35,200.</td>
<td>FMV</td>
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<td>2</td>
<td>SPIRIT TRUST LUTHERAN</td>
<td>23-1476329</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>SPIRITS FOR SMILES INC</td>
<td>84-5091654</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>SPIRITUAL FORMATION SOCIETY OF ARIZONA</td>
<td>46-2104725</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SPLASH INTERNATIONAL</td>
<td>56-2600599</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SPOKANE COMMUNITY CHURCH</td>
<td>91-1566663</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>7</td>
<td>SPOKANE FIRST CHURCH OF THE NAZARENE</td>
<td>91-0726172</td>
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<td>17,250.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>SPOKANE GUILDS SCHOOL AND NEUROMUSCULAR CEN</td>
<td>83-0863163</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>SPOLETO FESTIVAL U S A</td>
<td>57-0660848</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>SPONSORED BY GRACE INC</td>
<td>83-1421653</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>SPONSORS FOR EDUCATIONAL OPPORTUNITY INC</td>
<td>13-2578670</td>
<td>501 (C) 3</td>
<td>91,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>SPORT DISCIPLE</td>
<td>82-4565847</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
## (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SPORTS LEGENDS OF DELAWARE COUNTY INC</td>
<td>47-5309863</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>SPREAD THE VOTE</td>
<td>81-5308494</td>
<td>501 (C) 3</td>
<td>35,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>SPRING BRANCH COMMUNITY CHURCH</td>
<td>1500 N GREAT NECK RD VIRGINIA BEACH, VA 234</td>
<td>54-1663348</td>
<td>9,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>SPRING HILL CAMPS</td>
<td>PO BOX 100 EVART, MI 49631</td>
<td>38-6090586</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SPRING HILL COLLEGE</td>
<td>4000 DAUPHIN ST MOBILE, AL 36608</td>
<td>63-0302179</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SPRING ISLAND TR</td>
<td>174 CALLAWASSIE DR OKATIE, SC 29909</td>
<td>57-0905093</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>SPRING LAKE RANCH INC</td>
<td>1169 SPRING LAKE RD CUTTINGSVILLE, VT 5738</td>
<td>03-0200366</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>SPRING MEADOW BAPTIST CHURCH</td>
<td>4256 COLUMBIA PIKE FRANKLIN, TN 37064</td>
<td>62-1515475</td>
<td>450,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>SPRING VALE CHRISTIAN SCHOOL</td>
<td>4150 S M 52 OWOSSO, MI 48867</td>
<td>38-1541802</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>SPRINGBOARD COLLABORATIVE</td>
<td>2 PENN CENTER 1500 JFK BLVD 1160 PHILADELPH</td>
<td>45-3719806</td>
<td>51,251.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>SPRINGBOARD TO LEARNING INC</td>
<td>1310 PAPIN ST STE 402 SAINT LOUIS, MO 63103</td>
<td>43-1202003</td>
<td>6,536.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>SPRINGBOARD TO OPPORTUNITIES</td>
<td>854 N JEFFERSON ST JACKSON, MS 39202</td>
<td>46-1917760</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - Yes [x] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>SPRINGBROOK NY INC</td>
<td>15-0539129</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 833 SPRINGDALE, AR 72765</td>
<td>46-2486091</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGDALE PUBLIC SCHOOLS</td>
<td>71-6021364</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 8 SPRINGDALE, AR 72765</td>
<td>27-1654071</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGFIELD BOYS &amp; GIRLS CLUB INC</td>
<td>04-1858620</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGFIELD COLLEGE</td>
<td>263 ALDEN ST SPRINGFIELD, MA 1109</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGFIELD FOUNDATION</td>
<td>333 N LIMESTONE ST STE 201 SPRINGFIELD, OH</td>
<td>501 (C) 3</td>
<td>100,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>SPRINGFIELD HOSPITAL INC</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGFIELD JEWISH COMMUNITY CENTER INC</td>
<td>1160 DICKINSON ST SPRINGFIELD, MA 1108</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGFIELD MUSEUMS CORPORATION</td>
<td>21 EDWARDS ST SPRINGFIELD, MA 1103</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGS COMMUNITY CHURCH</td>
<td>7290 LEXINGTON DR COLORADO SPRINGS, CO 8091</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPRINGS FOOD PANTRY INC</td>
<td>5 OLD STONE HWY EAST HAMPTON, NY 11937</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<tr>
<td>SPRINGS OF HOPE KENYA INC 2504 SOUTHPONTE DR DUNEDIN, FL 34698 26-3955826 501 (c) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>SPRINGS RESCUE MISSION 5 W LAS VEGAS ST COLORADO SPRINGS, CO 80903 84-1340824 501 (c) 3 28,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>SPRINGSIDE CHESTNUT HILL ACADEMY 500 N WILLOW GROVE AVE PHILADELPHIA, PA 191 23-1352681 501 (c) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SPROUT THERAPEUTIC RIDING AND EDUCATION CEN 40685 JOHN MOSBY HWY ALDIE, VA 20105 27-3045516 501 (c) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUAM LAKE ASSOCIATION 534 US ROUTE 3 HOLDERNESS, NH 3245 02-0256498 501 (c) 3 13,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUAM LAKE CONSERVATION SOCIETY PO BOX 696 HOLDERNESS, NH 3245 02-6012747 501 (c) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUAM LAKE NATURAL SCIENCE CENTER PO BOX 173 HOLDERNESS, NH 3245 02-0271824 501 (c) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUARE ONE MINISTRY 810 N VINEYARD BLVD HONOLULU, HI 96817 26-1410755 501 (c) 3 31,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUASH AND EDUCATION ALLIANCE INC 14TH FLOOR NEW YORK, NY 10004 20-4597358 501 (c) 3 16,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUASH HAVEN INC 70 TOWER PKWY NEW HAVEN, CT 6511 20-5500876 501 (c) 3 13,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SQUASH SMARTS INC 3890 N 10TH ST PHILADELPHIA, PA 19140 23-3060172 501 (c) 3 13,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>SQUASHBUSTERS INC 795 COLUMBUS AVE ROXBURY, MA 2120 04-3330698 501 (c) 3 20,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tr>
<td>PO BOX 99165 EMERYVILLE, CA 94662</td>
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<td>SRI SAMBHA SATASIVA VIDYA FEETHAM</td>
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<td>FMV</td>
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<td>2344 WALSH AVE STE A SANTA CLARA, CA 90501</td>
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<td>SRINGERI VIDYA BHARATI FOUNDATION INC</td>
<td>327 CAYS RD STROUDERBURG, PA 18360</td>
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<tr>
<td>7440 STATE HIGHWAY 121 MCKINNEY, TX 75070</td>
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<tr>
<td>SS FRANCIS &amp; CLARE OF ASSISI CATHOLIC CHURC</td>
<td>35-1988350</td>
<td>501 (C) 3</td>
<td>41,000.</td>
<td>FMV</td>
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<td>SS MARY AND HYACINTH PARISH</td>
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<td>819 3RD AVENUE ANTIGO, WI 54409</td>
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<tr>
<td>SS PETER AND PAUL LUTHERAN CHURCH</td>
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<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<tr>
<td>1010 MADELEINE ST HOUGHTON, MI 49931</td>
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</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>47-0399437</td>
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<td>PO Box 349 Scottsbluff, NE 69363</td>
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<td>FMV</td>
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<td>100,000</td>
<td>FMV</td>
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<tr>
<td>PO Box 522 Gilbertsville, MA 1031</td>
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<td>7,500</td>
<td>FMV</td>
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<td>40 Maple St New Canaan, CT 6840</td>
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<td>501 (C) 3</td>
<td>9,800</td>
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<tr>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>27,000.</td>
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<tr>
<td>ST ANDREWS BY THE SHA UNITED METHODIST CHUR</td>
<td>57-0545273</td>
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<td>16,300.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM
Employer identification number
23-2888152

Part I
General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................................................................................. X Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
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<tbody>
<tr>
<td>ST ANDREWS EPISCOPAL DAY SCHOOL</td>
<td>370 OLD AGENCY RD RIDGELAND, MS 39157</td>
<td>64-0324405</td>
<td>501 (c) 3</td>
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<td>ST ANDREWS EPISCOPAL SCHOOL INC</td>
<td>8804 POSTOAK RD POTOMAC, TX 78705</td>
<td>52-1107876</td>
<td>501 (c) 3</td>
<td>13,700.</td>
<td>FMV</td>
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<td>ST ANDREWS EVANGELICAL LUTHERAN CHURCH</td>
<td>1112 W 31ST ST AUSTIN, MD 78705</td>
<td>74-6003626</td>
<td>501 (c) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST ANDREWS SCHOOL OF BOCA RATON INC</td>
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<td>59-0942383</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
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<td>ST ANDREWS SCHOOL OF DELAWARE INC</td>
<td>350 NOXONTOWN RD MIDDLETOWN, DE 19709</td>
<td>51-0079506</td>
<td>501 (c) 3</td>
<td>58,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST ANDREWS-SEWANEE SCHOOL</td>
<td>290 QUINTARD RD SEWANEE, TN 37375</td>
<td>62-0475694</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ST ANN CATHOLIC CHURCH INDIANAPOLIS INC</td>
<td>6350 S MOORESVILLE RD INDIANAPOLIS, IN 4622</td>
<td>27-4949740</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST ANN CATHOLIC PARISH COPPELL</td>
<td>180 SAMUEL BLVD COPPELL, TX 75019</td>
<td>75-2250472</td>
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<td>22,250.</td>
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<tr>
<td>ST ANNE'S EPISCOPAL CHURCH</td>
<td>2690 FAIRLAWN DR WINSTON SALEM, NC 27106</td>
<td>56-6066168</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST ANNES EPISCOPAL CHURCH INC</td>
<td>3098 SAINT ANNES LN NW ATLANTA, GA 30327</td>
<td>58-6010151</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

I Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☒ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>ST ANNES MATERNITY HOME</td>
<td>95-1691306</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>155 N OCCIDENTAL BLVD LOS ANGELES, CA 90026</td>
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<td>ST ANNS WAREHOUSE INC</td>
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<td>ST ANSELMS ABBEY SCHOOL INC</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>4501 SOUTH DAKOTA AVE NE WASHINGTON, DC 200</td>
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<tr>
<td>PO BOX 548 RIDGELAND, SC 29936</td>
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<td>PO BOX 1448 BLUE RIDGE</td>
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<td>150 GOLDEN GATE AVE SAN FRANCISCO, CA 94102</td>
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<td>ST ANTHONY OF PADA</td>
<td>91-1360912</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 175 CARNATION, WA 98014</td>
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<tr>
<td>307 GOWER ST GREENVILLE, SC 29611</td>
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<tr>
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<td>36-2170341</td>
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<td>18,100.</td>
<td>FMV</td>
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<td>1615 LINCOLN ST EVANSTON, IL 60201</td>
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<td>ST AUGUSTINE CENTER</td>
<td>20-8957171</td>
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<tr>
<td>2486 W 14TH ST CLEVELAND, OH 44113</td>
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<tr>
<td>ST AUGUSTINE PARISH</td>
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<td>2486 W 14TH ST CLEVELAND, OH 44113</td>
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</tbody>
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3. Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>ST BALDRICKS FOUNDATION INC</td>
<td>20-1173824</td>
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<td>ST BARNABAS LUTHERAN CHURCH</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST BARTHOLOMOW CATHOLIC CHURCH COLUMBUS INC</td>
<td>35-0868940</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>ST BASIL THE GREAT PARISH</td>
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<td>FMV</td>
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<tr>
<td>ST BEDE THE VENERABLE CATHOLIC CHURCH</td>
<td>85-4747370</td>
<td>501 (C) 3</td>
<td>12,500.</td>
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<td>FMV</td>
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<td>ST BENEDICT CATHEDRAL</td>
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<td>10,000.</td>
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<td>FMV</td>
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<td>ST BENEDICT CATHOLIC CHURCH JOHNS CREEK INC</td>
<td>58-1916181</td>
<td>501 (C) 3</td>
<td>7,200.</td>
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<td>FMV</td>
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<td>ST BENEDICT CLASSICAL ACADEMY INC</td>
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<td>501 (C) 3</td>
<td>20,000.</td>
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<td>FMV</td>
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<td>ST BERNARD</td>
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<tr>
<td>ST BERNARD OF CLAIRVAUX ROMAN CATHOLIC PARI</td>
<td>36-4643964</td>
<td>501 (C) 3</td>
<td>7,230.</td>
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</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST BERNARD PARISH 7474 HARMOOD AVE MILWAUKEE, WI 53213 39-0806326 501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BERNARDINE'S ROMAN CATHOLIC CHURCH 3812 EDMONDSON AVENUE BALTIMORE, MD 21229-1</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BERNARDE CONGREGATION 2015 FARMER ST MIDDLETON, WI 53562</td>
<td>106,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BERNARDS SCHOOL INC 4 K 9TH ST NEW YORK, NY 10029</td>
<td>104,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BONAVENTURE INDIAN MISSIONS &amp; SCHOOL PO BOX 610 THOREAU, NM 87323</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BONAVENTURE ORATORY 1641 W DIVERSEY PKWY CHICAGO, IL 60614</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST BONAVENTURE UNIVERSITY BUSINESS OFFICE - BUSINESS OFFICE ADMIN BLDG ST BONAVENTURE, 16-0743150 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST BRIDGET PARISH 4900 NE 50TH ST SEATTLE, WA 98105</td>
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<td>FMV</td>
<td>N/A</td>
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<td>ST BRIDGETS CHURCH 3667 MIDVALE AVE PHILADELPHIA, PA 19129</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST CATHERINE LABOURE PARISH &amp; SCHOOL 3535 THORNWOOD AVE GLENSIDE, PA 19038</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>501 (C) 3</td>
<td>22,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) ST CATHERINE OF SIENA CHURCH</td>
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<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
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<td>(3) ST CATHERINE UNIVERSITY</td>
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<td>(5) ST CECILIA PARISH</td>
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<td>FMV</td>
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<td>(6) ST CECILIA PARISH IN FORT MYERS INC</td>
<td>59-1092092</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>(7) ST CHARLES BORROMEO CHURCH</td>
<td>36-2416193</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(8) ST CHARLES BORROMEO PARISH</td>
<td>31-0656787</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
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<td>6,700.</td>
<td>FMV</td>
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<tr>
<td>(11) ST CHARLES PARISH</td>
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<td>FMV</td>
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<tr>
<td>(12) ST CHARLES CHURCH</td>
<td>59-2419719</td>
<td>501 (C) 3</td>
<td>11,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ST CHRISTOPHERS CHILDREN</td>
<td>14323 OCEAN HWY UNIT 4143 PAWLEYS ISLAND, S 26-1484198</td>
<td>501 (c) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) ST CHRISTOPHERS CHURCH</td>
<td>226 RIGHTSERS MILL RD GLADWIN, PA 19035 23-1501168</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) ST CHRISTOPHERS EPISCOPAL CHURCH</td>
<td>2300 NAMLINE AVE N SAINT PAUL, MN 55113 41-6009110</td>
<td>501 (c) 3</td>
<td>12,750.</td>
<td>FMV</td>
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<tr>
<td>(4) ST CHRISTOPHERS INN INC</td>
<td>21 FRANCIS CANY WARRIOR, NY 10524 13-3668321</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ST CLARE OF ASSISI CATHOLIC PARISH IN EDWAR</td>
<td>PO BOX 1390 EDWARDS, CO 81632 84-1237387</td>
<td>501 (c) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6) ST CLARE ROMAN CATHOLIC CHURCH</td>
<td>141 I CROSS STREET O FALLON, IL 62269 37-0791117</td>
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<td>(7) ST CLEMEN OF ROME CATHOLIC CHURCH</td>
<td>1510 BOPP RD SAINT LOUIS, MO 63131 43-0679164</td>
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<tr>
<td>(8) ST CLEMENTS PARISH</td>
<td>71 WARNER ST MEDFORD, MA 2155 04-2109874</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) ST COLETTA OF WISCONSIN INC</td>
<td>N4637 COUNTY ROAD Y JEFFERSON, WI 53549 39-08168855</td>
<td>501 (c) 3</td>
<td>250,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) ST COLUMBA EPISCOPAL CHURCH AND NURSERY SCH</td>
<td>4201 ALBEMARLE ST NW WASHINGTON, DC 20016 53-0232824</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(11) ST COLUMBUSANUS CHURCH</td>
<td>122 OREGON RD CORTLANDT MANOR, NY 10567 13-1853769</td>
<td>501 (c) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) ST DANIEL</td>
<td>7101 VALLEY PARK DRIVE CLARKSTON, MI 48346 38-1881548</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [X]  
   - No ___

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (e) Amount of non-cash assistance</th>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST DAVIDS CENTER</td>
<td>3395 PLYMOUTH RD HOPKINS, MN 55305</td>
<td>41-1429208</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST DENIS PARISH</td>
<td>2250 AVY AVE MEHL PARK, CA 94025</td>
<td>94-1556499</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST DOMINIC CATHOLIC PARISH</td>
<td>18255 W CAPITOL DR BROOKFIELD, WI 53045</td>
<td>39-0928315</td>
<td>501 (C) 3</td>
<td>5,150.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST DOMINIC CHURCH</td>
<td>3450 NORWOOD RD SHAKER HEIGHTS, OH 44122</td>
<td>34-0745532</td>
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<td>148,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST EDMONDS HOME FOR CRIPPLED CHILDREN</td>
<td>222 N 17TH ST PHILADELPHIA, PA 19103</td>
<td>23-1365399</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST ELEANOR CATHOLIC CHURCH &amp; SCHOOL</td>
<td>647 LOCUST ST COLLEGEVILLE, PA 19426</td>
<td>23-1472508</td>
<td>501 (C) 3</td>
<td>19,250.</td>
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<tr>
<td>ST ELIZABETH ANN SETON</td>
<td>2771 OAKWOOD DR GREEN BAY, WI 54304</td>
<td>39-1313070</td>
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<td>151,000.</td>
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<td>N/A</td>
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<tr>
<td>ST ELIZABETH ANN SETON</td>
<td>645 N 119TH ST W WICHITA, KS 67235</td>
<td>48-0937789</td>
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<td>13,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST ELIZABETH ANN SETON CATHOLIC CHURCH</td>
<td>2 SETON CT SAINT CHARLES, MO 63303</td>
<td>43-1052067</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST ELIZABETH ANN SETON CATHOLIC HIGH SCHOOL</td>
<td>811 NE 112TH AVE STE 200 VANCOUVER, WA 98668</td>
<td>91-2083459</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST ELIZABETH ANN SETON CATHOLIC PARISH</td>
<td>2701 PIEDRA DR PLAN, TX 75023</td>
<td>75-1508125</td>
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<td>40,337.</td>
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<td>ST ELIZABETH ANN SETON CATHOLIC SCHOOL</td>
<td>1300 CAROLINA FOREST BLVD MYRTLE BEACH, SC</td>
<td>26-1434028</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18744H 1467 V 20-7.21
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ST ELIZABETH OF HUNGARY PARISH</td>
<td>04-2205260</td>
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<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>ST ELIZABETHS SCHOOL</td>
<td>22-3875755</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ST FRANCIS BORGIA CATHOLIC CHURCH</td>
<td>43-0653465</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>4</td>
<td>ST FRANCIS CATHOLIC CHurch</td>
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<td>5</td>
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<td>8</td>
<td>ST FRANCIS COMMUNITY SERVICES</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST FRANCIS DESALES CHurch</td>
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<td>10</td>
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<td>12</td>
<td>ST FRANCIS EPISCOPAL CHURCH &amp; GIFT SHOP</td>
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<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST FRANCIS HIGH SCHOOL</td>
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<td>501 (C) 3</td>
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<td>ST FRANCIS HIGH SCHOOL</td>
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<td>ST FRANCIS HIGH SCHOOL INC</td>
<td>31-0896538</td>
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<tr>
<td>ST FRANCIS HOUSE OF SIOUX FALLS</td>
<td>46-0423202</td>
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<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST FRANCIS INN</td>
<td>42-1538074</td>
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<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST FRANCIS MISSION FOUNDATION</td>
<td>26-1904576</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST FRANCIS NEIGHBORHOOD CENTER CORPORATION</td>
<td>52-0968759</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST FRANCIS OF ASSISI</td>
<td>36-3737610</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST FRANCIS OF ASSISI CATHOLIC CHURCH LUEBSE</td>
<td>43-1028843</td>
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<td>9,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST FRANCIS OF ASSISI CATHOLIC PARISH-FRISCO</td>
<td>75-2779897</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST FRANCIS REGIONAL MEDICAL CENTER</td>
<td>41-0907986</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................

3. Enter total number of other organizations listed in the line 1 table ...........................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ST FRANCIS SPRINGS PRAYER CENTER INC</td>
<td>03-0469917</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
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<td>36-2171005</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST FRANCIS XAVIER ROMAN CATHOLIC PARISH PHO</td>
<td>38-3792643</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>4</td>
<td>ST FRANCIS-ST JOSEPH CATHOLIC WORKER HOUSE</td>
<td>31-1357231</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>5</td>
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<td>23-2527451</td>
<td>501 (C) 3</td>
<td>10,420.</td>
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<td>6</td>
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<td>30-0220140</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>501 (C) 3</td>
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<td>8</td>
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<td>ST GEORGE ORTHODOX CHURCH OF INDPLS INDIANA</td>
<td>35-1148086</td>
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<td>9,000.</td>
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<td>21,783.</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  [X] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST GEORGES SCHOOL 372 PURGATORY RD MIDDLETOWN, RI 2842 05-0259009 501 (C) 3 18,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST GERARD MAJELLA CATHOLIC CHURCH 1969 DOUGHERTY FERRY RD SAINT LOUIS, MO 631 43-0747661 501 (C) 3 10,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST GILES PARISH 1025 COLUMBIAN AVE OAK PARK, IL 60302 36-2171014 501 (C) 3 13,250. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST GREGORY THE GREAT CATHOLIC CHURCH 5345 VIRGINIA BEACH BLVD VIRGINIA BEACH, VA 54-0683038 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST HELENA HOSPITAL FOUNDATION 10 WOODLAND RD SAINT HELENA, CA 94574 20-1384250 501 (C) 3 10,924. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST HILARYS CHURCH 761 HILARY DR BELVEDERE TIBURON, CA 94920 94-1294945 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST HILARYS EPISCOPAL CHURCH 5011 MCGREGOR BLVD FORT MYERS, FL 33901 59-0973728 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST IGNATIUS COLLEGE OF CHICAGO 1076 W ROOSEVELT RD STE 1 CHICAGO, IL 60608 36-2167867 501 (C) 3 45,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [ ] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>ST IGNATIUS HIGH SCHOOL OF CLEVELAND</td>
<td>34-0714500</td>
<td>501 (C) 3</td>
<td>32,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ST IGNATIUS MARTYR CATHOLIC CHURCH AUSTIN T</td>
<td>74-1313906</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
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<td>13-1790907</td>
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<td>4</td>
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<td>6</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>ST JAMES LUTHERAN CHURCH OF GETTYSBURG</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
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<td>PO BOX 433 FAYETTEVILLE, AR 72702</td>
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<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>8320 BROOKSIDE RD ELKINS PARK, PA 19027</td>
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<td>ST JAMES THE GREATER CATHOLIC CHURCH</td>
<td>43-0653480</td>
<td>501 (C) 3</td>
<td>55,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6401 WADE AVE SAINT LOUIS, MO 63139</td>
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<td>ST JOAN OF ARC CATHOLIC CHURCH</td>
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<td>46,900</td>
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<td>ST JOAN OF ARC PARISH</td>
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<td>10,700</td>
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<td>5856 HEATHERDOWNS BLVD TOLEDO, OH 43614</td>
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<td>ST JOHN BOSCO CATHOLIC SCHOOL INC</td>
<td>20-8638023</td>
<td>501 (C) 3</td>
<td>31,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST JOHN CHRYSOSTOM RECTORY</td>
<td>23-1501177</td>
<td>501 (C) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>ST JOHN EVANGELICAL LUTHERAN CHURCH OF WHEA</td>
<td>36-2348567</td>
<td>501 (C) 3</td>
<td>7,300</td>
<td>FMV</td>
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<tr>
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<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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3. Enter total number of other organizations listed in the line 1 table...
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1. **General Information on Grants and Assistance**
   - Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

#### Part II

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST JOHN LUTHERAN CHURCH</td>
<td>6135 RINGS RD DUBLIN, CA 93311</td>
<td>23-7085486</td>
<td>501 (C) 3</td>
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<td>4500 BUENA VISTA RD BAKERSFIELD, CA 93316</td>
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<td>ST JOHN LUTHERAN CHURCH OF BOERNE TX</td>
<td>PO BOX 1081 BOERNE, TX 78006</td>
<td>74-6087115</td>
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<td>29,500</td>
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<td>ST JOHN NEUMANN CATHOLIC CHURCH AUSTIN TEXA</td>
<td>5455 BEE CAVES RD WEST LAKE HILLS, TX 78746</td>
<td>74-2331461</td>
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<tr>
<td>ST JOHN NEUMANN ROMAN CATHOLIC CHURCH</td>
<td>PO BOX 455 CALIFORNIA, CA 93301</td>
<td>22-2457354</td>
<td>501 (C) 3</td>
<td>12,100</td>
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<tr>
<td>ST JOHN NEUMANN SEMINARY COLLEGE AT ST JOSE</td>
<td>1011 1ST AVE NEW YORK, NY 10022</td>
<td>11-1740353</td>
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<td>10,000</td>
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<tr>
<td>ST JOHN PAUL II NEWMAN CENTER INC</td>
<td>1221 S 71ST ST OMAHA, NE 68106</td>
<td>90-1033171</td>
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<td>6,000</td>
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<tr>
<td>ST JOHN THE BAPTIST CATHOLIC CHURCH</td>
<td>4625 W 1ST ST SAVAGE, OK 73034</td>
<td>41-0791350</td>
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<td>ST JOHN THE BAPTIST CATHOLIC CHURCH</td>
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<td>73-6095725</td>
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<td>ST JOHN THE BAPTIST ORTHODOX CATHOLIC CHURCH</td>
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<td>ST JOHN THE EVANGELIST CHURCH AND SCHOOL</td>
<td>10103 GEORGIA AVE SILVER SPRING, MD 20902</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>1</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>PO BOX 5716 BELLEVILLE, NC 28144</td>
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<td>ST JOHNS FOUNDATION</td>
<td>81-0459472</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3940 RIMROCK RD BILLINGS, MT 59102</td>
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<td>ST JOHNS ROSFICE</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>415 S FINE ST SPARTANBURG, WI 53045</td>
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<tr>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table [ ]

Enter total number of other organizations listed in the line 1 table [ ]
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST JOSEPH CATHOLIC CHURCH</td>
<td>269 DAKOTA ST S PRESCOTT, WI 54021</td>
<td>39-0806861</td>
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<td>$25,000</td>
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<tr>
<td>ST JOSEPH CATHOLIC CHURCH ATHENS INC</td>
<td>958 EPPS BRIDGE PKWY ATHENS, GA 30606</td>
<td>58-2595739</td>
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<td>43-0688873</td>
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<td>ST JOSEPH CATHOLIC PARISH IN FT COLLINS</td>
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<td>84-0413978</td>
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<td>95-3874381</td>
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<td>ST JOSEPH CHURCH</td>
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<td>ST JOSEPH CHURCH</td>
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<td>91-0588423</td>
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<td>ST JOSEPH FOOD PROGRAM INC</td>
<td>1465A OPPORTUNITY WAY MENASHA, WI 54952</td>
<td>39-1822486</td>
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<td>PO BOX 390 FORT WAYNE, IN 46801</td>
<td>35-0924794</td>
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<td>ST JOSEPH NOTRE DAME HIGH SCHOOL</td>
<td>1011 CHESTNUT ST ALAMEDA, CA 94501</td>
<td>87-0713302</td>
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<td>FMV</td>
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<td>ST JOSEPH PARISH</td>
<td>1709 WYATT AVE STEVENS POINT, WI 54481</td>
<td>39-0816888</td>
<td>501 (C) 3</td>
<td>$13,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST JOSEPH SOCIAL SERVICE CENTER</td>
<td>812 REBECCA PL ELIZABETH, NJ 7201</td>
<td>52-1467470</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST JOSEPHS CATHOLIC CHURCH</td>
<td>11730 OLD SAINT AUGUSTINE RD JACKSONVILLE,</td>
<td>59-1154679</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST JOSEPHS CATHOLIC SCHOOL INC</td>
<td>100 SAINT JOSEPHS DR GREENVILLE, SC 29607</td>
<td>57-0965988</td>
<td>501 (C) 3</td>
<td>36,350.</td>
<td>FMV</td>
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<td>ST JOSEPHS CHURCH</td>
<td>211 ATLANTIC AVE SHREVEPORT, LA 71105</td>
<td>72-0453616</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST JOSEPHS COLLEGIATE INSTITUTE</td>
<td>845 KENMORE AVE BUFFALO, NY 14223</td>
<td>16-0743159</td>
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<td>8,000.</td>
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<tr>
<td>ST JOSEPHS HOUSE OF HOSPITALITY OF ROCHESTER</td>
<td>402 SOUTH AVE ROCHESTER, NY 14620</td>
<td>16-6038688</td>
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<td>5,600.</td>
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<td>ST JOSEPHS INDIAN SCHOOL</td>
<td>PO BOX 776 CHAMBERLAIN, SD 57325</td>
<td>46-0235912</td>
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<td>1733 W GIRARD AVE PHILADELPHIA, PA 19130</td>
<td>23-1352675</td>
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<td>202,500.</td>
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<td>ST JOSEPH'S REGIONAL SCHOOL</td>
<td>11 HARBOR LN SOMERS POINT, NJ 8244</td>
<td>22-2019930</td>
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<tr>
<td>ST JOSEPHS SOUP KITCHEN INCORPORATED</td>
<td>12 W 12TH ST NEW YORK, NY 10011</td>
<td>47-39999417</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST JUDE CATHOLIC PARISH</td>
<td>1515 N GREENVILLE AVE ALLEN, TX 75002</td>
<td>75-2057614</td>
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<td>10,050.</td>
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<tr>
<td>ST JUDE CHILDRENS RESEARCH HOSPITAL INC</td>
<td>262 DANNY THOMAS PL MEMPHIS, TN 38105</td>
<td>62-0646012</td>
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<td>1,931,706.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

#### Employer identification number
23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>ST JUDE THE APOSTLE CATHOLIC CHURCH SANDY S</td>
<td>83-0415529</td>
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<td>ST JUDES EPISCOPAL CHURCH</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST JUDES RANCH FOR CHILDREN INC</td>
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<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST KATHARINE Drexel PARISH</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST LAWRENCE CADDYAN</td>
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<td>ST LAWRENCE UNIVERSITY</td>
<td>23 ROMODA DR CANTON, NY 13617</td>
<td>501 (C) 3</td>
<td>40,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST LEONARDS MINISTRIES</td>
<td>36-2378516</td>
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<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA
0E1288 1,000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>ST LOUIS AREA FOOD BANK INC</td>
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<td>2</td>
<td>ST LOUIS ART MUSEUM FOUNDATION</td>
<td>43-1374479</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>ST LOUIS CHILDREN'S HOSPITAL FOUNDATION</td>
<td>43-1626863</td>
<td>501 (C) 3</td>
<td>6,525.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ST LOUIS COMMUNITY FOUNDATION INCORPORATED</td>
<td>43-1758789</td>
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<td>FMV</td>
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<td>5</td>
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<td>43-1597003</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
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<td>FMV</td>
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<td>ST LOUIS ROMAN CATHOLIC THEOLOGICAL SEMINAR</td>
<td>35-2193456</td>
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<td>12</td>
<td>ST LUKE</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**
General Information on Grants and Assistance

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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
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<td>FOR RECIPIENT'S EXEM</td>
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<td>25-1464517</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
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<td>27-4377746</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
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<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
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<td>6</td>
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<td>93-0493473</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST LUKE LUTHERAN CHURCH AND SCHOOL</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
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<td>10</td>
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<td>FMV</td>
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Schedule I (Form 990) 2020
## Part I  General Information on Grants and Assistance

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   - Yes □  No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>(1) ST LUKES EPISCOPAL CHURCH 20 UNIVERSITY AVE LOS GATOS, CA 95030 94-1358299 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(2) ST LUKES EPISCOPAL CHURCH 2410 MELROSE DR CEDAR FALLS, IA 50613 42-6061415 501 (C) 3 5,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(3) ST LUKES EPISCOPAL SCHOOL OF SAN 15 SAINT LUKES LN SAN ANTONIO, TX 78209 74-1166903 501 (C) 3 82,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(6) ST LUKES MCCALL LTD 190 E BANNOCK ST BOISE, ID 83712 27-3311774 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(7) ST LUKES ROMAN CATHOLIC CHURCH INC 84 LONG LOTS RD WESTPORT, CT 6880 06-0743458 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(8) ST LUKES UNITED METHODIST CHURCH 100 W 8TH ST INDIANAPOLIS, IN 46260 35-0985951 501 (C) 3 8,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(9) ST LUKES UNITED METHODIST CHURCH AT WINDERM 4851 S APOPKA VINELAND RD ORLANDO, FL 32819 59-2135880 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(10) ST LUKES WOOD RIVER FOUNDATION INC PO BOX 7005 KETCHUM, ID 83340 23-7288535 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(11) ST LUKES-JONES REGIONAL MEDICAL CENTER 1795 HIGHWAY 64 E ANAMOSA, IA 52205 42-1487967 501 (C) 3 25,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>(12) ST MARGARET MARY CHURCH 25511 ESHELMAN AVE LOMITA, CA 90717 95-1787047 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>ST MARGARET MARYS CATHOLIC CHURCH &amp; SCHOOL</td>
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<td>ST MARGARET OF SCOTLAND PARISH FOLEY</td>
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<td>FMV N/A</td>
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<td>12</td>
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<td>59-2726279</td>
<td>501 (c) 3</td>
<td>10,800</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) ST MARKS EPISCOPAL CHURCH</td>
<td>2618 N HACKETT AVE MILWAUKEE, GA 30240</td>
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<td>16,500.</td>
<td>FMV</td>
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<td>(2) ST MARK’S EPISCOPAL CHURCH</td>
<td>3395 BURNS RD PALM BEACH GARDENS, FL 33410</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>(3) ST MARKS EVANGELICAL LUTHERAN CHURCH OF ASH</td>
<td>10 N LIBERTY ST ASHEVILLE, NC 28801</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(4) ST MARKS EVANGELICAL LUTHERAN CHURCH OF WAS</td>
<td>200 S MAIN ST WASHINGTON, IL 61571</td>
<td>501 (C) 3</td>
<td>9,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>(5) ST MARKS PARISH</td>
<td>1245 10TH AVE E SEATTLE, WA 98102</td>
<td>501 (C) 3</td>
<td>9,400.</td>
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<td>(6) ST MARKS SCHOOL OF SOUTHBOROUGH INC</td>
<td>PO BOX 9105 SOUTHBOROUGH, MA 1772</td>
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<td>41,000.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>(7) ST MARKS SCHOOL OF TEXAS</td>
<td>10600 PRESTON RD DALLAS, TX 75230</td>
<td>501 (C) 3</td>
<td>617,500.</td>
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<td>N/A</td>
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<td>(8) ST MARON MARONITE CATHOLIC CHURCH</td>
<td>602 UNIVERSITY AVENUE NE MINNEAPOLIS, MN 55</td>
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<td>75,000.</td>
<td>FMV</td>
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<td>(9) ST MARTHA CATHOLIC CHURCH</td>
<td>4301 WOODRIDGE PKW PORTER, TX 77365</td>
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<td>(10) ST MARTIN OF TOURS CHURCH</td>
<td>1 RIVERSTONE CIR NEW HOPE, PA 18938</td>
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<td>8,200.</td>
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<td>(11) ST MARTIN THE MERCIFUL ORTHODOX CHRISTIAN C</td>
<td>PO BOX 157 CORVALLIS, OR 97339</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
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<td>(12) ST MARTINS EPISCOPAL CHURCH</td>
<td>717 SAGE RD HOUSTON, TX 77056</td>
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<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

3. Enter total number of other organizations listed in the line 1 table: .................................................................
**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>ST MARTINS HOME FOR THE AGED LITTLE SISTERS</td>
<td>52-0715244</td>
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<td>ST MARY &amp; ST LOUIS ABBEY</td>
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<td>ST MARY ACADEMY</td>
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<td>ST MARY CATHOLIC CHURCH COLLEGE STATION TEX</td>
<td>74-1616577</td>
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<td>ST MARY OF THE LAKE CHURCH</td>
<td>41-0789357</td>
<td>501 (C) 3</td>
<td>15,735.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>501 (C) 3</td>
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<td>5</td>
<td>ST MARY'S ANAPOLIS ROMAN CATHOLIC CONGREGA</td>
<td>52-0591449</td>
<td>501 (C) 3</td>
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<td>6</td>
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<td>ST MARY'S CENTER FOR WOMEN AND CHILDREN</td>
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<td>FMV</td>
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<td>12</td>
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<td>198,565</td>
<td>FMV</td>
<td>N/A</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tr>
<td>1</td>
<td>ST MARYS EPISCOPAL SCHOOL 60 PERKINS EXT MEMPHIS, TN 38117</td>
<td>62-0604637</td>
<td>501 (C) 3</td>
<td>12,450.</td>
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<td>ST MARYS FOOD BANK ALLIANCE 2831 N 31ST AVE PHOENIX, AZ 85009</td>
<td>23-7353532</td>
<td>501 (C) 3</td>
<td>101,350.</td>
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<td>3</td>
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<td>43-1940686</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>ST MARYS FRANCISCAN SHELTER FOR HOMELESS FAM 209 EMMETT ST PHOENIXVILLE, PA 19460</td>
<td>23-2510392</td>
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<td>94-739083</td>
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<td>7,500.</td>
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<td>06-0653131</td>
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<td>7</td>
<td>ST MARY'S ROMAN CATHOLIC CHURCH 1300 NORTHERN BLVD MANSASSET, NY 11030</td>
<td>11-1642728</td>
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<td>26,000.</td>
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<td>8</td>
<td>ST MARYS SEWANEE A CENTER FOR SPIRITUAL DEV PO BOX 188 SEWANEE, TN 37375</td>
<td>62-1359755</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>9</td>
<td>ST MARYS UNIVERSITY OF SAN ANTONIO 1 CAMINO SANTA MARIA ST SAN ANTONIO, TX 782</td>
<td>74-1143128</td>
<td>501 (C) 3</td>
<td>46,500.</td>
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<td>10</td>
<td>ST MATHIEWS CATHOLIC CHURCH 8015 BALLANTYNE COMMONS PKWY CHARLOTTE, NC 56-1532841</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>ST MATHIEWS EPISCOPAL CHURCH 919 TENNIS AVE AMBLER, PA 19002</td>
<td>23-2319153</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>12</td>
<td>ST MATHIEWS HOUSE INC 2001 AIRPORT RD S NAPLES, FL 34112</td>
<td>65-1110501</td>
<td>501 (C) 3</td>
<td>97,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>ST MATTHEWS R E CHURCH</td>
<td>200 GLEN GARY DR HAVERSTOWN, PA 19083</td>
<td>23-6285726</td>
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<td>6,500.</td>
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<td>ST MATTHIAS CHURCH</td>
<td>3460 FOREST LN DALLAS, TX 75234</td>
<td>20-5592724</td>
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<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>ST MICHAEL CATHOLIC CHURCH</td>
<td>505 BROOME ST FL FERNANDINA BEACH, FL 32034</td>
<td>59-1466671</td>
<td>501 (C) 3</td>
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<td>ST MICHAEL CHURCH</td>
<td>101 MCCLAY DRIVE ELIZABETH, PA 15037</td>
<td>25-0966598</td>
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<td>ST MICHAEL INDIAN SCHOOL</td>
<td>PO BOX 396 SAINT MICHAELS, AZ 86511</td>
<td>86-0101517</td>
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<td>7,000.</td>
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<td>ST MICHAEL PARISH</td>
<td>310 S WHEATON AVE WHEATON, IL 60187</td>
<td>36-2182131</td>
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<td>16,000.</td>
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<td>27977 SILVERADO CANYON RD SILVERADO, CA 92676</td>
<td>27-0422871</td>
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<tr>
<td>ST MICHAELS COMMUNITY CENTER INC</td>
<td>PO BOX 354 SAINT MICHAELS, MD 21663</td>
<td>52-1698879</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
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<td>ST MICHAEL'S POPLAR SPRINGS CATHOLIC CONGREGATION</td>
<td>1125 ST. MICHAEL'S ROAD MOUNT AIRY, MD 2177</td>
<td>52-0857049</td>
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<td>11,250.</td>
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<td>ST MICHAELS PROTESTANT EPISCOPAL CHURCH</td>
<td>225 W 99TH ST NEW YORK, NY 10025</td>
<td>13-1656684</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................  

3. Enter total number of other organizations listed in the line 1 table ...........................................
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes [x]  
   - No [ ]

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1. ST MONICA CATHOLIC CHURCH DULUTH INC</td>
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<td>FMV</td>
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<td>3. ST MONICA CATHOLIC CHURCH</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. ST NERESH ARMENIAN SEMINARY INC</td>
<td>51-0198454</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5. ST NICHOLAS CHURCH</td>
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<td>FMV</td>
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<td>7. ST OLAF COLLEGE</td>
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<td>8. ST OWEN CATHOLIC CHURCH</td>
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<tr>
<td>12. ST PATRICK HOSPITAL FOUNDATION</td>
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<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
![Image of a page from a document with text formatted in a table and paragraphs, likely from a financial or tax form related to grants and other assistance to organizations, governments, and individuals in the United States. The text is structured and appears to include fields for organization name, EIN, amount of grants or cash assistance, method of valuation, and purpose of grant or assistance, among other details.](image-url)
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   [ ] Yes  
   [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
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<td>ST PAUL LUTHERAN CHURCH</td>
<td>106 HWY 4 PLYMOUTH NE 68424 PLYMOUTH, IN 4</td>
<td>47-0560960</td>
<td>501 (C) 3</td>
<td>18,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST PAUL THE APOSTLE CHURCH</td>
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<td>57-1060888</td>
<td>501 (C) 3</td>
<td>15,000.</td>
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<td>N/A</td>
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<td>ST PAUL THE APOSTLE CHURCH</td>
<td>313 N STATE ST WESTERVILLE, SC 29672</td>
<td>31-4424935</td>
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<td>18,700.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST PAULS E LUTHERAN CHURCH AND SCHOOL</td>
<td>210 E PLEASANT ST OCONOMOWOC, WI 53066</td>
<td>39-1273955</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>ST PAULS ENGLISH EVANGELICAL LUTHERAN CHURCH</td>
<td>925 N WACO AVE WICHITA, KS 67203</td>
<td>48-0594092</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>ST PAULS EPISCOPAL CHURCH</td>
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<td>58-1488868</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST PAULS EPISCOPAL CHURCH</td>
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<td>74-1207558</td>
<td>501 (C) 3</td>
<td>9,000.</td>
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<td>161 DOGWOOD LN MOBILE, AL 36608</td>
<td>23-7035434</td>
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<td>9,000.</td>
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<td>22-1779942</td>
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<td>ST PAULS LUTHERAN CHURCH</td>
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<td>23-1352135</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ST PAULS LUTHERAN CHURCH</td>
<td>1200 W CORNWALLIS RD DURHAM, PA 19003</td>
<td>56-0934772</td>
<td>501 (C) 3</td>
<td>11,330.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ST PAULS LUTHERAN CHURCH</td>
<td>13271 MILLARD AVE OMHA, NC 27705</td>
<td>47-0487488</td>
<td>501 (C) 3</td>
<td>31,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST PAULS LUTHERAN CHURCH 1250 E HEIM AVE ORANGE, CA 92865 95-6002691 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
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<tr>
<td>ST PAULS OUTREACH INC 5814 BLACKSHIRE PATH INVER GROVE, MN 55076 41-1621192 501 (C) 3 5,200. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>6</td>
<td>7</td>
</tr>
<tr>
<td>ST PAULS PROTESTANT EPISCOPAL 576 ROSCOE RD NEWNAN, GA 30263 58-0938632 501 (C) 3 90,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>ST PAULS SCHOOL 325 PLEASANT ST CONCORD, NH 3301 02-0222227 501 (C) 3 70,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>ST PAUL'S UCC 133 CHURCH ST BOWMANSVILLE, PA 17507 23-2269484 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PEDERS EVANGELICAL LUTHERAN CHURCH 4600 E 42ND ST MINNEAPOLIS, MN 55406 41-1232872 501 (C) 3 10,460. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4</td>
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<tr>
<td>ST PETER CANEL CATHOLIC CHURCH ROSWELL INC 11330 WOODSTOCK RD ROSWELL, GA 30075 58-2410102 501 (C) 3 17,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>7</td>
</tr>
<tr>
<td>ST PETER CHURCH 8116 NILES CENTER RD SKOKIE, IL 60077 36-2171111 501 (C) 3 14,855. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>3</td>
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</tr>
<tr>
<td>ST PETER CLEVER CATHOLIC CHURCH 375 OXFORD ST N SAINT PAUL, MN 55104 41-0824943 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PETER EVANGELICAL LUTHERAN CHURCH 3751 ESTERO BLVD FORT MYERS BEACH, FL 33931 59-1953967 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PETER THE ROCK MEDIA 145 KEN MAR INDUSTRIAL PKWY BROADVIEW HEIGH 46-5021923 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>ST PETERS CATHEDRAL</td>
<td>59-0657331</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PETERS CATHOLIC CHURCH</td>
<td>70-0572180</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PETERS CATHOLIC CHURCH</td>
<td>31-4385280</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PETERS CHURCH</td>
<td>52-0684276</td>
<td>501 (C) 3</td>
<td>9,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PETERS COMMUNITY ARTS ACADEMY INC</td>
<td>82-4685688</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PETERS EPISCOPAL CHURCH</td>
<td>43-0662493</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PETERS EVANGELICAL LUTHERAN CHURCH</td>
<td>23-6050984</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PETERS KITCHEN INC</td>
<td>20-3278460</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PETERS LUTHERAN CHURCH</td>
<td>39-1019369</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PETERS PARISH</td>
<td>01-0226203</td>
<td>501 (C) 3</td>
<td>21,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PETERS PREPARATORY SCHOOL</td>
<td>22-1527060</td>
<td>501 (C) 3</td>
<td>805,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PETERS SCHOOL</td>
<td>23-1724252</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

SCHEDULE I
(From 990)
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [X]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST PETERS UNITED METHODIST CHURCH 501 E 8TH ST OCEAN CITY, NJ 8226</td>
<td>21-0647705</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PETERSBURG FREE CLINIC INC 863 3RD AVE N SAINT PETERSBURG, FL 33701</td>
<td>23-7208280</td>
<td>501 (C) 3</td>
<td>73,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PHILIP CATHOLIC CHURCH 113 2ND AVE S FRANKLIN, TN 37064</td>
<td>62-0856087</td>
<td>501 (C) 3</td>
<td>13,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PHILIP LUTHERAN CHURCH 7304 FALLS OF NEUSE RD RALEIGH, NC 27615</td>
<td>56-1155861</td>
<td>501 (C) 3</td>
<td>10,502.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>ST PHILIP NERI CHURCH 292 MUNNI RD FORT MILL, SC 29715</td>
<td>57-1014162</td>
<td>501 (C) 3</td>
<td>26,425.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PHILIP THE APOSTLE CHURCH 1897 W MAIN ST LEWISVILLE, TX 75067</td>
<td>75-1453561</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PHILIPS SCHOOL &amp; COMMUNITY CENTER 1600 PENNSYLVANIA AVE DALLAS, TX 75215</td>
<td>75-1097360</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PHILIPS UNITED METHODIST CHURCH 16321 S GREAT OAKS DR ROUND ROCK, TX 78681</td>
<td>74-2309073</td>
<td>501 (C) 3</td>
<td>12,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PHILLIP CATHOLIC CHURCH 825 SW MILL ST DALLAS, OR 97338</td>
<td>93-0511167</td>
<td>501 (C) 3</td>
<td>36,972.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST PIUS X CATHOLIC CHURCH INDIANAPOLIS INC 7200 SARTO DR INDIANAPOLIS, IN 46240</td>
<td>35-0981797</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PIUS X CHURCH 23 CRUMITIE RD ALBANY, NY 12211</td>
<td>14-1387288</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>ST PIUS X HIGH SCHOOL 811 W DONOVAN ST HOUSTON, TX 77091</td>
<td>74-1292008</td>
<td>501 (C) 3</td>
<td>16,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ST RAPHAEL ROMAN CATHOLIC PARISH GLENDALE</td>
<td>36-4643661</td>
<td>501 (C) 3</td>
<td>43,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ST RAYMOND SCHOOL</td>
<td>94-2746063</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>ST REBEKAH COPTIC ORTHODOX CHURCH INC</td>
<td>01-0767063</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4</td>
<td>ST SABINA CHURCH</td>
<td>36-2171123</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>ST SEBASTIAN CATHOLIC CHURCH</td>
<td>59-1967523</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>ST SIMONS LAND TRUST</td>
<td>58-2598986</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>ST STEPHEN LUTHERAN CHURCH</td>
<td>42-0928749</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>ST STEPHEN PROTOMARTY CATHOLIC CHURCH</td>
<td>43-0653569</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>ST STEPHEN S AND ST AGNES SCHOOL FOUNDATION</td>
<td>54-6054009</td>
<td>501 (C) 3</td>
<td>14,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
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<td>56-0769237</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
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<td>74-1109670</td>
<td>501 (C) 3</td>
<td>6,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>ST STEPHENS HUMAN SERVICES INC</td>
<td>01-0639118</td>
<td>501 (C) 3</td>
<td>20,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Schedule I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</tr>
</thead>
<tbody>
<tr>
<td>ST STEPHENS LUTHERAN CHURCH 1575 CHARLTON ST SAINT PAUL, MN 55118 41-0807590 501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>ST TIKHONS ORTHODOX MONASTERY</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?   
   X Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>9601 W SILVER SPRING DR MILWAUKEE, WI 53225</td>
<td>39-0806406</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>ST VINCENT DE PAUL VILLAGE INC</td>
<td>3350 E ST SAN DIEGO, CA 92102</td>
<td>33-0492302</td>
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<td>497,250.</td>
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<td>13031 PALM BEACH BLVD FORT MYERS, FL 33905</td>
<td>59-2824352</td>
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<td>34-0766168</td>
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<td>13-1656625</td>
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<td>13,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Amount of cash grant</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Amount of non-cash assistance</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>61-1704725</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>ST. ALBAN'S EPISCOPAL CHURCH 3001 WISCONSIN AVE NW WASHINGTON, DC 20016</td>
<td>53-0196556</td>
<td>501 (C) 3</td>
<td>39,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ST. ALBAN'S EPISCOPAL CHURCH 5930 WARRIORS TRAIL VICKSBURG, MS 39180</td>
<td>64-0648765</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ST. ALOYSIUS CHURCH- BATON ROUGE LA 2025 STUART AVENUE BATON ROUGE, LA 70808</td>
<td>72-0491439</td>
<td>501 (C) 3</td>
<td>9,800</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5</td>
<td>ST. ALPHONSUS SCHOOL 6000 W LOOMIS RD GREENDALE, WI 53129</td>
<td>39-0850860</td>
<td>501 (C) 3</td>
<td>7,000</td>
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<td>6</td>
<td>ST. AMBROSE CATHOLIC CHURCH 609 EAST MAIN STREET CECILIA, KY 42724</td>
<td>61-0529837</td>
<td>501 (C) 3</td>
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<td>7</td>
<td>ST. ANDREW CATHOLIC CHURCH 3717 STADIUM DR FORT WORTH, TX 76109</td>
<td>75-1303146</td>
<td>501 (C) 3</td>
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<td>8</td>
<td>ST. ANDREW'S EPISCOPAL CHURCH 2015 GLENARM PL DENVER, CO 80205</td>
<td>84-1370535</td>
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<td>9</td>
<td>ST. ANDREW'S EPISCOPAL CHURCH - NEW LONDON, PO BOX 294 NEW LONDON, NH 3257</td>
<td>52-0262375</td>
<td>501 (C) 3</td>
<td>16,000</td>
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<td>ST. ANDREW'S EPISCOPAL CHURCH - SEATTLE, WA BOOKKEEPER 111 NORTHEAST 85TH STREET SEATTL</td>
<td>91-0611527</td>
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<td>11</td>
<td>ST. ANDREW'S UNITED METHODIST CHURCH - SAN 722 ROBINWOOD PLACE SAN ANTONIO, TX 78209</td>
<td>74-1318467</td>
<td>501 (C) 3</td>
<td>225,000</td>
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<td>12</td>
<td>ST. ANDREWS-COVENANT PRESBYTERIAN CHURCH ATTN: BUSINESS ADMINISTRATOR 1416 MARKET ST 56-0538017</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] No  
   - [x] Yes

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>23-1508333</td>
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<td>ST. ANNE CATHOLIC CHURCH</td>
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<td>ST. ANNI'S ROMAN CATHOLIC CHURCH</td>
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<td>FMV</td>
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<td>ST. ANTHONY OF PADUA CATHOLIC CHURCH</td>
<td>76-0545136</td>
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<td>22,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. ANTHONY THE GREAT ANTIQUICHIAN ORTHODOX C</td>
<td>74-3157379</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>ST. AUGUSTIN CHURCH AND SCHOOL</td>
<td>74-0539545</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>ST. AUGUSTINE HIGH SCHOOL</td>
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<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. BARNABAS PRESBYTERIAN CHURCH</td>
<td>75-6215127</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<table>
<thead>
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<th>Part I</th>
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<td>2.</td>
<td>Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.</td>
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<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
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<tbody>
<tr>
<td>1</td>
<td>(a) Name and address of organization or government</td>
</tr>
<tr>
<td>1</td>
<td>ST. BARTHOLOMEW’S EPISCOPAL CHURCH</td>
</tr>
<tr>
<td>2</td>
<td>ST. BASIL THE GREAT PARISH PARISH OFFICE/PARISH LIFE CENTER 2330 KIMBE</td>
</tr>
<tr>
<td>3</td>
<td>ST. BEDE</td>
</tr>
<tr>
<td>4</td>
<td>ST. BENEDICT THE MOOR INSTITUTE</td>
</tr>
<tr>
<td>5</td>
<td>ST. BENEDICT’S PREPARATORY SCHOOL</td>
</tr>
<tr>
<td>6</td>
<td>ST. BONAVENTURE CHURCH</td>
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<tr>
<td>7</td>
<td>ST. BONIFACE CATHOLIC CHURCH</td>
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<td>8</td>
<td>ST. BRENDAN’S CATHOLIC CHURCH</td>
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<td>9</td>
<td>ST. CATHARINE SCHOOL</td>
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<td>ST. CATHERINE OF SIENA/SIENA ACADEMY</td>
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<td>ST. CECILIA ROMAN CATHOLIC CHURCH</td>
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<td>ST. CECILIA CATHOLIC CHURCH</td>
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>ST. CECILIA CATHOLIC COMMUNITY</td>
<td>2900 HOOVER AVE AMES, IA 50010 42-0788215</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>ST. CECILIA S CHURCH - BOSTON, MA</td>
<td>18 BELVIDERE STREET BOSTON, MA 2115 04-2109873</td>
<td>501 (C) 3</td>
<td>77,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ST. CHARLES BORROMEO SEMINARY</td>
<td>222 N 17TH ST PHILADELPHIA, PA 19103 23-1370450</td>
<td>501 (C) 3</td>
<td>22,100.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>ST. CHARLES PREPARATORY SCHOOL</td>
<td>2010 E BROAD ST COLUMBUS, OH 43209 31-4379501</td>
<td>501 (C) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. CHRISTOPHER'S EPISCOPAL CHURCH</td>
<td>625 MAIN ST CHATHAM, WI 53217 04-2425677</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. CHRISTOPHER'S EPISCOPAL CHURCH</td>
<td>7845 NORTH RIVER ROAD RIVER HILLS, MA 2633 39-0932954</td>
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<td>FMV</td>
<td>N/A</td>
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<td>ST. CHRYSOSTOMS EPISCOPAL CHURCH</td>
<td>ST. COLUMBILLE SCHOOL, INC. 25 ARLINGTON ST BRIGHTON, MA 2135 25-5509269</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>ST. DAVID'S EPISCOPAL CHURCH AND SCHOOL</td>
<td>PO BOX 231 ASHBURN, VA 20146 54-1531688</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>ST. DOMINICS MONASTERY</td>
<td>2636 MONASTERY RD. LINDEN, VA 22642 39-0868138</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>ST. EDMUNDS EPISCOPAL CHURCH</td>
<td>2974 HUNTINGTON DR # 200 SAN MARINO, CA 911 95-1816042</td>
<td>501 (C) 3</td>
<td>71,000.</td>
<td>FMV</td>
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<td>11</td>
<td>ST. EDWARD CATHOLIC COMMUNITY</td>
<td>2601 SPRING STUBBNER ROAD SPRING, TX 77389 14-1704442</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<td>ST. EDWARD THE CONFESSOR CATHOLIC CHURCH</td>
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<td>ST. EDWARD THE CONFESSOR CATHOLIC CHURCH</td>
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<td>94-1715279</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. ELIZABETH ANN SETON CHURCH AND SCHOOL</td>
<td>8650 N SHANNON RD TUCSON, AZ 85742</td>
<td>86-0426374</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>ST. ELIZABETH CHURCH</td>
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<td>22-1593535</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
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<td>ST. ELIZABETH EPISCOPAL CHURCH</td>
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<td>22-6001150</td>
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<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. ELIZABETH OF HUNGARY EPISCOPAL CHURCH</td>
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<td>20-3931638</td>
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<td>94-2495928</td>
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<td>FMV</td>
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<td>ST. FRANCES CARRINI CONGREGATION</td>
<td>1025 S 7TH AVE WEST BEND, WI 53095</td>
<td>39-0927292</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>ST. FRANCIS CHURCH - FRIDAY HARBOR, WA</td>
<td>PO BOX 1489 FRIDAY HARBOR, WA 98250</td>
<td>91-1399100</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. FRANCIS DE SALES ROMAN CATHOLIC CHURCH</td>
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<td>38-1437931</td>
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<td>ST. FRANCIS EPISCOPAL CHURCH</td>
<td>503 OLD LONG RIDGE ROAD STAMFORD, CT 6903</td>
<td>06-6011658</td>
<td>501 (C) 3</td>
<td>9,750.</td>
<td>FMV</td>
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<td>ST. FRANCIS OF ASSISI</td>
<td>11401 LEESVILLE RD RALEIGH, NC 27613</td>
<td>56-1342530</td>
<td>501 (C) 3</td>
<td>12,200.</td>
<td>FMV</td>
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<tbody>
<tr>
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<td>1023 6TH AVE WALKERTON, VA 23177</td>
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<td>56-0685184</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>ST. GABRIEL’S CHURCH - PHILADELPHIA, PA</td>
<td>2917 DICKINSON STREET PHILADELPHIA, PA 1914</td>
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<td>FMV</td>
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<td>ST. GEORGE ANTIOCHIAN ORTHODOX CHRISTIAN CH</td>
<td>3650 COTTAGE GROVE AVE. SE CEDAR RAPIDS, IA</td>
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<td>ST. GEORGE CATHOLIC CHURCH</td>
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<td>ST. GEORGE GREEK ORTHODOX CHURCH</td>
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<td>ST. GEORGE’S EPISCOPAL CHURCH</td>
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<td>ST. GERALD CHURCH AND SCHOOL</td>
<td>7859 LAKEVIEW ST OHLENA, NE 68127</td>
<td>47-0446840</td>
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<td>ST. HELEN’S CHURCH, WESFIELD</td>
<td>1600 RAWHAY AVE WESTFIELD, NJ 7090</td>
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<td>ST. HUGH CATHOLIC CHURCH</td>
<td>3460 ROYAL ROAD COCONUT GROVE, FL 33133</td>
<td>59-0917275</td>
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<td>ST. IGNATIUS LOTHRA CHURCH &amp; SCHOOL</td>
<td>2810 SAINT ALBANS DR READING, PA 19608</td>
<td>23-1684880</td>
<td>501 (C) 3</td>
<td>220,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA

OE5288 1.000

18674H 1467  V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>ST. JAMES ROMAN CATHOLIC CHURCH - ERIE, PA</td>
<td>2635 BUFFALO ROAD ERIE, PA 16510-1498</td>
<td>25-1067298 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>ST. JAMES THE LESS EPISCOPAL CHURCH</td>
<td>411 W. DUE WEST AVE. MADISON, TN 37115</td>
<td>62-0941072 501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ST. JAMES'S EPISCOPAL CHURCH</td>
<td>1018 FARMINGTON AVE WEST HARTFORD, VA 23220</td>
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<td>5,200.</td>
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<td>FMV</td>
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<td>5</td>
<td>ST. JEAN BAPTISTE CHURCH</td>
<td>184 E 76TH STREET NEW YORK, NY 10021</td>
<td>13-1623836 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>ST. JEROME CHURCH</td>
<td>380 ROSELawn AVE E SAINT PAUL, MN 55117</td>
<td>41-0773779 501 (C) 3</td>
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<td>7</td>
<td>ST. JOACHIM CHURCH</td>
<td>PO BOX 232 LOCKEFORD, CA 95237</td>
<td>43-1989195 501 (C) 3</td>
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<td>8</td>
<td>ST. JOAN OF ARC CATHOLIC COMMUNITY</td>
<td>4537 3RD AVE S MINNEAPOLIS, MN 55419</td>
<td>41-0757850 501 (C) 3</td>
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<td>FMV</td>
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<td>9</td>
<td>ST. JOHN EVANGELICAL LUTHERAN CHURCH</td>
<td>6004 WATERLOO ROAD COLUMBIA, MD 21045</td>
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<td>ST. JOHN NEUMANN</td>
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<td>41-1311105 501 (C) 3</td>
<td>24,300.</td>
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<td>36-2939579 501 (C) 3</td>
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<td>7301 OLD MADISON PIKE NW HUNTSVILLE, AL 358</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

### Part II

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<td>04-2109875</td>
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<td>6,100.</td>
<td>FMV</td>
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<td>4</td>
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<td>5</td>
<td>ST. JOHN'S CHURCH 1525 N STREET NORTHWEST WASHINGTON, DC 2000</td>
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<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
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<th>Amount of non-cash assistance</th>
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</tr>
</thead>
<tbody>
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<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>5. ST. MARY AND ST. MARK CHURCH</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>12. ST. MARY’S CATHOLIC SCHOOL</td>
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<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<th>IRC section (if applicable)</th>
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<th>Description of noncash assistance</th>
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<tr>
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<td>(3) ST. MARY'S EPISCOPAL CHURCH</td>
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<td>(4) ST. MARY'S EPISCOPAL CHURCH</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) ST. MARY'S HIGH SCHOOL</td>
<td>441-989150</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(6) ST. MARY'S ON THE HIGHLANDS EPISCOPAL CHURCH</td>
<td>63-0302166</td>
<td>501 (C) 3</td>
<td>120,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ST. MARY'S PARISH</td>
<td>330 PRATT STREET MANSFIELD, MA 2048</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>(8) ST. MATHEW'S EPISCOPAL CHURCH</td>
<td>04-0714785</td>
<td>501 (C) 3</td>
<td>11,900.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(9) ST. MATTHEW EPISCOPAL CHURCH</td>
<td>91-0434631</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10) ST. MATTHEW THE APOSTLE CHURCH &amp; SCHOOL</td>
<td>31-0672558</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ST. MATTHEW THE APOSTLE PARISH</td>
<td>22-2955496</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) ST. MATTHEW THE EVANGELIST ANIOCH</td>
<td>34-1687079</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST. MATTHEW'S EPISCOPAL CHURCH</td>
<td>5240 TALMADGE RD TOLEDO, OH 43623</td>
<td>34-4437618</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. MATTHIAS CONGREGATION</td>
<td>9300 W BELOIT RD MILWAUKEE, WI 53227</td>
<td>39-0808528</td>
<td>501 (C) 3</td>
<td>8,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. MICHAEL CATHOLIC CHURCH</td>
<td>4491 SPRINGFIELD RD GLEN ALLEN, VA 23060</td>
<td>54-1624632</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. MICHAEL'S ANTIQUION ORTHODOX CHURCH</td>
<td>3701 SAINT MICHAEL CHURCH DR LOUISVILLE, KY</td>
<td>61-0605104</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. MICHAEL'S CATHEDRAL, INC. - BOISE, ID</td>
<td>518 NORTH 8TH STREET BOISE, ID 83702</td>
<td>82-0202462</td>
<td>501 (C) 3</td>
<td>8,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. MICHAEL'S EPISCOPAL CHURCH-MA</td>
<td>112 RANDOLPH AVENUE MILTON, MA 2186</td>
<td>04-2104897</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. MICHAEL'S THE ARCHANGEL CHURCH</td>
<td>100 OAK DRIVE SOUTH LAKE JACKSON, TX 77566</td>
<td>74-1539816</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>ST. MONICA PARISH - WHITEFISH BAY, WI</td>
<td>5681 NORTH SANTA MONICA BOULEVARD WHITEFISH</td>
<td>39-0807255</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. NIKITARIOIO GREEK ORTHODOX CHURCH</td>
<td>5108 KUVENDALL ROAD CHARLOTTE, NC 28270</td>
<td>56-2088915</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. NORBERT CATHOLIC SCHOOL</td>
<td>50 LEOPARD RD PAOLI, PA 19301</td>
<td>23-1504149</td>
<td>501 (C) 3</td>
<td>53,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. PATRICK CHURCH - PALM BEACH GARDENS, FL</td>
<td>13591 PROSPERITY FARMS ROAD PALM BEACH GARD</td>
<td>65-0012565</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ST. PATRICK'S CATHEDRAL</td>
<td>PARISH HOUSE 14 E. 51ST STREET NEW YORK, NY</td>
<td>13-1624175</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..........................  
   - Yes ☑
   - No __

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>ST. PATRICK-ST. STANISLAUS PARISH 57 21ST STREET PITTSBURGH, PA 15222 20-1546792 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>ST. PAUL CATHOLIC CHURCH 147 NORTH STREET HINGHAM, MA 2043 04-2149338 501 (C) 3 23,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL COMMUNITY UNITED METHODIST CHURCH 8221 MIAMI ROAD MADEIRA, OH 45243 31-0622295 501 (C) 3 28,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL EVANGELICAL LUTHERAN CHURCH 181 S. SANTA CLARA NEW BRAUNFELS, TX 78130 74-1400707 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL LUTHERAN CHURCH - OLD SAYBROOK, CT 56 GREAT HAMMOCK ROAD OLD SAYBROOK, CT 6475 22-2514314 501 (C) 3 8,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL PARISH - CAMBRIDGE, MA 29 MOUNT AUBURN STREET CAMBRIDGE, MA 2138 04-2106357 501 (C) 3 20,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL PARISH AND SCHOOL 1425 E SHELBY DR MEMPHIS, TN 38116 62-0528603 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL ROMAN CATHOLIC CHURCH 2007 NEW HOPE STREET EAST NORRITON, PA 1940 23-1628558 501 (C) 3 13,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL THE APOSTLE CHURCH 2715 HORSE PEN CREEK RD. GREENSBORO, NC 274 56-1086264 501 (C) 3 11,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL-REFORMATION LUTHERAN CHURCH 100 NORTH OXFORD STREET ST. PAUL, MN 55104 41-1288100 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL'S CHURCH IN NANTUCKET 20 FAIR ST NANTUCKET, MA 2554 04-2581206 501 (C) 3 14,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL'S CHURCH KENT ATTENTION: TREASURER 7579 SANDY BOTTOM ROAD 52-0633411 501 (C) 3 15,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

---

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>ST. PAULS EPISCOPAL CHURCH 200 RIVERSDALE AVE, CT 6878 06-0646855 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL'S EPISCOPAL CHURCH P.O. BOX 637 KINDERHOOK, NY 12106 14-6020641 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>ST. PAUL'S EPISCOPAL CHURCH 16 NORTH 16TH STREET WILMINGTON, NC 28401 56-0694197 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>ST. PAUL'S EPISCOPAL CHURCH 319 SOUTH 5TH STREET GRAND FORKS, ND 58020 45-0258435 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>ST. PAUL'S EPISCOPAL CHURCH 228 S PITT ST ALEXANDRIA, VA 22314 54-0506483 501 (C) 3 13,700. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL'S EPISCOPAL CHURCH - FAIRFIELD, CT 661 OLD POST ROAD FAIRFIELD, CT 6824 06-0655484 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>ST. PAUL'S NEWMAN CENTER PARISH 1800 E GRAND AVE LARAMIE, WY 82070 83-0198764 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PAUL'S UNITED CHURCH OF CHRIST 2335 N ORCHARD ST CHICAGO, IL 60614 36-2179808 501 (C) 3 5,025. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>ST. PETER CATHOLIC CHURCH 12762 LEE HIGHWAY WASHINGTON, VA 22747 27-2125203 501 (C) 3 9,700. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>ST. PETER IN CHAINS CHURCH - HAMILTON, OH 382 LIBERTY AVENUE HAMILTON, OH 45013 31-0537055 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>ST. PETER OF ALCANTARA RC CHURCH 1127 PORT WASHINGTON BLVD PORT WASHINGTON, 11-1802822 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>ST. PETER PARISH 6161 CHAMBERSBURG RD DAYTON, OH 45424 31-0366310 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ST. PETER THE APOSTLE CATHOLIC CHURCH - LAK</td>
<td>31 EBOY ROAD EBONY, VA 23845</td>
<td>04-3746458</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) ST. PETER THE APOSTLE CHURCH - PARSIPPANY,</td>
<td>179 BALDWIN ROAD PARSIPPANY, NJ 7054</td>
<td>22-1533502</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) ST. PETER'S PARISH AND SCHOOL</td>
<td>104 W 1ST ST MANSFIELD, OH 44902</td>
<td>34-0792942</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) ST. PETER'S CHURCH</td>
<td>33 THROCKMORTON ST FREEHOLD, NJ 7728</td>
<td>22-6054075</td>
<td>501 (c) 3</td>
<td>5,810.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) ST. PETRONILLE CHURCH AND SCHOOL</td>
<td>420 GLENWOOD AVE GLEN ELIN, IL 60137</td>
<td>36-2171112</td>
<td>501 (c) 3</td>
<td>20,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) ST. PHILIP LUTHERAN CHURCH</td>
<td>6180 HIGHWAY 65 NE MINNEAPOLIS, MN 55432</td>
<td>41-6008895</td>
<td>501 (c) 3</td>
<td>20,528.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) ST. PHILIP THE APOSTLE CATHOLIC CHURCH</td>
<td>PO BOX 2363 HUFFMAN, TX 77336</td>
<td>74-1945185</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) ST. PHILIP THE DEACON LUTHERAN CHURCH</td>
<td>17205 COUNTY ROAD 6 MINNEAPOLIS, MN 55447</td>
<td>23-7248186</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) ST. PIUS X CHURCH</td>
<td>3663 66TH ST URBANDALE, IA 50322</td>
<td>42-0847219</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<tr>
<td>(10) ST. PIUS X CHURCH - LOMBARO, IL</td>
<td>1025 EAST MADISON STREET LOMBARO, IL 60148</td>
<td>36-2312496</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) ST. RITA CATHOLIC CHURCH</td>
<td>22 SAINT RITA LANE SANTA ROSA BEACH, FL 324</td>
<td>59-2357954</td>
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<td>24,500.</td>
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<tr>
<td>(12) ST. ROBERT BELLARMINI CATHOLIC CHURCH</td>
<td>11802 PACIFIC ST OMAHA, NE 68154</td>
<td>47-0496920</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>ST. ROSE OF LIMA SCHOOL - PHILADELPHIA, PA</td>
<td>1522 NORTH WANNAMAKER STREET PHILADELPHIA, PA</td>
<td>23-1365299</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<tr>
<td>ST. SHARBEL MARONITE CATHOLIC MISSION</td>
<td>10325 RANCHO DESTINO RD. LAS VEGAS, NV 89118</td>
<td>75-3117317</td>
<td>501 (C) 3</td>
<td>5,100.</td>
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<td>ST. SIMON'S EPISCOPAL CHURCH</td>
<td>717 WEST KIRCHHOFF ROAD ARLINGTON HEIGHTS, MD</td>
<td>36-3305638</td>
<td>501 (C) 3</td>
<td>55,998.</td>
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<td>ST. STANISLAUS CHURCH</td>
<td>PARISH OFFICE 566 FRONT STREET CHICOPEE, MA</td>
<td>04-2111408</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>ST. STANISLAUS SCHOOL</td>
<td>534 FRONT ST CHICOPEE, MA 1013</td>
<td>45-2463232</td>
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<td>10,000.</td>
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<td>ST. STEPHENS EPISCOPAL CHURCH</td>
<td>PO BOX 97 BELVEDERE, CA 94920</td>
<td>94-6080820</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>ST. STEPHEN'S PARISH</td>
<td>525 JACKSON ST ANOKA, MN 55303</td>
<td>41-0713661</td>
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<td>ST. STEPHEN'S PROTESTANT EPISCOPAL CHURCH</td>
<td>6000 GROVE AVE RICHMOND, VA 23226</td>
<td>54-0506339</td>
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<td>10,000.</td>
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<td>ST. TERESA OF AVILA</td>
<td>306 MORRIS AVE SUMMIT, NJ 7901</td>
<td>22-1500640</td>
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<td>6,890.</td>
<td>FMV</td>
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<td>ST. THERESE CATHOLIC CHURCH</td>
<td>217 BRAWLEY SCHOOL ROAD MOORESVILLE, NC 281</td>
<td>56-1225567</td>
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<td>11,200.</td>
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<td>ST. THERESE PARISH</td>
<td>7207 NORTHWEST HIGHWAY 9 KANSAS CITY, MO 64</td>
<td>44-0660198</td>
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<td>9,890.</td>
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<tr>
<td>ST. THOMAS AQUINAS CATHOLIC CHURCH</td>
<td>210 SOUTH WESLEY STREET INDIANOLA, IA 50125</td>
<td>42-1154814</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1)</td>
<td>ST. THOMAS EPISCOPAL CHURCH</td>
<td>02-0268010</td>
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<td>(2)</td>
<td>ST. THOMAS EPISCOPAL CHURCH - ABINGDON, VA</td>
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<td>74-1470876</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
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<td>(5)</td>
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<td>(6)</td>
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<td>(7)</td>
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<td>23-1353548</td>
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<td>(8)</td>
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<td>36-3314260</td>
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<td>23-1367769</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>1</td>
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<td>ST. TIMOTHY'S EPISCOPAL CHURCH</td>
<td>59-1028326</td>
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<td>ST. TIMOTHY'S EPISCOPAL CHURCH</td>
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<td>ST. TIMOTHY'S EPISCOPAL CHURCH</td>
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<td>10</td>
<td>STAFFORD JUNCTION INC</td>
<td>20-3036072</td>
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<td>11</td>
<td>STAGE LEFT PRODUCTIONS INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipent that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>STAIR OF BIRMINGHAM 3703 5TH AVE S STE 400 BIRMINGHAM, AL 35222</td>
<td>20-3541638</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
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<td>2</td>
<td>STAMFORD HOSPITAL HEALTH FOUNDATION INC 1 HOSPITAL PLZ STAMFORD, CT 6902</td>
<td>22-2478748</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>STAMFORD JEWISH CENTER INCORPORATED 1035 NEWFIELD AVE STAMFORD, CT 6903</td>
<td>06-0646918</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>STAMFORD SYMPHONY ORCHESTRA, INC. 263 TRESSER BLVD STAMFORD, CT 6901</td>
<td>06-6100039</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>STAND FOR CHILDREN LEADERSHIP CENTER 2121 SW BROADWAY STE 111 PORTLAND, OR 97201</td>
<td>52-1957214</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>STAND TO REASON 1438 E 33RD ST SIGNAL HILL, CA 90755</td>
<td>33-0604522</td>
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<td>24,000.</td>
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<td>N/A</td>
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<td>7</td>
<td>STAND TOGETHER FOUNDATION 1320 N COURTHOUSE RD STE 22 ARLINGTON, VA 2</td>
<td>27-3197768</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>STANFORD HEALTH CARE 227 300 PASTEUR DR STANFORD, CA 94305</td>
<td>94-6174066</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
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<td>9</td>
<td>STANFORD JAZZ WORKSHOP PO BOX 20454 PALO ALTO, CA 94309</td>
<td>94-3074721</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>STANFORD JEWISH CENTER INC 1289 COLLEGE AVE PALO ALTO, CA 94306</td>
<td>73-1655874</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>STANISLAUS COMMUNITY FOUNDATION 100 SYCAMORE AVE STE 200 MODESTO, CA 95354</td>
<td>68-0483054</td>
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<td>12</td>
<td>STANKOOD CAMANO FOOD BANK SERVICES PO BOX 1285 STANKOOD, WA 98292</td>
<td>91-1155426</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ......................................................... ►

Enter total number of other organizations listed in the line 1 table: ........................................................................................................... ►

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

Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>STAR C CORPORATION 1335 CANTON RD STE D MARIETTA, GA 30066</td>
<td>47-1218629</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>STAR OF HOPE MISSION 4848 LOOP CENTRAL DR HOUSTON, TX 77081</td>
<td>74-1152599</td>
<td>501 (C) 3</td>
<td>206,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>STAR OF THE SEA FOUNDATION INC 1540 MALONEY AVE KEY WEST, FL 33040</td>
<td>30-0496670</td>
<td>501 (C) 3</td>
<td>20,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4</td>
<td>STARABILITY FOUNDATION INC 5125 CASTELLO DR NAPLES, FL 34103</td>
<td>59-2516162</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5</td>
<td>STARFISH ASSIGNMENT 2783 MARTIN RD DUBLIN, OH 43017</td>
<td>83-2584231</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>STARFYSH 6757 CASCADE RD SE # 207 GRAND RAPIDS, MI 4</td>
<td>27-1976856</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7</td>
<td>STARLIGHT MISSIONARY BAPTIST CHURCH 2410 GONZA ST EAST PALO ALTO, CA 94303</td>
<td>94-3082027</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>8</td>
<td>STARLIGHT THERAPEUTIC RIDING CENTER INC 6 DESTA DR STE 3000 MIDLAND, TX 79705</td>
<td>84-1749519</td>
<td>501 (C) 3</td>
<td>165,000.</td>
<td>FMV</td>
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<td>9</td>
<td>STARLINGS VOLLEYBALL CLUBS USA 5857 OWENS AVE STE 300 CARLSBAD, CA 92008</td>
<td>33-0749769</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>STARS FOR STARS 3746 GREENWAY LN OWINGS MILLS, MD 21117</td>
<td>46-3441836</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>11</td>
<td>START EARLY 33 W MONROE ST STE 1200 CHICAGO, IL 60603</td>
<td>36-3186328</td>
<td>501 (C) 3</td>
<td>16,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12</td>
<td>STARTUP SANDBOX 250 NATURAL BRIDGES DR SANTA CRUZ, CA 95060</td>
<td>82-1427488</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(OMB No. 1545-0047)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>8 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>STATE COLLEGE CHRISTIAN AND MISSIONARY ALLI</td>
<td>121 W WHITEHALL RD STATE COLLEGE, PA 16801</td>
<td>501 (C) 3</td>
<td>21,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>STATE LEADERSHIP PROJECT</td>
<td>PO BOX 223 RALEIGH, NC 27602</td>
<td>501 (C) 3</td>
<td>175,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>STATE POLICY NETWORK</td>
<td>1655 FORT MYER DR STE 360 ARLINGTON, VA 222</td>
<td>501 (C) 3</td>
<td>105,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>STATE UNIVERSITY OF IOWA FOUNDATION</td>
<td>1 W PARK RD IOWA CITY, IA 52242</td>
<td>501 (C) 3</td>
<td>176,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>STATE VOICES</td>
<td>1616 E 44TH ST STE 220 WASHINGTON, DC 20036</td>
<td>501 (C) 3</td>
<td>100,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>STAY-FOCUSED INC</td>
<td>245 E 44TH ST APT 22B NEW YORK, NY 10017</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>STAYING PUT IN NEW CANAAN INC</td>
<td>PO BOX 484 NEW CANAAN, CT 6840</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>STDAVIDS RADNOR CHURCH</td>
<td>763 VALLEY FORGE RD WAYNE, PA 19087</td>
<td>501 (C) 3</td>
<td>227,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>STE GENEVIEVE DU BOIS CATHOLIC CHURCH WARSO</td>
<td>1575 N WOODLAWN AVE SAINT LOUIS, MO 63122</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>STEAM CODERS</td>
<td>PO BOX 90213 PASADENA, CA 91109</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>STEAMBOAT INSTITUTE</td>
<td>PO BOX 883037 STEAMBOAT SPRINGS, CO 80488</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>STEELE MEMORIAL BENEFIT ASSOCIATION</td>
<td>203 S DAISY ST SALMON, ID 83467</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| STEELVILLE ARTS COUNCIL  
PO BOX 1458 STEELVILLE, MO 65565  
27-2995330  
501 (c) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEEP ROCK ASSOCIATION INC  
PO BOX 279 WASHINGTON DEPOT, CT 6794  
06-6069060  
501 (c) 3  
13,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STELAE INC  
21644 COUNTY ROAD 44A EUSTIS, FL 32736  
85-3576258  
501 (c) 3  
13,774.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STELOS ALLIANCE  
2101 MONTOPOLIS DR UNIT 1 AUSTIN, TX 78741  
26-3049375  
501 (c) 3  
100,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEM ALLIANCE OF LARCHMONT-MAMARONECK INC  
PO BOX 528 LARCHMONT, NY 10538  
46-0973552  
501 (c) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEM PREPARATORY ACADEMY  
1162 FOSTER AVE NASHVILLE, TN 37210  
27-2163445  
501 (c) 3  
26,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEP DENVER  
2029 LARIMER ST DENVER, CO 80205  
74-2345786  
501 (c) 3  
7,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEP UP FOR STUDENTS INC  
4655 SALISBURY RD JACKSONVILLE, FL 32256  
59-3649371  
501 (c) 3  
34,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEP UP MINISTRY  
1701 OBERLIN RD RALEIGH, NC 27608  
56-1655255  
501 (c) 3  
16,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEP UP ON SECOND STREET INC  
1460 4TH ST STE 200 SANTA MONICA, CA 90401  
95-4109386  
501 (c) 3  
13,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEPHEN CENTER INC  
2723 Q ST OMAHA, NE 68104  
36-3363994  
501 (c) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| STEPHEN GAYNOR SCHOOL  
148 W 90TH ST NEW YORK, NY 10024  
13-1969570  
501 (c) 3  
56,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

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### SCHEDULE I

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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► Attach to Form 990.

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   - **Yes**
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tbody>
<tr>
<td>STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>618,728.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2361 HYLAN BLVD STATEN ISLAND, NY 10306</td>
<td>02-0554654</td>
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<td>STEPHEN WISE FREE SYNAGOGUE</td>
<td>13-1628215</td>
<td>501 (C) 3</td>
<td>29,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>30 W 68TH STroit 401 NEW YORK, NY 10023</td>
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<td>STEPHENS CITY UNITED METHODIST CHURCH</td>
<td>54-1191253</td>
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<td>14,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 428 STEPHENS CITY, VA 22655</td>
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<td>STEPHENS COLLEGE</td>
<td>43-0670936</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1200 E BROADWAY COLUMBIA, MO 65215</td>
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<tr>
<td>STEPINAC HIGH SCHOOL FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>950 Mamaroneck Ave WHITE PLAINS, NY 10605</td>
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<td>STEP-ONE</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>313 E 23RD ST HOUSTON, TX 77008</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>STEPPENWOLF THEATER CO</td>
<td>51-0149370</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1700 N HALSTED ST CHICAGO, IL 60614</td>
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<td></td>
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<tr>
<td>STEPPING STONES MUSEUM FOR CHILDREN INC</td>
<td>22-3199269</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>303 WEST AVE NORWALK, CT 6850</td>
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<td>STEPPINGSTONE FOUNDATION INC</td>
<td>04-3086666</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1 APPLETON ST FL 4 BOSTON, MA 2116</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>STEPS TO SUCCESS INC</td>
<td>47-1641693</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 CLARK RD BROOKLINE, MA 2445</td>
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<td></td>
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<tr>
<td>STERLING &amp; FRANCINE CLARK ART INST</td>
<td>04-2163004</td>
<td>501 (C) 3</td>
<td>128,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>225 SOUTH ST WILLIAMSTOWN, VA 1267</td>
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<td>STERLING PARK BAPTIST CHURCH</td>
<td>51-0184006</td>
<td>501 (C) 3</td>
<td>40,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>501 N YORK RD STERLING, VA 20164</td>
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<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>STILLWATER CHRISTIAN CHURCH</td>
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<td>STILLWATER FOUNDATION</td>
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<td>STJOHN OF THE CROSS CHURCH</td>
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</table>
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
  3 Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>N/A</td>
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<tr>
<td>STONEGATE FELLOWSHIP A SOUTHERN BAPTIST CHU</td>
<td>75-2885753</td>
<td>501 (C) 3</td>
<td>12,000</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

3. Enter total number of other organizations listed in the line 1 table: .................................................................

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

Schedule I (Form 990) 2020
# SCHEDULE I
## (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Attach to Form 990.**

**Open to Public Inspection**

**Department of the Treasury**
**Internal Revenue Service**

---

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   ![Yes][Yes]  

   ![No][No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>2</td>
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</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

---

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

   - Yes [x]  
   - No  

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | |</p>
<table>
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<td>(3) STRAIGHT TALK</td>
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<td>(6) STRATFORD SHAKESPEAREAN FESTIVAL OF AMERICA</td>
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<td>(7) STRAWBERRY BANKE MUSEUM</td>
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<td>(9) STREAMS OF HOPE</td>
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<td>FMV</td>
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<td>(10) STREATORLAND HISTORICAL SOCIETY INC</td>
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</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1)</td>
<td>STREET YOUTH MINISTRIES</td>
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<td>91-1699297</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<tr>
<td>(2)</td>
<td>STREETSQUASH INC</td>
<td>40 W 116TH ST NEW YORK, NY 10026</td>
<td>13-4061809</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>STRINGS MUSIC FESTIVAL</td>
<td>PO BOX 714627 STEAMBOAT SPRINGS, CO 80477</td>
<td>84-1101995</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>STRIPPING FOR A CURE</td>
<td>PO BOX 11034 JACKSON, WY 83002</td>
<td>81-4844716</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>STRIVE COLLEGIATE ACADEMY INC</td>
<td>3055 LEBANON PIKE NASHVILLE, TN 37214</td>
<td>46-4782840</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>STRIVE INTERNATIONAL INC</td>
<td>205 E 122ND ST FL 3 NEW YORK, NY 10035</td>
<td>13-3255679</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>STRONG CITY BALTIMORE</td>
<td>2101 E BIDDLE ST BALTIMORE, MD 21213</td>
<td>52-0897806</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>STRONGMINDS INC</td>
<td>515 VALLEY ST STE 6 MAPLEWOOD, NJ 7040</td>
<td>46-2090059</td>
<td>501 (C) 3</td>
<td>275,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>STS JOACHIM AND ANN CATHOLIC CHURCH ST CHAR</td>
<td>4112 MCCLAD RD SAINT CHARLES, MO 63304</td>
<td>43-1253468</td>
<td>501 (C) 3</td>
<td>20,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>STS. SIMON &amp; JUDE CATHOLIC CHURCH</td>
<td>26777 GLEN LOCH DR SPRING, TX 77381</td>
<td>74-2063404</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>STUART COUNTY DAY SCHOOL OF THE SACRED HEAR</td>
<td>1200 STUART RD PRINCETON, NJ 8540</td>
<td>21-0744683</td>
<td>501 (C) 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(12)</td>
<td>STUART HALL SCHOOL FOUNDATION</td>
<td>233 W FREDERICK ST STAUNTON, VA 24401</td>
<td>84-1648803</td>
<td>501 (C) 3</td>
<td>285,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table ..............................................................................................................
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. 

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>STUDENT ACHIEVEMENT PARTNERS INC 228 PARK AVE S # 96810 NEW YORK, NY 10003 27-4556045 501 (C) 3 3,000,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT ADVOCACY INC 3 W MAIN ST STE 212 ELMSFORD, NY 10523 13-3104476 501 (C) 3 28,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT CONSERVATION ASSOCIATION INC 4601 FAIRFAX DR STE 900 ARLINGTON, VA 22203 91-0880684 501 (C) 3 117,400. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT FREE PRESS ASSOCIATION 4771 MECHANIC RD HILLSDALE, MI 49242 27-2277658 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT HEALTH SVCS SUPPORT FUND 333 S BEAUDRY AVE LOS ANGELES, CA 90017 95-4262448 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT LEADERSHIP NETWORK INC 322 8TH AVE NEW YORK, NY 10001 06-1517218 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT MOBILIZATION INC PO BOX 567 CONWAY, AR 72033 71-0629392 501 (C) 3 16,800. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>STUDENT PARTNER ALLIANCE A NEW JERSEY NON-P 561 SPRINGFIELD AVE SUMMIT, NJ 7901 52-1840944 501 (C) 3 14,250. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
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<tr>
<td>1</td>
<td>STUDENT-LED SUSTAINABLE INITIATIVES INC</td>
<td>46-3019082</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>2</td>
<td>STUDENTS FOR A FREE TIBET INC</td>
<td>13-4008917</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>3</td>
<td>STUDENTS FOR LIBERTY INCORPORATED</td>
<td>94-3435899</td>
<td>501 (C) 3</td>
<td>1,377,500.</td>
<td>FMV</td>
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<td>4</td>
<td>STUDENTS FOR LIFE OF AMERICA INC</td>
<td>52-1576352</td>
<td>501 (C) 3</td>
<td>82,000.</td>
<td>FMV</td>
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<td>5</td>
<td>STUDENTS FOR SENSIBLE DRUG POLICY FOUNDATION</td>
<td>52-2296291</td>
<td>501 (C) 3</td>
<td>82,000.</td>
<td>FMV</td>
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<tr>
<td>6</td>
<td>STUDENTS HELPING HONDURAS INC</td>
<td>41-2191361</td>
<td>501 (C) 3</td>
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<td>7</td>
<td>STUDIO ACTING CONSERVATORY INC</td>
<td>83-2635517</td>
<td>501 (C) 3</td>
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<td>8</td>
<td>STUDIO CREATIVELAY</td>
<td>16-1673910</td>
<td>501 (C) 3</td>
<td>200,000.</td>
<td>FMV</td>
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<td>9</td>
<td>STUDIO IX</td>
<td>85-2266407</td>
<td>501 (C) 3</td>
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<td>10</td>
<td>STUF UNITED FUND INC</td>
<td>32-0203388</td>
<td>501 (C) 3</td>
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<td>11</td>
<td>STURGIS CUMBERLAND PRESBYTERIAN CHURCH</td>
<td>61-0940180</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
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<td>12</td>
<td>STUTTERING ASSOCIATION FOR THE YOUNG INC</td>
<td>33-1049070</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: ...........................................

Enter total number of other organizations listed in the line 1 table: ...........................................

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td><strong>8</strong></td>
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<tr>
<td>SUBURBAN TEMPLE ? KOL AMI</td>
<td>22401 CHAGrin BLVD BEACHWOOD, OH 44122</td>
<td>34-0760596</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<td>SUCCESS ACADEMY CHARTER SCHOOLS INC</td>
<td>95 PINE ST 6TH FLOOR NEW YORK, NY 10005</td>
<td>20-5298861</td>
<td>501 (C) 3</td>
<td>418,500</td>
<td>FMV</td>
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<td>SUDAN RELIEF FUND INC</td>
<td>PO BOX 7084 MERRIFIELD, VA 22116</td>
<td>52-2148976</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<td>SUDBURY COMMUNITY FOOD PANTRY</td>
<td>PO BOX 751 SUDBURY, MA 1776</td>
<td>04-3237546</td>
<td>501 (C) 3</td>
<td>7,000</td>
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<td>N/A</td>
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<td>SUDBURY VALLEY TRUSTEES INC</td>
<td>18 WOLBACH RD SUDBURY, MA 1776</td>
<td>04-6049963</td>
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<td>47,000</td>
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<tr>
<td>SUE BALDWIN FUND INC</td>
<td>3250 WOODED LN BAILEYS HARBOR, WI 54202</td>
<td>46-2425010</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>SUFFIELD ACADEMY</td>
<td>PO BOX 999 SUFFIELD, CT 6078</td>
<td>06-0678539</td>
<td>501 (C) 3</td>
<td>135,000</td>
<td>FMV</td>
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<td>SUFFOLK UNIVERSITY</td>
<td>8 ASHBURTON PL BOSTON, MA 2108</td>
<td>04-2133255</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<tr>
<td>SUGAR GROVE CHURCH INC</td>
<td>58512 OLD COUNTY ROAD 17 GOSHEN, IN 46528</td>
<td>35-6029760</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<tr>
<td>SUGAR HILL CHILDREN'S MUSEUM OF ART AND STOR</td>
<td>898 ST NICHOLAS AVENUE 155TH ST NEW YORK, N</td>
<td>46-5412811</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<td>SUGAR LAND BAPTIST CHURCH</td>
<td>16755 SOUTHWEST FREEWAY SUGAR LAND, TX 7747</td>
<td>76-0117791</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
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<td>SUICIDE PREVENTION COALITION OF EAGLE VALLE</td>
<td>PO BOX 5913 EAGLE, CO 81631</td>
<td>90-0996653</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIEPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SULTANA EDUCATION FOUNDATION INC</td>
<td>200 S CROSS ST CHESTERTOWN, MD 21620</td>
<td>52-2021091</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMER CAMP INC</td>
<td>8 CHURCH ST BRIDGETON, ME 4009</td>
<td>13-3341224</td>
<td>501 (C) 3</td>
<td>142,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SUMMER ON THE CUYAHOGA</td>
<td>PO BOX 110662 CLEVELAND, OH 44111</td>
<td>20-1749176</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMER SCIENCE PROGRAM INC</td>
<td>108 WHITEBERRY DR CARY, NC 27519</td>
<td>94-3341965</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMER SEARCH</td>
<td>304 12TH ST STE 4A OAKLAND, CA 94607</td>
<td>68-0200138</td>
<td>501 (C) 3</td>
<td>1,598,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SUMMIT ACADEMY OIC</td>
<td>935 OLSON MEMORIAL HWY MINNEAPOLIS, MN 5540</td>
<td>41-0908458</td>
<td>501 (C) 3</td>
<td>130,750.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMIT AREA YMCA</td>
<td>99 MORRIS AVE SUMMIT, NJ 7901</td>
<td>22-1487392</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMIT CHURCH-HOMESTEAD HEIGHTS BAPTIST CHU</td>
<td>1335 PRESIDENTIAL DR STE 114 DURHAM, NC 277</td>
<td>83-0398389</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMIT COMMUNITY CARE CLINIC INC</td>
<td>PO BOX 4337 FRISCO, CO 80443</td>
<td>20-1139635</td>
<td>501 (C) 3</td>
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<td>SUMMIT COUNTY FAMILY RESOURCE CENTER</td>
<td>PO BOX 1636 SILVERTHORNE, CO 80498</td>
<td>84-1252900</td>
<td>501 (C) 3</td>
<td>127,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUMMIT HEALTH INSTITUTE FOR RESEARCH AND ED</td>
<td>1629 K ST NW STE 300 WASHINGTON, DC 20006</td>
<td>52-1936403</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>SUMMIT LAND CONSERVANCY</td>
<td>1665 BONANZA DR PARK CITY, UT 84060</td>
<td>42-1538872</td>
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<td>14,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUMMIT MINISTRIES INC 941 OSAGE AVE MANITOU SPGS, CO 80829</td>
<td>73-0792333</td>
<td>501 (C) 3</td>
<td>71,000</td>
<td>FMV</td>
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<tr>
<td>SUMMIT MISSIONS PO BOX 638 GREEN, OH 44232</td>
<td>34-1785031</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
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<tr>
<td>SUMMIT OF FORT PAYNE 1000 LAUREL LN SW FORT PAYNE, AL 35967</td>
<td>81-3711536</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SUMMIT PRESBYTERIAN CHURCH 6757 GREENE STREET PHILADELPHIA, PA 19119</td>
<td>23-1352490</td>
<td>501 (C) 3</td>
<td>22,000</td>
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<tr>
<td>SUMMIT SCHOOL DISTRICT RE – 1 PO BOX 7 FRISCO, CO 80443-0007</td>
<td>84-6011247</td>
<td>501 (C) 3</td>
<td>42,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SUMMIT SCHOOL FOUNDATION INC 18730 GRAND CENTRAL Pkwy Jamaika, NY 11432</td>
<td>52-2367785</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>SUMMIT SCHOOLS INC 1010 REGENT ST NE CEDAR RAPIDS, IA 52402</td>
<td>41-1472874</td>
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<td>FMV</td>
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<tr>
<td>SUMMIT SPRINGS CHURCH 605 SW US HIGHWAY 40 STE 180 BLUE SPRINGS,</td>
<td>81-3777946</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<tr>
<td>SUMMIT VIEW COMMUNITY CHURCH 1601 W DRAKE RD FORT COLLINS, CO 80526</td>
<td>84-0979461</td>
<td>501 (C) 3</td>
<td>11,900</td>
<td>FMV</td>
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<tr>
<td>SUMMITS EDUCATION 800 BOYOLSTON ST STE 300 BOSTON, MA 2199</td>
<td>47-2768711</td>
<td>501 (C) 3</td>
<td>200,000</td>
<td>FMV</td>
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<tr>
<td>SUN HILLS COMMUNITY CHURCH 1037 SUNCAST LN STE 105 EL DORADO HILLS, CA</td>
<td>68-0285429</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
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<tr>
<td>SUN STREET CENTERS 11 PEACH DR SALINAS, CA 93901</td>
<td>94-6138701</td>
<td>501 (C) 3</td>
<td>260,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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</tr>
<tr>
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<table>
<thead>
<tr>
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<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (a)</td>
<td>Name and address of organization or government</td>
</tr>
<tr>
<td>-------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>(1)</td>
<td>SUN VALLEY CENTER FOR THE ARTS INC</td>
</tr>
<tr>
<td>PO BOX 656 SUN VALLEY, ID 83353</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>SUN VALLEY COMMUNITY CHURCH</td>
</tr>
<tr>
<td>456 E RAY RD GILBERT, AZ 85296</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>SUN VALLEY SUMMER SYMPHONY INC</td>
</tr>
<tr>
<td>PO BOX 1914 SUN VALLEY, ID 83353</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td>SUN VALLEY WRITERS CONFERENCE INC</td>
</tr>
<tr>
<td>501 SANTA MONICA BLVD STE 701 SANTA MONICA,</td>
<td></td>
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<tr>
<td>(5)</td>
<td>SUNCOAST COMMUNITY CHURCH - LARGO, FL</td>
</tr>
<tr>
<td>12855 110TH AVENUE NORTH LARGO, FL 33774</td>
<td></td>
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<tr>
<td>(6)</td>
<td>SUNCOAST HUMANE SOCIETY INC</td>
</tr>
<tr>
<td>6781 SAN CASA DR ENGLEWOOD, FL 34224</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td>SUNDANCE INSTITUTE</td>
</tr>
<tr>
<td>PO BOX 684429 PARK CITY, UT 84068</td>
<td></td>
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<tr>
<td>(8)</td>
<td>SUNLIGHT OF COLLIER COUNTY INC</td>
</tr>
<tr>
<td>PO BOX 9194 NAPLES, FL 34101</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td>SUNNY HOLLOW MONTISSOR</td>
</tr>
<tr>
<td>636 MISSISSIPPI RIVER BLVD S SAINT PAUL, MN</td>
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</tr>
<tr>
<td>(10)</td>
<td>SUNNYBROOK CHILDREN'S HOME INC</td>
</tr>
<tr>
<td>PO BOX 1497 RIDGELAND, MS 39158</td>
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<tr>
<td>(11)</td>
<td>SUNNYSIDE SEVENTH-DAY ADVENTIST</td>
</tr>
<tr>
<td>10501 SE MARKET ST. PORTLAND, OR 97216-2951</td>
<td></td>
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<tr>
<td>(12)</td>
<td>SUNNYVALE COMMUNITY SERVICES</td>
</tr>
<tr>
<td>725 KIFER RD SUNNYVALE, CA 94086</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................

3 Enter total number of other organizations listed in the line 1 table. .................................
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>SUNRISE DAY CAMPS ASSOCIATION INC</td>
<td>46-5555854</td>
<td>501 (C) 3</td>
<td>26,380.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>15 NEIL CT OCEANSIDE, NY 11572</td>
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<td>SUNRISE MOVEMENT EDUCATION FUND</td>
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<td>1,056,568.</td>
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<td>N/A</td>
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<tr>
<td>50 F ST NW STE 700 WASHINGTON, DC 20001</td>
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<td>SUNRISE UNITED METHODIST CHURCH</td>
<td>74-2139772</td>
<td>501 (C) 3</td>
<td>12,000.</td>
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<tr>
<td>2655 BRIARGATE BOULEVARD COLORADO SPRINGS,</td>
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<td>SUNRIVER NATURE CENTER &amp; OBSERVATORY INC</td>
<td>93-0817907</td>
<td>501 (C) 3</td>
<td>52,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 3533 BEND, OR 97707</td>
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<td>SUNSET PRESbyterIAN CHURCH</td>
<td>93-6014978</td>
<td>501 (C) 3</td>
<td>52,820.</td>
<td>FMV</td>
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<td>14986 NW CORNELL RD PORTLAND, OR 97229</td>
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<tr>
<td>SUNSHINE CLUBHOUSE INC</td>
<td>46-4865039</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1153 NORTHSIDE BLVD SOUTH BEND, IN 46615</td>
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<td>SUNSHINE FOUNDATION</td>
<td>23-2044056</td>
<td>501 (C) 3</td>
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<tr>
<td>101 LAKESIDE PARK SOUTHAMPTON, PA 18966</td>
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<td>SUNSHINE GOSPEL MINISTRIES</td>
<td>36-2317631</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
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<tr>
<td>500 E 61ST ST CHICAGO, IL 60637</td>
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<tr>
<td>SUNSHINE MINISTRIES INC</td>
<td>43-0896665</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 66880 SAINT LOUIS, MO 63166</td>
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<td>SUNSYSTEM DEVELOPMENT CORPORATION</td>
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<td>22,000.</td>
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<td>900 HOPE WAY ALTAMONTE SPRINGS, FL 32714</td>
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<td>6 PENNYFIELD AVE BRONX, NY 10465</td>
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<tr>
<td>SUPPORT CENTER FOR CHILD ADVOCATES</td>
<td>23-2048664</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
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<tr>
<td>1617 JOHN F KENNEDY BLVD PHILADELPHIA, PA 1</td>
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Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>SUPPORT FOR EDUCATIONAL AND ECONOMIC DEVELOPMENT</td>
<td>4805 WALTON HEATH DR GARLAND, TX 75044</td>
<td>27-1309131 501 (C) 3</td>
<td>43,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPPORT FOR FAMILIES OF CHILDREN WITH DISABILITIES</td>
<td>1663 MISSION ST STE 700 SAN FRANCISCO, CA 94109</td>
<td>94-2819062 501 (C) 3</td>
<td>8,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SUPPORT OUR AGING RELIGIOUS INC SOAR</td>
<td>3025 4TH ST NE STE 14 WASHINGTON, DC 20017</td>
<td>52-1485481 501 (C) 3</td>
<td>8,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SUPPORT STOCKTON POLICE FOUNDATION</td>
<td>22 E MARKET ST STOCKTON, CA 95262</td>
<td>46-1463274 501 (C) 3</td>
<td>10,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPPORT WITHIN REACH</td>
<td>1510 BEMIDJI AVE N STE 13 BEMIDJI, MN 56601</td>
<td>41-1369558 501 (C) 3</td>
<td>10,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPPORTERS OF SUMMIT INC</td>
<td>4655 HANOVER AVE BOULDER, CO 80305</td>
<td>84-1487925 501 (C) 3</td>
<td>5,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPPORTING INITIATIVES TO REDISTRIBUTE UNUSUS</td>
<td>3000 EL CAMINO REAL STE 4-200 PALO ALTO, CA</td>
<td>27-1103057 501 (C) 3</td>
<td>45,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPPORTIVE HOUSING NETWORK OF NEW YORK INC</td>
<td>247 W 37TH ST RM 1B NEW YORK, NY 10018</td>
<td>13-3755149 501 (C) 3</td>
<td>15,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUPREME COURT HISTORICAL SOCIETY THE SOCIETY</td>
<td>224 E CAPITOL ST NE WASHINGTON, DC 20003</td>
<td>23-7420574 501 (C) 3</td>
<td>11,000.</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SUPRSEED INC</td>
<td>3526 W SLAUSON AVE LOS ANGELES, CA 90043</td>
<td>82-3768348 501 (C) 3</td>
<td>50,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SURFRIDER FOUNDATION</td>
<td>PO BOX 73550 SAN CLEMENTE, CA 92673</td>
<td>95-3941826 501 (C) 3</td>
<td>41,800.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>SURGICAL EYE EXPEDITIONS INTERNATIONAL INC</td>
<td>175 CREMONA DR STE 100 GOLETA, CA 93117</td>
<td>31-1682275 501 (C) 3</td>
<td>104,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>13-1623869</td>
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<td>23-2610145</td>
<td>501 (C) 3</td>
<td>132,000.</td>
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<tr>
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<td>26-4788700</td>
<td>501 (C) 3</td>
<td>24,000.</td>
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<tr>
<td>SUSAN G KOMEN BREAST CANCER FOUNDATION</td>
<td>36-4111723</td>
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<td>SUSAN G KOMEN BREAST CANCER FOUNDATION</td>
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<tr>
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<td>91-2168484</td>
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<tr>
<td>SUSANNAHS HOUSE INC</td>
<td>47-1728129</td>
<td>501 (C) 3</td>
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<tr>
<td>SUSTAINABLE CAMBODIA INC</td>
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<td>FMV</td>
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</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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---

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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</thead>
<tbody>
<tr>
<td>SUSTAINABLE CONSERVATION 98 BATTERY ST STE 302 SAN FRANCISCO, CA 94111</td>
<td>94-3232437</td>
<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUSTAINABLE ECONOMIC ENTERPRISES OF LOS ANGELES 1125 W 6TH ST STE 500 LOS ANGELES, CA 90017</td>
<td>95-4597000</td>
<td>501 (C) 3</td>
<td>25,000</td>
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<tr>
<td>SUSTAINABLE ECONOMIES LAW CENTER 1428 FRANKLIN ST OAKLAND, CA 94612</td>
<td>46-2210531</td>
<td>501 (C) 3</td>
<td>381,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>SUSTAINABLE HARVEST INTERNATIONAL 177 HUNTINGTON AVE STE 1703 # 23701 BOSTON, MA 02115</td>
<td>43-2022182</td>
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<td>28,364</td>
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<tr>
<td>SUSTAINABLE MARKETS FOUNDATION 45 W 36TH ST NEW YORK, NY 10018</td>
<td>13-4188834</td>
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<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SUSTAINABLE PRESERVATION INITIATIVE 277 FAIRFIELD RD STE 207 FAIRFIELD, NJ 07004</td>
<td>27-2704326</td>
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<td>26,000</td>
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<td>45-4743353</td>
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<td>FMV</td>
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<td>94-1105851</td>
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<td>SUTTER HEALTH 2200 RIVER PLAZA DR SACRAMENTO, CA 95833</td>
<td>94-2788907</td>
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<tr>
<td>SUZUKI-ORFF SCHOOL FOR YOUNG MUSICIANS 1148 W CHICAGO AVE CHICAGO, IL 60642</td>
<td>36-3137564</td>
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<td>7,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SV HOME 350 W JULIAN ST BLDG 5 SAN JOSE, CA 95110</td>
<td>81-4755729</td>
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<td>10,000</td>
<td>FMV</td>
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<td>SWARTHMORE COLLEGE 500 COLLEGE AVE SWARTHMORE, PA 19081</td>
<td>23-13952683</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<tr>
<td>1</td>
<td>SWARTHMORE UNITED METHODIST CHURCH</td>
<td>23-1548104</td>
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<td>5</td>
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<td>6</td>
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Schedule I (Form 990) 2020
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(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

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<td>4</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>SYMPHONY IN C A NEW JERSEY NON PROFIT CORPO</td>
<td>51-0244534</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>SYMPHONY SILICON VALLEY</td>
<td>32-0083030</td>
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<td>8</td>
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<td>9</td>
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<td>91-6032976</td>
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<td>10</td>
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<td>22-1919787</td>
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<tr>
<td>11</td>
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<td>SYNAPSE SCHOOL</td>
<td>46-0631841</td>
<td>501 (C) 3</td>
<td>36,550.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**

*Grants and Other Assistance to Organizations, Governments, and Individuals in the United States*

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<tbody>
<tr>
<td>SYNCHRONICITY EARTH USA INC</td>
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<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>MLB TAX LLC 1180 6TH AVE SUITE 865 NEW YORK</td>
<td>1238 VERSAILLES AVE ALAMEDA, CA 94501</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SYRACUSE HEALTH SCIENCE CENTER MEDICAL ALUM</td>
<td>750 E ADAMS ST SYRACUSE, NY 13210</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SYRACUSE UNIVERSITY</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>SYR Forced AMERICAN MEDICAL SOCIETY FOUNDATION</td>
<td>1012 14TH ST NW WASHINGTON, DC 20005</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>T A S K</td>
<td>72 HALF ESCHER STREET TRENTON, NJ 8605</td>
<td>501 (c) 3</td>
<td>95,319.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>T ROWE PRICE PROGRAM FOR CHARITABLE GIVING</td>
<td>100 E FRATT ST BALTIMORE, MD 21202</td>
<td>501 (c) 3</td>
<td>95,775.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>TABERNACLE PRESBYTERIAN CHURCH</td>
<td>418 E 34TH ST INDIANAPOLIS, IN 46205</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>TABLE COMMUNITY CHURCH</td>
<td>5121 NE ELAM YOUNG PRW STE B HILLSBORO, OR</td>
<td>501 (c) 3</td>
<td>8,420.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>TABLE TENNIS AMERICA FOUNDATION</td>
<td>39404 DRAGONFLY ST NEWARK, CA 95640</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>TABLE TO TABLE INC</td>
<td>611 US HIGHWAY 46 W STE 240 HASBROUCK HTS,</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TABOR COLLEGE INC</td>
<td>400 S JEFFERSON ST HILLSBORO, KS 67063</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

*Schedule I (Form 990) 2020*
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☒ No ❌</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</tbody>
</table>

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>TACO BELL FOUNDATION INC</td>
<td>2712 MIDLAND PARK RD CHARLESTON, SC 29406</td>
<td>33-0523542</td>
<td>501 (C) 3</td>
<td>5,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>TACOMA ART MUSEUM TACOMA WA</td>
<td>1701 PACIFIC AVE TACOMA, WA 98402</td>
<td>91-0697444</td>
<td>501 (C) 3</td>
<td>16,200.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(3)</td>
<td>TAFT SCHOOL CORPORATION</td>
<td>110 WOODSBURY RD WATERTOWN, CT 6795</td>
<td>06-0646921</td>
<td>501 (C) 3</td>
<td>83,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>TAHIRIR JUSTICE CENTER</td>
<td>6400 ARLINGTON BLVD FALLS CHURCH, VA 22042</td>
<td>54-1858176</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>TAHOE AREA MOUNTAIN BIKE ASSOCIATION</td>
<td>PO BOX 13712 SOUTH LAKE TAHOE, CA 96151</td>
<td>91-1852297</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>TAHOE COALITION FOR THE HOMELESS</td>
<td>PO BOX 13514 SOUTH LAKE TAHOE, CA 96151</td>
<td>47-4825924</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>TAHOE EXPEDITION ACADEMY INC</td>
<td>9765 SCHAFFER MILL RD TRUCKEE, CA 96161</td>
<td>27-5379571</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>TAHOE RIM TRAIL ASSOCIATION</td>
<td>PO BOX 3267 STATELINE, NV 89449</td>
<td>94-2789846</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>TAHOMA UNITARIAN UNIVERSALIST CONGREGATION</td>
<td>1115 E 56TH ST TACOMA, WA 98408</td>
<td>91-0698427</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10)</td>
<td>TAILORED FOR EDUCATION INC</td>
<td>PO BOX 171236 BOSTON, MA 2117</td>
<td>30-0696402</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>TAINAN UNION CHRISTIAN CHURCH</td>
<td>3059 31ST ST ASTORIA, NY 11102</td>
<td>23-7339641</td>
<td>501 (C) 3</td>
<td>11,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>TAKE BACK THE COURT FOUNDATION</td>
<td>2370 MARKET ST # 433 SAN FRANCISCO, CA 94111</td>
<td>84-2145297</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Attach to Form 990.**

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   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>(1)</td>
<td>TAKE STOCK IN CHILDREN OF NASSAU COUNTY</td>
<td>76346 501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>TAKING BACK OURSELVES INC</td>
<td>81-5477604 501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>TALBERT HOUSE</td>
<td>2600 VICTORY PKWY CINCINNATI, OH 45206 31-0713350 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>TALBOT HOSPICE FOUNDATION INC</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>TALBOT INTERFAITH SHELTER INC</td>
<td>107 GOLDSBOROUGH ST EASTON, MD 21601 26-4629046 501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>TALBOT MENTORS INC</td>
<td>108 MARYLAND AVE STE 102 EASTON, MD 21601 52-2027082 501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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<td>TALENT BEYOND BOUNDARIES INC</td>
<td>2000 MASSACHUSETTS AVE NW WASHINGTON, DC 20 81-1936850 501 (C) 3</td>
<td>7,143.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>TALIESIN NEXUS</td>
<td>411 S MAIN ST UNIT 205 LOS ANGELES, CA 9001 27-4737588 501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>TALITA CUMI</td>
<td>244 DICKENSON AVE NEWBURY PARK, CA 91320 20-5499393 501 (C) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>TALKING POINTS</td>
<td>509 WEBSTER ST SAN FRANCISCO, CA 94117 47-4616102 501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>TALL TIMBERS FOUNDATION INC</td>
<td>13093 HENRY BEADEL DR TALLAHASSEE, FL 32312 59-3681376 501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>TALL TIMBERS RESEARCH INC</td>
<td>13093 HENRY BEADEL DR TALLAHASSEE, FL 32312 59-0952956 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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   - No

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<tr>
<td>TALLAHASSEE MUSEUM OF HISTORY AND NATURAL S</td>
<td>59-0838924</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3945 MUSEUM DR TALLAHASSEE, FL 32310</td>
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<td>TALLER SAN JOSE HOPE BUILDERS</td>
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<td>FMV</td>
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<td>801 N BROADWAY SANTA ANA, CA 92701</td>
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<td>TALLWOOD BAPTIST CHURCH</td>
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<td>555 TALLWOOD RD HOUSTON, TX 77024</td>
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<td>TALMUD TORAH OHEL YOCHANAN</td>
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<td>4000 ALTON RD MIAMI BEACH, FL 33140</td>
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<td>TALMUDICAL ACADEMY OF BALTIMORE INC</td>
<td>52-0591676</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4445 OLD COURT RD PIKESVILLE, MD 21208</td>
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<tr>
<td>TAMALPAIS UNION HIGH SCHOOL DISTRICT-REDWOOD</td>
<td>68-0194361</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KREP FAMILY FOUNDATION &amp; REDWOOD HS 395 DOH</td>
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<td>TAMIL NADU FOUNDATION INC</td>
<td>52-1064562</td>
<td>501 (C) 3</td>
<td>47,600.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>7409 GREEN HILL DR MACUNGIE, PA 18062</td>
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<td>TAMIM ACADEMIES</td>
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<td>250,000.</td>
<td>FMV</td>
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<tr>
<td>822 MONTGOMERY AVE STE 201 NARBERTH, PA 190</td>
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<td>TAMPA BAY HISTORY CENTER INC</td>
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<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>801 WATER ST PL TAMPA, FL 33602</td>
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<tr>
<td>TAMPA BAY PERFORMING ARTS CENTER</td>
<td>59-2037085</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1010C N W C MACINNES PL TAMPA, FL 33602</td>
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<tbody>
<tr>
<td>1</td>
<td>TAMPA BAYWATCH INC</td>
<td>300 PINELLAS BAYWAY S ST PETERSBURG, FL 33</td>
<td>59-3191962</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>TAMPA GENERAL HOSPITAL FOUNDATION INC</td>
<td>PO BOX 1289 TAMPA, FL 33601</td>
<td>23-7354477</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>TAMPA METROPOLITAN AREA YOUNG MENS CHRISTIA</td>
<td>110 E OAK AVE TAMPA, FL 33602</td>
<td>59-1742909</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>TANZANIAN CHILDRENS FUND INC</td>
<td>2 GARDEN ST CAMBRIDGE, MA 2138</td>
<td>74-3087284</td>
<td>501 (C) 3</td>
<td>51,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>TAPESTRY CHURCH</td>
<td>PO BOX 36067 BIRMINGHAM, AL 35236</td>
<td>82-3315967</td>
<td>501 (C) 3</td>
<td>9,675.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>6</td>
<td>TAPFOUND INC</td>
<td>40 WORTH ST RM 601 NEW YORK, NY 10013</td>
<td>91-2162645</td>
<td>501 (C) 3</td>
<td>158,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>TAPOORTE THEATRE</td>
<td>PO BOX 30946 SEATTLE, WA 98113</td>
<td>91-0971237</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>TARAS CHANCE</td>
<td>219 CLAIRE AVE FULLERTON, CA 92835</td>
<td>46-0941505</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9</td>
<td>TARC INC</td>
<td>2701 SW RANDOLPH AVE TOPEKA, KS 66611</td>
<td>48-6086732</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>10</td>
<td>TARGET ALS FOUNDATION INC</td>
<td>PO BOX 1598 NEW YORK, NY 10101</td>
<td>81-0756743</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>TARPOON SPRINGS SHEPHERD CENTER INC</td>
<td>304 S PINELLAS AVE TARPOON SPRINGS, FL 34689</td>
<td>59-3070882</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>12</td>
<td>TARRANT AREA FOOD BANK</td>
<td>2525 CULLEN ST FORT WORTH, TX 76107</td>
<td>75-1822473</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) TARRYTOWN UNITED METHODIST CHURCH PO BOX 5566 AUSTIN, TX 78763 74-6012252 501 (C) 3 13,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(2) TANAS UNITED METHODIST CHURCH 20 EAST M-55 TAMAS CTTI, MI 48763 38-2391189 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) TAWONGA JEWISH COMMUNITY CORPORATION 131 STEUART ST STE 460 SAN FRANCISCO, CA 9494-322761 501 (C) 3 6,100. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>(4) TAX FOUNDATION 1325 G ST NW STE 950 WASHINGTON, DC 20005 52-1703065 501 (C) 3 476,050. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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</tr>
<tr>
<td>(5) TAYLOR COUNTY WISCONSIN HUMANE SOCIETY INC PO BOX 1 MEDFORD, WI 54451 20-8461028 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) TAYLOR LAKE CHRISTIAN CHURCH 1730 OLD KIRBY RD SEABROOK, TX 77586 74-2025799 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td>(7) TEACH FOR ALL INC 25 BROADWAY FL 12 NEW YORK, NY 10004 26-2122566 501 (C) 3 1,000,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) TEACH MY PEOPLE PO BOX 2848 PAWELEY ISLAND, SC 29585 57-1075990 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | TEACHBEYOND INC  
932 MAPLE AVE DOWERS GROVE, IL 60515 | 16-1155027 | 501 (C) 3 | 24,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | TEACHERS COLLEGE COLUMBIA UNIVERSITY  
525 W 120TH ST # 3D NEW YORK, NY 10027 | 13-1624202 | 501 (C) 3 | 179,439. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | TEACHING MATTERS INC  
475 RIVERSIDE DR STE 1270 NEW YORK, NY 10111 | 13-3770472 | 501 (C) 3 | 65,330. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | TEAK FELLOWSHIP INC  
16 W 22ND ST FL 3 NEW YORK, NY 10010 | 13-4011465 | 501 (C) 3 | 33,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | TEAM ACTIVITIES FOR SPECIAL KIDS INC  
980 HORAN DR FENTON, MO 63026 | 43-1825054 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | TEAM DREA FOUNDATION INC  
2004 FLAGSTONE PL RALEIGH, NC 27612 | 81-3938375 | 501 (C) 3 | 21,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | TEAM EXPANSION MINISTRIES INC  
4112 OLD ROUTT RD LOUISVILLE, KY 40299 | 31-1043937 | 501 (C) 3 | 215,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | TEAM IMPACT  
500 VICTORY RD QUINCY, MA 2171 | 45-1837673 | 501 (C) 3 | 13,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | TEAM IOWA MISSIONS INC  
PO BOX 246 BLAKESBURG, IA 52536 | 47-3817048 | 501 (C) 3 | 30,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | TEAM PENNSYLVANIA FOUNDATION  
240 N 3RD ST FL 2 HARRISBURG, PA 17101 | 23-2876177 | 501 (C) 3 | 71,800. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | TEAM READ  
PO BOX 94042 SEATTLE, WA 98124 | 01-0852888 | 501 (C) 3 | 19,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | TEAM RUBICON  
6171 W CENTURY BLVD STE 310 LOS ANGELES, CA 90028 | 27-1720480 | 501 (C) 3 | 312,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

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3. Enter total number of other organizations listed in the line 1 table:

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## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th></th>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>TEAM WALKER INC 373 COMMUNIPAW AVE JERSEY CITY, NJ 7304</td>
<td>22-3585539</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>TEAMBROWNSVILLE INC 34 PINSETTIA PL BROWNSVILLE, TX 78520</td>
<td>86-1272617</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>TEAMCHILD 1225 S WELDER ST STE 420 SEATTLE, WA 98144</td>
<td>91-1930194</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>TEAMSTER RANK AND FILE EDUCATION AND LEGAL</td>
<td>PO BOX 10303 DETROIT, MI 48210</td>
<td>38-2883689</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>TEAMWORK USA EDUCATION CORPORATION 110 TALAVERA PALM BEACH GARDENS, FL 3341</td>
<td>46-0873317</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>TECH FOUNDATION INC 30 BRATTLE ST STE 3 CAMBRIDGE, MA 2138</td>
<td>04-3547092</td>
<td>501 (C) 3</td>
<td>400,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>TECHBRIDGE INC 1360 PEACHTREE ST NE STE 175 ATLANTA, GA 30</td>
<td>58-2531971</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>TECHIE YOUTH CORP 6254 97TH PL APT 112I REGO PARK, NY 11374</td>
<td>46-4506229</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>TECHNOLOGY ACCESS FOUNDATION 605 SW 10TH ST SEATTLE, WA 98146</td>
<td>91-1731833</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>TECHNOLOGY LEARNING CENTER INC PO BOX 801337 ACWORTH, GA 30101</td>
<td>01-0969614</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>TECHNOSERVE INC 1777 N KENT ST ARLINGTON, VA 22209</td>
<td>13-2626135</td>
<td>501 (C) 3</td>
<td>281,875.</td>
<td>FMV</td>
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<td>12</td>
<td>TECHSOUP GLOBAL 435 BRANNAN STREET SAN FRANCISCO, CA 94107</td>
<td>94-3070617</td>
<td>501 (C) 3</td>
<td>251,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
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<td>1</td>
<td>TEEN ACTION AND SUPPORT CENTER</td>
<td>20-2977629</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>TEEN CHALLENGE OF SOUTHERN CALIFORNIA</td>
<td>95-2683852</td>
<td>501 (C) 3</td>
<td>20,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>TEEN HOPE OF IDAHO INC</td>
<td>47-2607964</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>TEEN SUCCESS INC</td>
<td>45-0702884</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>TELFAIR MUSEUM OF ART INC</td>
<td>58-0610074</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>TELFORD DIVING AND RESCUE UNIT</td>
<td>23-6411139</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
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<td>7</td>
<td>TELLING ROOM</td>
<td>74-3136956</td>
<td>501 (C) 3</td>
<td>7,650.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>TELLURIDE FOUNDATION</td>
<td>84-1530768</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>TELLURIDE MEDICAL CENTER FOUNDATION</td>
<td>26-3556757</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>TELLURIDE SCIENCE RESEARCH CENTER</td>
<td>74-2369040</td>
<td>501 (C) 3</td>
<td>53,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>11</td>
<td>TELSHE YESHIVA-CHICAGO RABBINICAL COLLEGE T</td>
<td>36-2464241</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>TELUGUPEOPLE FOUNDATION</td>
<td>26-2748358</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) | TEMENOS CATHOLIC WORKER  
PO BOX 642656 SAN FRANCISCO, CA 94164 | 94-3268061 | 501 (C) 3 | 5,950. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) | TEMENOS INC  
CO APRIO LLP 7 PENN PLAZA NEW YORK, NY 10000 | 13-3747774 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) | TEMPLE ADAS ISRAEL OF SAG HARBOR NY  
PO BOX 1378 SAG HARBOR, NY 11963 | 11-2615219 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) | TEMPLE ADATH ISRAEL OF THE MAIN LINE  
250 N HIGHLAND AVE MERION STATION, PA 19066 | 23-1431499 | 501 (C) 3 | 6,166. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) | TEMPLE ALIYAH INC  
6025 VALLEY CIRCLE BLVD WOODLAND HILLS, CA | 95-2236425 | 501 (C) 3 | 15,285. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) | TEMPLE B NAI TORAH  
15727 NE 4TH ST BELLEVUE, WA 98008 | 91-0848001 | 501 (C) 3 | 42,450. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) | TEMPLE BETH AM  
5950 N KENDALL DR FINECREST, CA 90035 | 59-0855408 | 501 (C) 3 | 12,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) | TEMPLE BETH AM  
1039 S LA CIENEGA BLVD LOS ANGELES, WA 90811 | 85-1656370 | 501 (C) 3 | 121,485. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) | TEMPLE BETH AM  
2632 NE 80TH ST SEATTLE, FL 33156 | 91-0741218 | 501 (C) 3 | 20,798. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) | TEMPLE BETH AVODAH  
45 PUDDLINGSTONE LANE NEWTON CENTRE, MA 2459 | 04-2317507 | 501 (C) 3 | 7,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) | TEMPLE BETH EL  
350 ROXBURY RD STAMFORD, NJ 8844 | 06-0649222 | 501 (C) 3 | 13,300. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) | TEMPLE BETH EL  
67 US HIGHWAY 206 HILLSBOROUGH, CT 6902 | 22-6082731 | 501 (C) 3 | 14,200. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...........................................................................................................

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>TEMPLE BETH EL - ROCHESTER, NY 139 WINTON ROAD SOUTH ROCHESTER, NY 14610 16-0773643 501 (C) 3</td>
<td></td>
<td></td>
<td>11,038.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TEMPLE BETH EL OF BOCA RATON 333 SW 4TH AVE BOCA RATON, FL 33432 59-1412924 501 (C) 3</td>
<td></td>
<td></td>
<td>11,801.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>TEMPLE BETH EL OF ST PETERSBURG FLORIDA INC 400 PASADENA AVE S SAINT PETERSBURG, FL 337 59-0711184 501 (C) 3</td>
<td></td>
<td></td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TEMPLE BETH ELOHIM 10 BETHEL RD WELLESLEY HILLS, MA 2481 04-6130463 501 (C) 3</td>
<td></td>
<td></td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>TEMPLE BETH EMETH 2309 PACKARD ST ANN ARBOR, MI 48104 38-1846364 501 (C) 3</td>
<td></td>
<td></td>
<td>12,858.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TEMPLE BETH HILLEL-BETH EL 1001 REMINGTON RD WYNNEWOOD, PA 19096 23-1599651 501 (C) 3</td>
<td></td>
<td></td>
<td>41,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TEMPLE BETH ISRAEL OF THE POMONA VALLEY 3033 N TOWNE AVE POMONA, CA 91767 95-2111157 501 (C) 3</td>
<td></td>
<td></td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>TEMPLE BETH SHALOM 670 HIGHLAND AVE NEEDHAM HEIGHTS, TX 78731 04-6006558 501 (C) 3</td>
<td></td>
<td></td>
<td>6,143.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TEMPLE BETH SHALOM 193 E MT PLEASANT AVE LIVINGSTON, NY 10706 22-1599195 501 (C) 3</td>
<td></td>
<td></td>
<td>8,675.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TEMPLE BETH SHALOM 740 N BROADWAY HASTINGS ON HUDSON, NJ 7039 13-2575113 501 (C) 3</td>
<td></td>
<td></td>
<td>12,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TEMPLE BETH SHALOM 7300 HART LN AUSTIN, MA 2494 74-2956899 501 (C) 3</td>
<td></td>
<td></td>
<td>22,775.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TEMPLE BETH SHALOM OF COLUMBUS 5089 JOHNSTOWN RD NEW ALBANY, OH 43054 31-0926157 501 (C) 3</td>
<td></td>
<td></td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..............................................................................................................................

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ❌

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) TEMPLE BETH SHLOM 1901 KRESSON RD CHERRY HILL, NJ 8003</td>
<td>21-0693430</td>
<td>501 (C) 3</td>
<td>21,457.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) TEMPLE BETH SHLOM 1274 CUNNINGHAM LN S SALEM, OR 97302</td>
<td>93-0677230</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) TEMPLE BETHEL OF NORTHERN WESTCHESTER 220 S BEDFORD RD CHAPPAQUA, NY 10514</td>
<td>13-1782491</td>
<td>501 (C) 3</td>
<td>15,055.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) TEMPLE B’NAI OR 60 OVERLOOK RD MORRISTOWN, NJ 7960</td>
<td>22-6077572</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) TEMPLE CONGREGATION CHABAI SHLOM 5015 HARDING PIKE NASHVILLE, TN 37205</td>
<td>62-0488037</td>
<td>501 (C) 3</td>
<td>21,125.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) TEMPLE DE HIRSCH SINAI 1511 E PIKE ST SEATTLE, WA 98122</td>
<td>91-0437430</td>
<td>501 (C) 3</td>
<td>7,504.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) TEMPLE EMMANUEL 10101 CONNECTICUT AVE KENSINGTON, MD 20895</td>
<td>52-0642790</td>
<td>501 (C) 3</td>
<td>70,920.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) TEMPLE EMMANUEL OF BEVERLY HILLS 300 N CLARK DR BEVERLY HILLS CA 90211-1724</td>
<td>95-1696713</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) TEMPLE EMMANUEL OF NEWTON 385 WARD ST NEWTON CENTER, MA 2459</td>
<td>04-2121646</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) TEMPLE EMMANUEL OF SOUTH HILLS 1250 BOWER HILL RD PITTSBURGH, PA 15243</td>
<td>25-1029716</td>
<td>501 (C) 3</td>
<td>229,581.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(11) TEMPLE EMMANUEL OF WESTFIELD, NJ 756 EAST BROAD STREET WESTFIELD, NJ 7090</td>
<td>22-1686929</td>
<td>501 (C) 3</td>
<td>7,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) TEMPLE EMMANUEL SINFAI 661 SALISBURY STREET WORCESTER, MA 1609</td>
<td>46-3189603</td>
<td>501 (C) 3</td>
<td>11,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
**Name of the organization**: VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer Identification Number**: 23-2888152

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

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<tr>
<td>(1) TEMPLE GNATHMEY STEEPLECHASE FOUNDATION INC</td>
<td>52-1918953</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(2) TEMPLE ISAIAH OF CONTRA COSTA COUNTY</td>
<td>94-1626373</td>
<td>501 (C) 3</td>
<td>7,459.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) TEMPLE ISAIAH, INC.</td>
<td>04-2531339</td>
<td>501 (C) 3</td>
<td>9,510.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) TEMPLE ISRAEL</td>
<td>41-0705807</td>
<td>501 (C) 3</td>
<td>23,866.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) TEMPLE ISRAEL - VESTAL, NY</td>
<td>15-0571304</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(6) TEMPLE ISRAEL AND JEWISH COMMUNITY CENTER</td>
<td>22-1589229</td>
<td>501 (C) 3</td>
<td>50,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) TEMPLE ISRAEL OF DETROIT</td>
<td>38-1490194</td>
<td>501 (C) 3</td>
<td>9,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) TEMPLE ISRAEL OF HOLLYWOOD</td>
<td>23-7383024</td>
<td>501 (C) 3</td>
<td>6,185.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) TEMPLE ISRAEL OF NATICK</td>
<td>04-2272437</td>
<td>501 (C) 3</td>
<td>22,195.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) TEMPLE ISRAEL OF THE CITY OF NEW YORK</td>
<td>13-1624205</td>
<td>501 (C) 3</td>
<td>42,480.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) TEMPLE ISRAEL WESTPORT INC</td>
<td>06-0937540</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(12) TEMPLE JEREMIAH</td>
<td>36-2555525</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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<td>1 (a) Name and address of organization or government</td>
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<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>(1) TEMPLE MICAH CONGREGATION 2829 WISCONSIN AVE N.W. WASHINGTON, DC 20000 52-0845118 501 (C) 3 5,800. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) TEMPLE MISHKON TEPHILO 201 HAMPTON DRIVE VENICE, CA 90291 95-1544590 501 (C) 3 6,280. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) TEMPLE OF AARON CONGREGATION 616 MISSISSIPPI RIVER BLVD S SAINT PAUL, MN 41-0824942 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) TEMPLE RODEF SHALOM 2100 WESTMORELAND ST FALLS CHURCH, VA 22043 54-0733866 501 (C) 3 23,880. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) TEMPLE SHAARAY TEFILA KAA CONGREGATION SSHA 250 R 79TH ST NEW YORK, NY 10075 13-1656613 501 (C) 3 66,190. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) TEMPLE SHAARAY TEFILA OF WESTCHESTER 89 BALDWIN RD MOUNT KISCO, NY 10549 13-2849928 501 (C) 3 6,800. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) TEMPLE SHALOM 259 RICHARDS AVENUE NORWALK, TX 75240 23-7004019 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) TEMPLE SHALOM 8401 GRUBB RD CHEVY CHASE, CT 6850 52-0729006 501 (C) 3 7,244. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) TEMPLE SHALOM 6930 ALPHA RD DALLAS, MD 20815 75-1231572 501 (C) 3 8,090. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) TEMPLE SHALOM INC 4630 PINE RIDGE RD NAPLES, FL 34119 59-2546855 501 (C) 3 6,850. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) TEMPLE SHALOM OF NEWTON 175 TEMPLE STREET NEWTON, MA 2465 04-2119396 501 (C) 3 7,720. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) TEMPLE SHIRTIKVAH INC OF WINCHESTER 34 VINE ST WINCHESTER, MA 1890 04-3145322 501 (C) 3 9,220. FMV N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>TEMPLE SHOLOM IN BROOMALL 55 CHURCH LN BROOMALL, PA 19008 23-6050744 501 (C) 3 27,300. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TEMPLE SINAI INC 5465 DUPREE DRIVE ATLANTA, GA 30327 58-1033792 501 (C) 3 15,100. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TEMPLE SINAI-JEWISH COMMUNITY CENTER OF PAL 73251 ROYAL LANE WEST PALM DESERT, CA 9226 95-3015930 501 (C) 3 6,345. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TEMPLE UNIVERSITY-OF THE COMMONWEALTH SYSTE 1852 N 10TH ST TASH 08354 PHILADELPHIA, PA 23-1365971 501 (C) 3 297,333. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TEMPLE-TIFERETH ISRAEL FOUNDATION 26000 SHAKER BLVD BEACHWOOD, OH 44122 26-1874206 501 (C) 3 6,716. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) TEN MILE CHRISTIAN CHURCH INC</td>
<td>82-6008963</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>(2) TEN STRANDS</td>
<td>27-4118171</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(3) TENACITY INC</td>
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<td>FMV</td>
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<tr>
<td>(4) TENANTS TOGETHER</td>
<td>26-1777917</td>
<td>501 (c) 3</td>
<td>17,260.</td>
<td>FMV</td>
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<td>FMV</td>
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<td>(7) TENNESSEE CHARTER SCHOOL INCUBATOR INC</td>
<td>27-1799465</td>
<td>501 (c) 3</td>
<td>90,000.</td>
<td>FMV</td>
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<td>(8) TENNESSEE GOLF FOUNDATION</td>
<td>58-1893478</td>
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<td>(9) TENNESSEE JUSTICE CENTER INC</td>
<td>62-1630417</td>
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<td>(10) TENNESSEE PRESERVATION TRUST INC</td>
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<td>FMV</td>
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<tr>
<td>(11) TENNIS FOUNDATION OF ST PETERSBURG INC</td>
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<tr>
<td>(12) TENTH PRESBYTERIAN CHURCH</td>
<td>23-1365261</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) Tergar International</td>
<td>26-4735078</td>
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<tr>
<td>1621 E Hennepin Ave Ste 210 Minneapolis, MN</td>
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<td>(2) Termer Housing Innovation Labs Inc</td>
<td>85-2274605</td>
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<td>FMV</td>
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<td>1130 Winesor Ave Piedmont, CA 94610</td>
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<td>(3) Terrell ISD Excellence Foundation</td>
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<td>PO Box 40 Terrell, CA 75160</td>
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<td>(4) Tesseracl Research Center Inc</td>
<td>27-4552853</td>
<td>501 (C) 3</td>
<td>24,000.</td>
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<tr>
<td>1629 K St NW Ste 300 Washington, DC 20006</td>
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<td>(5) Teton County Search &amp; Rescue Foundation</td>
<td>46-1402367</td>
<td>501 (C) 3</td>
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<tr>
<td>300 South Batch Plant Rd 1063 Jackson, WY 8</td>
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<tr>
<td>(6) Texas A&amp;M Foundation</td>
<td>74-2245072</td>
<td>501 (C) 3</td>
<td>88,750.</td>
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<tr>
<td>401 George Bush Dr College Station, TX 7784</td>
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<td>(7) Texas Access to Justice Foundation</td>
<td>74-2354575</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>PO Box 12886 Austin, TX 78711</td>
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<td>(8) Texas Appleseed</td>
<td>74-2804268</td>
<td>501 (C) 3</td>
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<td>(9) Texas Baptist Men Inc</td>
<td>75-2873370</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>(10) Texas Childrens Hospital</td>
<td>74-1100555</td>
<td>501 (C) 3</td>
<td>323,000.</td>
<td>FMV</td>
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<tr>
<td>6621 Fannin St Houston, TX 77030</td>
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<td>(11) Texas Christian University</td>
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<tr>
<td>TCU Box 297011 Fort Worth, TX 76129</td>
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</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   ![Yes, No](image)

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1)</strong> TEXAS FREEDOM NETWORK EDUCATION FUND</td>
<td>74-2788317</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 1624 AUSTIN, TX 78767</td>
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<td><strong>(2)</strong> TEXAS GAME WARDEN ASSOCIATION INC</td>
<td>75-1707293</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>4367 FM 1047 HAMILTON, TX 76531</td>
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<td><strong>(3)</strong> TEXAS GUN SENSE</td>
<td>46-2247262</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>PO BOX 92722 AUSTIN, TX 78709</td>
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<td><strong>(4)</strong> TEXAS HEART INSTITUTE</td>
<td>74-6053200</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
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<td>6770 BERTNER AVE STE C HOUSTON, TX 77030</td>
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<td><strong>(5)</strong> TEXAS INTERNATIONAL BIBLE INSTITUTE</td>
<td>27-0073061</td>
<td>501 (C) 3</td>
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<td><strong>(6)</strong> TEXAS LAW REVIEW ASSOCIATION</td>
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<td><strong>(8)</strong> TEXAS ORGANIZING PROJECT EDUCATION FUND</td>
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<tr>
<td>PO BOX 120296 SAN ANTONIO, TX 78212</td>
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<tr>
<td><strong>(9)</strong> TEXAS PUBLIC POLICY FOUNDATION</td>
<td>74-2524057</td>
<td>501 (C) 3</td>
<td>140,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>901 CONGRESS AVE AUSTIN, TX 78701</td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>(10)</strong> TEXAS PUBLIC RADIO</td>
<td>74-2559514</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>321 W COMMERCE ST SAN ANTONIO, TX 78205</td>
<td></td>
<td></td>
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<tr>
<td><strong>(11)</strong> TEXAS RAMP PROJECT</td>
<td>33-1139484</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 832065 RICHARDSON, TX 75083</td>
<td></td>
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<tr>
<td><strong>(12)</strong> TEXAS RIGHT TO LIFE COMMITTEE EDUCATIONAL F</td>
<td>76-0116723</td>
<td>501 (C) 3</td>
<td>137,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4500 BISSONNET ST BELLAIRE, TX 77401</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| (1) TEXAS SCOTTISH RITE HOSPITAL FOR CHILDREN  
2222 WELBORN ST DALLAS, TX 75219 | 75-0818178 | 501 (C) 3 | 136,334. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION  
601 UNIVERSITY DR SAN MARCOS, TX 78666 | 74-1982979 | 501 (C) 3 | 29,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) TEXAS TECH FOUNDATION INC  
PO BOX 45025 LUBBOCK, TX 79409 | 75-6043842 | 501 (C) 3 | 100,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) TEXAS TRIBUNE INC  
919 CONGRESS AVE AUSTIN, TX 78701 | 26-4527097 | 501 (C) 3 | 11,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) TEXAS-LouisIANA GULF COAST SYNOD OUTDOOR &  
PO BOX 99 LA GRANGE, TX 78945 | 76-0576423 | 501 (C) 3 | 28,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) TRACHER SCHOOL INC  
5025 TRACHER RD OJAI, CA 93023 | 95-1642398 | 501 (C) 3 | 134,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) THAI COMMUNITY MAHAPAWN ALLIANCE CHURCH  
C/O PASTOR ACHARA ACHABRATANASOPON 74-12 3 | 11-3484760 | 501 (C) 3 | 33,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) THINK FOUNDATION INC  
18 UNION SQ E NEW YORK, NY 10003 | 80-0062118 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) THANKFUL MEMORIAL EPISCOPAL CHURCH  
PO BOX 2274 CHATTANOOGA, TN 37409 | 62-0925507 | 501 (C) 3 | 23,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) THANKS USA  
6612 MAUGH RD MC LEAN, VA 22101 | 20-3973151 | 501 (C) 3 | 21,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) THE 5 GYRES INSTITUTE  
PO BOX 5699 SANTA MONICA, CA 90409 | 27-1350279 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) THE A21 CAMPAIGN INC  
2781 W MACARTHUR BLVD STE B605 SANTA ANA, CA 92704 | 26-3442008 | 501 (C) 3 | 28,500. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THE ACADEMY AT PENGUIN HALL INC 36 ESSEX ST WENHAM, MA 1984</td>
<td>81-0729618</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ACADEMY FOR CLINICAL AND 301 S LIVINGSTON AVE FL 2 LIVINGSTON, NJ 70</td>
<td>22-2426648</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ACADEMY OF MEDICINE ENGINEERING 3925 W BRAKER LN STE 38018 AUSTIN, TX 78759</td>
<td>20-1014851</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE ACCELERATION PROJECT INC PO BOX 335 SCARSDALE, NY 10583</td>
<td>46-0762002</td>
<td>501 (C) 3</td>
<td>6,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ACCESS FUND PO BOX 17010 BOULDER, CO 80308</td>
<td>94-3131165</td>
<td>501 (C) 3</td>
<td>12,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE ACCESS PROJECT INC PO BOX 641050 SAN FRANCISCO, CA 94164</td>
<td>81-4129048</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ACTORS FUND OF AMERICA 729 7TH AVE # 10TH NEW YORK, NY 10019</td>
<td>13-1635251</td>
<td>501 (C) 3</td>
<td>218,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ADMINISTRATORS OF THE TULANE EDUCATIONA 6923 ST CHARLES AVE NEW ORLEANS, LA 70118</td>
<td>72-0423889</td>
<td>501 (C) 3</td>
<td>1,154,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AFRICAN AMERICAN ART AND CULTURE COMPL 762 FULTON ST SAN FRANCISCO, CA 94102</td>
<td>20-0118582</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE AGAINST MALARIA FOUNDATION 301 W 20TH ST STE 300 KANSAS CITY, MO 64108</td>
<td>20-3069841</td>
<td>501 (C) 3</td>
<td>2,006,732.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ALAMEDA COUNTY COMMUNITY FOOD BANK INC PO BOX 2599 OAKLAND, CA 94614</td>
<td>94-2960297</td>
<td>501 (C) 3</td>
<td>620,778.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ALEXANDER HAMILTON SOCIETY 10TH FLOOR WASHINGTON, DC 20009</td>
<td>27-2035244</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
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<th>General Information on Grants and Assistance</th>
</tr>
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<tr>
<td>1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
<td>Yes [X] No</td>
</tr>
<tr>
<td>2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Grants and Other Assistance to Domestic Organizations and Domestic Governments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.</td>
<td></td>
</tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THE ALL-AMERICAN BOYS CHORUS</td>
<td>1801 E EDINGER AVE STE 210 SANTA ANA, CA 92</td>
<td>23-7376151</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ALLIANCE FOR CLIMATE PROTECTION</td>
<td>555 11TH ST NW STE 601 WASHINGTON, DC 20004</td>
<td>87-0745629</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ALLIANCE FOR MEDIA ARTS – CULTURE INC</td>
<td>1919 S STRINGA RD SPOKANE, WA 99203</td>
<td>12-3046606</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE ALLIANCE NORTHWEST DISTRICT OF THE CHRI</td>
<td>7505 NE AMBASSADOR PL STE K PORTLAND, OR 97</td>
<td>93-0461947</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMBROSE SCHOOL INC</td>
<td>6100 N LOCUST GROVE RD MERIDIAN, ID 83646</td>
<td>82-0483624</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMDG FOUNDATION</td>
<td>1025 W FRY ST CHICAGO, IL 60642</td>
<td>36-4038525</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMERICAN CATHEDRAL IN PARIS FOUNDATION</td>
<td>599 LEXINGTON AVE NEW YORK, NY 10022</td>
<td>52-1381603</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMERICAN CHESTNUT FOUNDATION</td>
<td>50 N MERRIMON AVE UNIT 115 ASHEVILLE, NC 28</td>
<td>41-1483019</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMERICAN CLASSICAL ORCHESTRA INC</td>
<td>522 WEST END AVENUE NEW YORK, NY 10024</td>
<td>06-1072470</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMERICAN FRIENDS OF BEIT ISHIE SHAPIRO</td>
<td>25 WEST 45TH ST NEW YORK, NY 10036</td>
<td>13-3343781</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE AMERICAN FRIENDS OF MIGDAL OH</td>
<td>1325 AVENUE OF THE AMERICAS NEW YORK, NY 10</td>
<td>13-3389558</td>
<td>501 (C) 3</td>
<td>74,600.</td>
<td>FMV</td>
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<tr>
<td>THE AMERICAN IRELAND FUND</td>
<td>10 POST OFFICE SQ STE 1205 BOSTON, MA 2109</td>
<td>25-1306992</td>
<td>501 (C) 3</td>
<td>157,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

![Image of Form 990 Schedule I](https://example.com/image.png)
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>5 (e) Amount of non-cash assistance</th>
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<th>8 (h) Purpose of grant or assistance</th>
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<tr>
<td>THE AMERICAN ONCOLOGIC HOSPITAL</td>
<td>23-1352156</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>333 COTTMAN AVE PHILADELPHIA, PA 19111</td>
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<td>THE ANDERSON HILLS UNITED METHODIST CHURCH</td>
<td>31-0630438</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>7515 FOREST RD CINCINNATI, OH 45255</td>
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<tr>
<td>THE ANDREW GOODMAN FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10 MOUNTAINVIEW RD STE 2215 UPPER SADDLE RI</td>
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<tr>
<td>THE ANGELICAN RELIEF AND DEVELOPMENT FUND</td>
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<td>800 MAPLEWOOD AVE AMBRIDGE, PA 15003</td>
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<td>THE ANIMAL MEDICAL CENTER</td>
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<td>THE ARC OF CHESTER COUNTY</td>
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<td>8,000.</td>
<td>FMV</td>
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<td>900 LAWRENCE DR WEST CHESTER, PA 19380</td>
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<td>THE ARC OF TEXAS</td>
<td>74-1342667</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>8001 CENTRE PARK DR STE 100 AUSTIN, TX 7875</td>
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<td>THE ARK</td>
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<td>42,800.</td>
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<td>6450 N CALIFORNIA AVE CHICAGO, IL 60645</td>
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<td>150,000.</td>
<td>FMV</td>
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<td>216 FORT WASHINGTON AVE NEW YORK, NY 10032</td>
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<tr>
<td>THE ARTS AND RECREATION FOUNDATION OF OVERL</td>
<td>48-1171599</td>
<td>501 (C) 3</td>
<td>67,925.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 26392 OVERLAND PARK, KS 66225</td>
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<tr>
<td>THE ARTS CAMPUS AT WILLITS</td>
<td>47-3091347</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>360 MARKET ST BASALT, CO 81621</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THE ARTS CONNECTION INC</td>
<td>47-3091347</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>520 8TH AVE RM 321 NEW YORK, NY 10018</td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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

Schedule I (Form 990) 2020
**SCHEDULE I**
*(Form 990)*

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>THE ASPEN INSTITUTE INC</td>
<td>84-0399006</td>
<td>501 (C) 3</td>
<td>72,750</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>THE ASPERGER-AUTISM NETWORK INC</td>
<td>04-3376227</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>THE ASSEMBLY AT BROKEN ARROW</td>
<td>72-6066616</td>
<td>501 (C) 3</td>
<td>24,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>THE ASSOCIATION FOR FRONTOTEMPORAL DEGENEREA</td>
<td>41-2073220</td>
<td>501 (C) 3</td>
<td>19,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>5</td>
<td>THE ATLANTA OPERA INC</td>
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<td>FMV</td>
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<td>6</td>
<td>THE AUSTIN STONE COMMUNITY CHURCH</td>
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<td>FMV</td>
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<td>7</td>
<td>THE BACKSTOPPERS INC</td>
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<td>N/A</td>
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<tr>
<td>8</td>
<td>THE BALA HOUSE</td>
<td>23-1720026</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THE BAPTIST CHILDRENS VILLAGE</td>
<td>64-0317257</td>
<td>501 (C) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>THE BAPTIST COLLEGE OF FLORIDA</td>
<td>59-0799893</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11</td>
<td>THE BARACK OBAMA FOUNDATION</td>
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<td>FMV</td>
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<tr>
<td>12</td>
<td>THE BARN FOR THE POOREST OF THE POOR INC</td>
<td>22-3146403</td>
<td>501 (C) 3</td>
<td>5,750</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020

JSA

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</tbody>
</table>

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>THE BARUCH COLLEGE FUND</td>
<td>23-7039817</td>
<td>501 (C) 3</td>
<td>217,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BASCOM CORPORATION</td>
<td>56-2093546</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BASILICA OF SAINT JOHN THE EVANGELIST</td>
<td>26-6053126</td>
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<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BASILICA OF SAINT MARY</td>
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<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BAY VILLAGE FOUNDATION</td>
<td>34-1801638</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE BAYLOR SCHOOL</td>
<td>62-0126365</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE BEACON OF DOWNTOWN HOUSTON</td>
<td>71-0933434</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BEN DAVIS OUTDOOR INITIATIVE</td>
<td>85-2717478</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BERKSHIRE TACONIC COMMUNITY FOUNDATION</td>
<td>06-1254469</td>
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<td>THE BESSEMER GIVING FUND</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE BETHANY EVANGELICAL FREE CHURCH OF LITT</td>
<td>84-0529898</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE BHUTAN FOUNDATION</td>
<td>21 DUPONT CIRCLE NW SUITE 755 WASHINGTON, D</td>
<td>501 (C) 3</td>
<td>82,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.

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**Part I**  
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) THE BI-CULTURAL HEBREW ACADEMY OF CONNECTIC</td>
<td>2186</td>
<td>06-0731793</td>
<td>501 (C) 3</td>
<td>21,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(2) THE BICYCLE ALLIANCE OF MINNESOTA</td>
<td>214</td>
<td>41-1719332</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(3) THE BIOME</td>
<td>4471</td>
<td>47-1100460</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
</tr>
<tr>
<td>(4) THE BISON CHILDREN SCHOLARSHIP FUND INC</td>
<td>284</td>
<td>16-1477288</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(5) THE BLACKBAUD GIVING FUND</td>
<td>2000</td>
<td>46-0942102</td>
<td>501 (C) 3</td>
<td>40,049.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>(6) THE BLOEDEL RESERVE</td>
<td>7571</td>
<td>91-6182786</td>
<td>501 (C) 3</td>
<td>35,000.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>(7) THE BLOOMSBURG UNIVERSITY FOUNDATION INC</td>
<td>50</td>
<td>23-7088491</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(8) THE BOARD OF GOVERNORS</td>
<td>5700</td>
<td>38-6028429</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(9) THE BOARD OF TRUSTEES OF THE LELAND STANFOR</td>
<td>485</td>
<td>94-1156365</td>
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<td>17,063,223.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(10) THE BOARDERS AND STEWARDS OF THE MONASTERY</td>
<td>PO BOX</td>
<td>23-2802733</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(11) THE BOGGY CREEK GANG INC</td>
<td>30500</td>
<td>59-3012889</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>(12) THE BOMA PROJECT INC</td>
<td>PO BOX</td>
<td>84-1671995</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .

3. Enter total number of other organizations listed in the line 1 table .

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No 

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) THE BOSTON JEWISH CENTER INC</td>
<td>146 MARLBOROUGH ST APT 4 BOSTON, MA 2116</td>
<td>27-5410470</td>
<td>501 (c) 3</td>
<td>18,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2) THE BOYS &amp; GIRLS CLUB OF BURBANK AND GREATS</td>
<td>300 E ANGELENO AVE BURBANK, CA 91502</td>
<td>95-4885745</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3) THE BOYS AND GIRLS CLUBS OF SAN DIEGUITO</td>
<td>1221 ENCINITAS BLVD ENCINITAS, CA 92024</td>
<td>95-2470435</td>
<td>501 (c) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4) THE BOYS SCHOOL OF SAINT PAULS PARISH INC</td>
<td>11152 FALLS RD BROOKLANDVILLE, MD 21022</td>
<td>52-0591463</td>
<td>501 (c) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5) THE BRAIN DONOR PROJECT</td>
<td>PO BOX 11102 NAPLES, FL 34108</td>
<td>81-2333601</td>
<td>501 (c) 3</td>
<td>50,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6) THE BRAIN TUMOR NETWORK INC</td>
<td>816 A1A N STE 201 FONTE VEDRA BEACH, FL 320</td>
<td>46-3339186</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7) THE BRANCH OF NASHVILLE</td>
<td>41 TUSCULUM ROAD ANTIOCH, TN 37013</td>
<td>46-3153789</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>8) THE BRANSON SCHOOL</td>
<td>39 FERNHILL AVE B87 ROSS, CA 94957</td>
<td>94-0338330</td>
<td>501 (c) 3</td>
<td>116,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9) THE BREAKTHROUGH COLLABORATIVE INC</td>
<td>PO BOX 71420 OAKLAND, CA 94612</td>
<td>94-3140620</td>
<td>501 (c) 3</td>
<td>20,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10) THE BREAKTHROUGH INSTITUTE</td>
<td>191 MORAGA WAY ORINDA, CA 94563</td>
<td>81-4526660</td>
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<td>50,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11) THE BREATHING ROOM FOUNDATION</td>
<td>600 WEST AVE JENKINTOWN, PA 19046</td>
<td>23-2916337</td>
<td>501 (c) 3</td>
<td>53,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12) THE BRICK MINISTRIES INC</td>
<td>420 ELLIS AVE ASHLAND, WI 54806</td>
<td>61-1536545</td>
<td>501 (c) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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# SCHEDULE I
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) THE BRICK PRESBYTERIAN CHURCH</td>
<td>13-5562386</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>62 E 92ND ST NEW YORK, NY 10128</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(2) THE BRIDGE COMMUNITY</td>
<td>27-2097449</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1284 W 75 N CENTERVILLE, UT 84014</td>
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<td>(3) THE BRIDGE FOR YOUTH</td>
<td>41-0983062</td>
<td>501 (C) 3</td>
<td>5,700.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>1111 W 22ND ST MINNEAPOLIS, MN 55405</td>
<td></td>
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<tr>
<td>(4) THE BRONX COMMUNITY FOUNDATION INC</td>
<td>13-3277699</td>
<td>501 (C) 3</td>
<td>5,423.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2155 DR MARTIN L KING JR BLVD BRONX, NY 104</td>
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<td>(5) THE BRONX DOCUMENTARY CENTER</td>
<td>45-2403312</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>614 COURTLANDT AVE BRONX, NY 10451</td>
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<td></td>
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<tr>
<td>(6) THE BRONX HIGH SCHOOL OF SCIENCE ALUMNI FOU</td>
<td>13-3763299</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>75 BRONX SCIENCE BLVD BRONX, NY 10468</td>
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<tr>
<td>(7) THE BROOKLYN HOSPITAL CENTER</td>
<td>11-1630755</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>121 DEKALE AVE BROOKLYN, NY 11201</td>
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<tr>
<td>(8) THE BROOKLYN QUEENS CONSERVATORY OF MUSIC</td>
<td>11-1532426</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>58 7TH AVE BROOKLYN, NY 11217</td>
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<tr>
<td>(9) THE BROOKLYN TABERNACLE</td>
<td>11-2486379</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>17 SMITH ST BROOKLYN, NY 11201</td>
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<tr>
<td>(10) THE BROOKWOOD COMMUNITY INC</td>
<td>74-1587672</td>
<td>501 (C) 3</td>
<td>88,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1752 FM 1489 RD BROOKSHIRE, TX 77423</td>
<td></td>
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<tr>
<td>(11) THE BROTHERHOOD SISTER SOL INC</td>
<td>13-3857387</td>
<td>501 (C) 3</td>
<td>361,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>KHARY LAZARRE WHITE NEW YORK, NY 10031</td>
<td></td>
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<tr>
<td>(12) THE BUCK HILL CONSERVATION FOUNDATION</td>
<td>23-2676909</td>
<td>501 (C) 3</td>
<td>54,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 350 BUCK HILL FALLS, PA 18323</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>THE BUCKEYE INSTITUTE 88 E BROAD ST STE 1300 COLUMBUS, OH 43215</td>
<td>31-1278593</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE CALIFORNIA 4-H FOUNDATION 2801 2ND ST DAVIS, CA 95618</td>
<td>23-7327765</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE CAMDEN CHILDRENS HOUSE MONTESSORI SCHOO 58 ELM ST CAMDEN, ME 4843</td>
<td>01-0467754</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE CAMPAIGN AGAINST HUNGER INC 2010 FULTON STREET BROOKLYN, NY 11233</td>
<td>20-0934854</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>THE CAPITAL GOOD FUND 22 A ST PROVIDENCE, RI 2907</td>
<td>80-0348382</td>
<td>501 (C) 3</td>
<td>600,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>THE CARING HOUSE PROJECT INC PO BOX 388 BOYNTON BEACH, FL 33425</td>
<td>71-0865799</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>THE CARL SCHURZ PARK CONSERVANCY INC 1483 YORK AVE NO 20523 NEW YORK, NY 10075</td>
<td>23-7048251</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>THE CARNegie HALL CORPORATION 801 7TH AVE NEW YORK, NY 10019</td>
<td>13-1923626</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>THE CARTER CENTER INC 453 JOHN LEWIS FREEDOM PKWY NE ATLANTA, GA</td>
<td>58-1454716</td>
<td>501 (C) 3</td>
<td>357,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE CATHEDRAL BASILICA OF ST. AUGUSTINE 35 TREASURY ST SAINT AUGUSTINE, FL 32084</td>
<td>59-0641391</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THE CATHOLIC CHARITIES FOOD BANK OF THE SOU 388 UPPER OAKWOOD AVE ELMIRA, NY 14903</td>
<td>20-8808059</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE CATHOLIC COMMUNITY OF ST THOMAS MORE 940 CARMICHAEL ST CHAPEL HILL, NC 27514</td>
<td>56-6020192</td>
<td>501 (C) 3</td>
<td>38,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
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Schedule I (Form 990) 2020
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THE CATHOLIC FOUNDATION OF CENTRAL FLORIDA</td>
<td>26-0879378</td>
<td>501 (c) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>100 N 20TH ST PHILADELPHIA, PA 19103</td>
<td>46-1566557</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>THE CAUSE INC</td>
<td>06-1670270</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CEDARS OF MARIN</td>
<td>94-1606518</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR ADVANCED DEFENSE STUDIES INC</td>
<td>73-1681366</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR COMMUNITY SOLUTIONS</td>
<td>1501 EUCLID AVE STE 310 CLEVELAND, OH 44115</td>
<td>501 (c) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR CULTURAL INNOVATION</td>
<td>244 S SAN PEDRO ST STE 401 LOS ANGELES, CA</td>
<td>501 (c) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR INVESTIGATIVE REPORTING INC</td>
<td>1400 65TH ST STE 200 EMERYVILLE, CA 94608</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR MEDICAL PROGRESS</td>
<td>15333 CULVER DR STE 340 # 819 IRVINE, CA 92</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTER FOR THE PERFORMING ARTS INC</td>
<td>1 CARTER GRN CARMEL, IN 46232</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTRAL INDIANA POLICE FOUNDATION INC</td>
<td>1525 SHELBY ST INDIANAPOLIS, IN 46203</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CENTRAL SCHOLARSHIP BUREAU INC</td>
<td>6 PARK CENTER CT STE 211 OWINGS MILLS, MD 2</td>
<td>501 (c) 3</td>
<td>272,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Schedule I (Form 990) 2020
# SCHEDULE I

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| THE CHAMBER FOUNDATION INC  

1 CIVIC CENTER PLZ STE 400 POUGHKEEPSIE, NY  

46-0476778 501 (C) 3  

11,000.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHANDA PLAN FOUNDATION  

1630 CARR ST LAKEWOOD, CO 80214  

20-4358964 501 (C) 3  

5,500.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHAPEL OF LAKE COUNTY  

1200 AMERICAN WAY LIBERTYVILLE, IL 60048  

36-3963071 501 (C) 3  

70,800.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHARLES RIVER SCHOOL  

PO BOX 339 DOVER, MA 2030  

04-2103974 501 (C) 3  

40,000.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHICAGO COMMUNITY TRUST  

225 N MICHIGAN AVE STE 2200 CHICAGO, IL 606  

36-2167000 501 (C) 3  

31,000.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHICAGO LIGHTHOUSE FOR PEOPLE WHO ARE B  

1850 W ROOSEVELT RD CHICAGO, IL 60608  

36-2169139 501 (C) 3  

35,000.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS AID SOCIETY  

117 WEST 124TH STREET 4TH FLOOR NEW YORK, N  

13-5562191 501 (C) 3  

88,464.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS HEART FOUNDATION  

PO BOX 244 LINCOLNSHIRE, IL 60069  

36-4077528 501 (C) 3  

26,500.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS HOME SOCIETY OF MISSOURI  

1167 CORPORATE LAKE DR SAINT LOUIS, MO 6313  

43-0652622 501 (C) 3  

7,500.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS HOSPITAL OF PHILADELPHIA  

3401 CIVIC CENTER BLVD PHILADELPHIA, PA 191  

23-1352166 501 (C) 3  

50,500.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS HOSPITAL OF PHILADELPHIA FOUN  

3401 CIVIC CENTER BLVD PHILADELPHIA, PA 191  

23-2237932 501 (C) 3  

1,474,464.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |
| THE CHILDRENS SCHOLARSHIP FUND  

8 W 38TH ST FL 9 NEW YORK, NY 10018  

13-4002189 501 (C) 3  

873,500.  

FMV  

N/A  

FOR RECIPIENT'S EXEM |

---

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE CHRISTIAN BROTHERS INSTITUTE OF MICHIGA</td>
<td>7101 LAHSER RD BLOOMFIELD HILLS, MI 48301</td>
<td>38-1647300</td>
<td>501 (C) 3</td>
<td>401,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE CHRISTIAN CENTURY</td>
<td>104 S MICHIGAN AVE STE 1100 CHICAGO, IL 606</td>
<td>36-2176022</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>THE CHRYSALIS CENTER</td>
<td>522 S MAIN ST LOS ANGELES, CA 90013</td>
<td>95-3972624</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THE CHRYSLER MUSEUM INC</td>
<td>1 MEMORIAL PL NORFOLK, VA 23510</td>
<td>51-0243196</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE CHURCH AT BROOK HILLS</td>
<td>3145 BROOK HIGHLAND PKWY BIRMINGHAM, AL 352</td>
<td>63-1015317</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>THE CHURCH AT LIFEPARK</td>
<td>1151 GEORGE BROWDER BLVD MOUNT PLEASANT, SC</td>
<td>47-1094917</td>
<td>501 (C) 3</td>
<td>53,543.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THE CHURCH OF OUR LADY STAR OF THE MOUNTAIN</td>
<td>520 LAFAYETTE ST CAPE MAY, NJ 8204</td>
<td>21-0635002</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE CHURCH OF OUR LADY STAR OF THE MOUNTAIN</td>
<td>50 E NORTH TEMPLE SALT LAKE CITY, UT 84150</td>
<td>23-7300405</td>
<td>501 (C) 3</td>
<td>4,123,100.</td>
<td>FMV</td>
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<td>9</td>
<td>THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS</td>
<td>50 E NORTH TEMPLE SALT LAKE CITY, UT 84150</td>
<td>87-0234341</td>
<td>501 (C) 3</td>
<td>1,367,057.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE CHURCH OF SAINT JOHN THE BAPTIST OF JORDAN</td>
<td>313 2ND ST E JORDAN, MN 55352</td>
<td>41-0713019</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THE CHURCH OF SAINT THERESE OF DEEPHAVEN</td>
<td>2450 RIVER OAKS BLVD HOUSTON, TX 77019</td>
<td>74-1222250</td>
<td>501 (C) 3</td>
<td>231,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>THE CHURCH OF ST. THERESE OF DEEPHAVEN</td>
<td>18323 MINSNETOKA BLVD WAYZATA, MN 55391</td>
<td>41-0790147</td>
<td>501 (C) 3</td>
<td>10,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>THE CHURCH OF THE APOSTLES</td>
<td>3585 NORTHSIDE PKWY NW ATLANTA, GA 30327 58-1962814 501 (C) 3 85,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH OF THE CROSSINGS INC</td>
<td>1016 FM 1463 RD KATY, TX 77494 26-0631551 501 (C) 3 7,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH OF THE GOOD SHEPHERD - LEXINGTON</td>
<td>533 EAST MAIN STREET LEXINGTON, KY 40508 61-0503706 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH OF THE HEAVENLY REST</td>
<td>1085 FIFTH AVE NEW YORK, NY 10128 13-5596875 501 (C) 3 16,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CHURCH OF THE HOLY COMFORTER</td>
<td>130 W SEMINARY AVE LUTHERVILLE TIMONIUM, MD 52-1278299 501 (C) 3 19,333. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH OF THE LARGER FELLOWSHIP UNITARI</td>
<td>24 FARNSWORTH ST BOSTON, MA 2210 82-4150286 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH OF THE LITTLE FLOWER</td>
<td>110 ROOSEVELT AVE BERKELEY HEIGHTS, NJ 7922 22-1601247 501 (C) 3 31,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CHURCH ON THE CORNER</td>
<td>1319 SOLANO AVE ALBANY, CA 94706 94-6085122 501 (C) 3 7,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CITIZENS FOUNDATION USA</td>
<td>9494 SOUTHWEST Fwy STE 620 HOUSTON, TX 7707 41-2046295 501 (C) 3 121,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CITY COLLEGE 21ST CENTURY FOUNDATION IN</td>
<td>160 CONVENT AVE NEW YORK, NY 10031 13-3850823 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE CITY SCHOOL</td>
<td>4115 BALTIMORE AVE PHILADELPHIA, PA 19104 23-2073123 501 (C) 3 109,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE CITY UNIVERSITY OF NEW YORK SCHOOL OF L</td>
<td>2 COURT SQ LONG ISLAND CITY, NY 11101 11-3235349 501 (C) 3 8,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1</td>
<td>THE CIVILIANS INC 138 S OXFORD ST STE 3C BROOKLYN, NY 11217</td>
<td>11-3621605</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>THE CLEAR FUND 1714 FRANKLIN ST # 100335 OAKLAND, CA 94612</td>
<td>20-8625442</td>
<td>501 (C) 3</td>
<td>8,803,352.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE CLEARWATER CONSERVANCY OF CENTRAL PENNS 2555 N ATHERTON ST STATE COLLEGE, PA 16803</td>
<td>25-1413990</td>
<td>501 (C) 3</td>
<td>564,219.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE CLEVELAND CLINIC FOUNDATION 6801 BRECKSVILLE RD STE RK1-85 INDEPENDENCE</td>
<td>34-0714585</td>
<td>501 (C) 3</td>
<td>169,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>THE CLIFTON INSTITUTE INC 6712 BLANTYRE RD WARRENTON, VA 20187</td>
<td>52-1413042</td>
<td>501 (C) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>THE CLIMATE CENTER PO BOX 3785 SANTA ROSA, CA 95402</td>
<td>45-0485495</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THE COLBURN SCHOOL 200 S GRAND AVE LOS ANGELES, CA 90012</td>
<td>95-2501387</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE COLLECTIVE THREAD 1310 WASHINGTON AVE SAINT LOUIS, MO 63103</td>
<td>27-1334567</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THE COLLEGE OF IDAHO INC 2112 CLEVELAND BLVD CALDWELL, ID 83605</td>
<td>82-0200906</td>
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<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE COLLEGE OF NEW JERSEY FOUNDATION INC PO BOX 7718 TRENTON, NJ 8628</td>
<td>22-2448189</td>
<td>501 (C) 3</td>
<td>7,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THE COLSON CENTER FOR CHRISTIAN WORLDVIEW PO BOX 62160 COLORADO SPRINGS, CO 80962</td>
<td>90-1117779</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>THE COMMITTEE OF 200 65 E WACKER PL STE 510 CHICAGO, IL 60601</td>
<td>43-1438051</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>THE COMMON GOOD INC PO BOX 35732 TULSA, OK 74153</td>
<td>82-4458593</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMON GOOD INSTITUTE INC PO BOX 8536 NEW YORK, NY 10150</td>
<td>13-3859811</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMON PLACE 125 E LANCASTER AVE WAYNE, PA 19087</td>
<td>47-2143184</td>
<td>501 (C) 3</td>
<td>33,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE COMMUNITY FDN OF MIDDLE TN INC 3833 CLEGHORN AVE NASHVILLE, TN 37215</td>
<td>62-1471789</td>
<td>501 (C) 3</td>
<td>33,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATIO LOUISVILLE DEPOS 325 W MAIN ST STE 1110 LOUISVILLE, KY 40202</td>
<td>31-1140889</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION 1123 SPRUCE ST BOULDER, CO 80302</td>
<td>84-1171836</td>
<td>501 (C) 3</td>
<td>59,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION FOR NORTHEAST FLOR 245 RIVERSIDE AVE STE 310 JACKSONVILLE, FL</td>
<td>59-6150746</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION FOR THE GREATER CA 120 TOWER PL ALBANY, NY 12203</td>
<td>14-1505623</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION INC 7501 BOULDER DR SUITE 110 RICHMOND, VA 232</td>
<td>23-7009135</td>
<td>501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION OF LOUISVILLE INC 325 W MAIN ST STE 1110 LOUISVILLE, KY 40202</td>
<td>31-0997017</td>
<td>501 (C) 3</td>
<td>14,162.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION OF SOUTHERN NEW ME 2600 EL PASO RD LAB CRUCES, NM 88001</td>
<td>85-0455682</td>
<td>501 (C) 3</td>
<td>49,599.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE COMMUNITY FOUNDATION OF THE TEXAS HILL 241 EARL GARRETT ST KERRVILLE, TX 78028</td>
<td>74-2225369</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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Schedule I (Form 990) 2020
**SCHEDULE I**
*(Form 990)*

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   ![Yes/No]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1</td>
<td>THE COMMUNITY FOUNDATION OF WESTERN NORTH C</td>
<td>4 VANDERBILT PARK DR STE 300 ASHEVILLE, NC</td>
<td>56-1223384</td>
<td>501 (c) 3</td>
<td>9,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>2</td>
<td>THE COMMUNITY FUND OF DARIEN</td>
<td>PO BOX 926 DARIEN, CT 6820</td>
<td>06-0737286</td>
<td>501 (c) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>THE COMMUNITYS FOUNDATION</td>
<td>900 W SPROUL RD STE 101 SPRINGFIELD, PA 190</td>
<td>22-2354770</td>
<td>501 (c) 3</td>
<td>6,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>4</td>
<td>THE COMPASS EVANGELICAL FREE CHURCH</td>
<td>1551 HOBSON RD NAPERVILLE, IL 60540</td>
<td>36-3256985</td>
<td>501 (c) 3</td>
<td>32,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>5</td>
<td>THE COMPASSIONATE FRIENDS INC</td>
<td>PO BOX 700 JENSEN BEACH, FL 34958</td>
<td>36-2968329</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>THE CONCORD COMMUNITY MUSIC SCHOOL</td>
<td>23 WALL ST CONCORD, NH 3301</td>
<td>22-2552850</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>7</td>
<td>THE CONNECTICUT AUDUBON SOCIETY INCORPORATE</td>
<td>314 UNQUWA RD FAIRFIELD, CT 6824</td>
<td>06-0653531</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>THE CONNECTICUT KOREAN PRESBYTERIAN</td>
<td>305 SAINT RONAN ST NEW HAVEN, CT 6511</td>
<td>06-1143992</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>THE CONSERVANCY OF SOUTHWEST FLORIDA INC</td>
<td>1495 SMITH PRESERVE WAY NAPLES, FL 34102</td>
<td>59-1157084</td>
<td>501 (c) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>THE CONSERVATION FUND A NONPROFIT CORPORATI</td>
<td>1655 FORT MYER DR ARLINGTON, VA 22209</td>
<td>52-1388917</td>
<td>501 (c) 3</td>
<td>107,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THE CONSERVATIVE SYNAGOGUE INC</td>
<td>30 HILLSPOINTE WESTPORT, CT 6880</td>
<td>06-1203591</td>
<td>501 (c) 3</td>
<td>27,110.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE CONTINGENT</td>
<td>809 N RUSSELL ST PORTLAND, OR 97227</td>
<td>26-4224606</td>
<td>501 (c) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE CONVENT AND ACADEMY OF THE VISITATION 2455 VISITATION DR SAINT PAUL, MN 55120</td>
<td>41-0693957</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE CORNERSTONE CHRISTIAN ACADEMY 1939 S 58TH ST PHILADELPHIA, PA 19143</td>
<td>23-2499985</td>
<td>501 (C) 3</td>
<td>53,180.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>THE CORNING MUSEUM OF GLASS 1 MUSEUM WAY CORNING, NY 14830</td>
<td>16-0764349</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE CORPORATION FOR JEFFERSONS POPLAR FOREST PO BOX 419 FOREST, VA 24551</td>
<td>54-1258296</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE CROSSING A CHRISTIAN CHURCH 7950 W WINDMILL LN LAS VEGAS, NV 89113</td>
<td>88-0469886</td>
<td>501 (C) 3</td>
<td>144,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>THE CROSSNORE SCHOOL &amp; CHILDREN'S HOME</td>
<td>56-0567980</td>
<td>501 (C) 3</td>
<td>43,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>THE CROSROADS CAMPUS</td>
<td>27-2397528</td>
<td>501 (C) 3</td>
<td>150,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>THE CRYSTAL CHARITY HALL</td>
<td>75-6035893</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THE DARLIA SCHOOL</td>
<td>85-4368914</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE DAVID SHELDRICK WILDLIFE TRUST USA INC</td>
<td>30-0224549</td>
<td>501 (C) 3</td>
<td>69,450.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>THE DAWN REDWOODS CHARITABLE TRUST</td>
<td>94-2919572</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THE DEE NORTON LOWCOUNTRY CHILDREN'S CENTER</td>
<td>57-0905724</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE DENVER HEALTH AND HOSPITALS FOUNDATION</td>
<td>84-1085196</td>
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<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>THE DETROIT INSTITUTE OF ARTS</td>
<td>38-1359510</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE DIAN FOSSEY GORILLA FUND INTERNATIONAL</td>
<td>52-1118866</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THE DIOCESE OF CAMDEN NEW JERSEY</td>
<td>21-0634498</td>
<td>501 (C) 3</td>
<td>23,225.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE DIOCESE OF MONTEREY PARISH AND SCHOOL O</td>
<td>94-1658139</td>
<td>501 (C) 3</td>
<td>761,365.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: __________.  
3. Enter total number of other organizations listed in the line 1 table: __________.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

#### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. X Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td><strong>THE DOMINICAN FOUNDATION OF DOMINICAN FRIAR</strong></td>
<td>141 E 65TH ST NEW YORK, NY 10065</td>
<td>26-3273636</td>
<td>501 (C) 3</td>
<td>50,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE DOOR – A CENTER OF ALTERNATIVES INC</strong></td>
<td>121 AVE OF THE AMER SUITE 556 NEW YORK, NY</td>
<td>13-6127348</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE DREAM CENTER OF PEORIA NFP</strong></td>
<td>714 HAMILTON BLVD PEORIA, IL 61603</td>
<td>52-2376242</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE DREAM PROGRAM INC</strong></td>
<td>PO BOX 361 MISOOGSKI, VT 5404</td>
<td>26-0030908</td>
<td>501 (C) 3</td>
<td>27,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE DUNHUANG FOUNDATION INC</strong></td>
<td>2000 BERING DR STE 108 HOUSTON, TX 77057</td>
<td>27-4503406</td>
<td>501 (C) 3</td>
<td>125,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td><strong>THE DWELLING PLACE OF N Y INC</strong></td>
<td>409 W 40TH ST NEW YORK, NY 10018</td>
<td>13-3135424</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE EAGLE ACADEMY FOUNDATION INC</strong></td>
<td>31 WEST 125TH ST NEW YORK, NY 10027</td>
<td>20-1532382</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE EASTERN PENNSYLVANIA CHAPTER OF THE NAT</strong></td>
<td>1489 BALTIMORE PIKE STE 227 SPRINGFIELD, PA</td>
<td>23-1567876</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE EDIBLE SCHOOLYARD PROJECT</strong></td>
<td>1517 SHATTUCK AVE BERKELEY, CA 94709</td>
<td>94-3248671</td>
<td>501 (C) 3</td>
<td>38,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE EDUCATION FOUNDATION OF ALACHUA COUNTY</strong></td>
<td>2802 NE 8TH AVE GAINESVILLE, FL 32641</td>
<td>59-2751952</td>
<td>501 (C) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>THE EDUCATION FOUNDATION OF COLLIER COUNTY</strong></td>
<td>3606 ENTERPRISE AVE STE 150 NAPLES, FL 3410</td>
<td>65-0230582</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>THE EHLERS-DANLOS SOCIETY</strong></td>
<td>1732 1ST AVE PMB 20373 NEW YORK, NY 10128</td>
<td>38-2813140</td>
<td>501 (C) 3</td>
<td>290,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Attach to Form 990.

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(f) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE ELEPHANT SANCTUARY IN TENNESSEE</td>
<td>62-1587327</td>
<td>501 (C) 3</td>
<td>16,583. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 393 HOKENWALD, TN 38462</td>
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<tr>
<td>THE ELLIE FUND</td>
<td>04-3280390</td>
<td>501 (C) 3</td>
<td>11,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>200 RESERVOIR ST STE 300 NEEDHAM HEIGHTS, M</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THE EMMA ALYSON &amp; KATE HANCE FAMILY FOUNDATION</td>
<td>27-0752188</td>
<td>501 (C) 3</td>
<td>6,500. FMV</td>
<td>N/A</td>
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<tr>
<td>165 PLAINFIELD AVE ELMONT, NY 11003</td>
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<tr>
<td>THE EMMANUEL CANCER FOUNDATION INC</td>
<td>22-2459774</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>77 BRANT AVE CLARK, NJ 7066</td>
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<tr>
<td>THE ENRICHMENT CENTER AN AFFILIATED CHAPTER</td>
<td>56-1481122</td>
<td>501 (C) 3</td>
<td>100,000. FMV</td>
<td>N/A</td>
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<td>1006 S MARSHALL ST WINSTON SALEM, NC 27101</td>
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<td>THE EPISCOPAL CHURCH OF SAINT MARY'S</td>
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<td>8,500. FMV</td>
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<td>43 FORESIDE RD PALMOUTH, ME 4105</td>
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<td>THE EPISCOPAL CHURCH OF THE ASCENSION</td>
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<td>501 (C) 3</td>
<td>17,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>800 SOUTH NORTHSHORE DRIVE KNOXVILLE, TN 37</td>
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<tr>
<td>THE EPISCOPAL CHURCH OF THE GOOD SHEPHERD</td>
<td>54-0506453</td>
<td>501 (C) 3</td>
<td>1,600,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7400 HAMPTON BOULEVARD NORFOLK, VA 23505</td>
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<tr>
<td>THE EPISCOPAL CHURCH OF THE GOOD SHEPHERD</td>
<td>74-1238449</td>
<td>501 (C) 3</td>
<td>22,600. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 5176 AUSTIN, TX 78763</td>
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<td>THE EPISCOPAL PARISH OF ST. JOHN THE EVANGELIST</td>
<td>23-2742921</td>
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<td>10,900. FMV</td>
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<tr>
<td>172 MAIN ST HINGHAM, MA 2043</td>
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<td>THE KETZ CHAIN CENTER FOR JEWISH STUDIES</td>
<td>41-0721672</td>
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<td>315 CYNWYD RD BALA CYNWYD, PA 19004</td>
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<td>THE EVANGELICAL FREE CHURCH OF AMERICA</td>
<td>315 CYNWYD RD BALA CYNWYD, PA 19004</td>
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<td>10,900. FMV</td>
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<tr>
<td>901 E 78TH ST BLOOMINGTON, MN 55420</td>
<td></td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

2  Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020

JSA
0E1288 1.000

2020
Open to Public Inspection

OMB No. 1545-0047

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number 23-2888152
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a)</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE EVANGELICAL LUTHERAN CHURCH OF OUR SAVI</td>
<td>204 WAYNE AVE HADDONFIELD, NJ 08033</td>
<td>21-0725891</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>THE EVERGLADES FOUNDATION INC</td>
<td>18001 OLD CUTLER RD STE 625 PALMETTO BAY, FL</td>
<td>59-3228899</td>
<td>501 (C) 3</td>
<td>43,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>THE EXPLORATORIUM</td>
<td>100 PERU AVE # 17 SAN FRANCISCO, CA 94112</td>
<td>94-1696494</td>
<td>501 (C) 3</td>
<td>584,500.</td>
<td>FMV</td>
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<tr>
<td>4</td>
<td>THE FABRIC WORKSHOP AND MUSEUM</td>
<td>1214 ARCH ST PHILADELPHIA, PA 19107</td>
<td>23-2018929</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>5</td>
<td>THE FACIAL PAIN ASSOCIATION INC</td>
<td>22 SE 5TH AVE STE D GAINESVILLE, FL 32601</td>
<td>22-3071645</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>THE FAMILY PARTNERSHIP</td>
<td>1527 EAST LAKE STREET MINNEAPOLIS, MN 55407</td>
<td>41-0693858</td>
<td>501 (C) 3</td>
<td>15,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>7</td>
<td>THE FAMILY TREE INC</td>
<td>2108 N CHARLES ST BALTIMORE, MD 21218</td>
<td>52-1110645</td>
<td>501 (C) 3</td>
<td>32,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>8</td>
<td>THE FAMILY VIOLENCE PREVENTION CENTER INC</td>
<td>1012 OBERLIN RD STE 150 RALEIGH, NC 27605</td>
<td>58-1320613</td>
<td>501 (C) 3</td>
<td>12,612.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>9</td>
<td>THE FARM COLLABORATIVE</td>
<td>PO BOX 8064 ASPEN, CO 81612</td>
<td>26-3468420</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10</td>
<td>THE FARM SCHOOL INC</td>
<td>488 MOORE HILL RD ATHOL, MA 1331</td>
<td>22-2959081</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>11</td>
<td>THE FATHERS HOUSE</td>
<td>3333 VACA VALLEY PMY STE 800 VACAVILLE, CA</td>
<td>68-0408159</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12</td>
<td>THE FELLS</td>
<td>PO BOX 276 NEWBURY, NH 03255</td>
<td>04-3345078</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE FID GROUP</td>
<td>95-1644608</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE FILM COLLABORATIVE INC</td>
<td>32-0295081</td>
<td>501 (C) 3</td>
<td>57,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE FINGER LAKES LAND TRUST INC</td>
<td>22-2983688</td>
<td>501 (C) 3</td>
<td>710,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THE FIRST ACADEMY INC</td>
<td>20-3860569</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE FIRST COMMUNITY CHURCH</td>
<td>31-4383795</td>
<td>501 (C) 3</td>
<td>22,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>THE FISTULA FOUNDATION</td>
<td>1922 THE ALAMEDA STE 302 SAN JOSE, CA 95126</td>
<td>77-0547201</td>
<td>501 (C) 3</td>
<td>281,203.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THE FLAX TRUST</td>
<td>320 PARK AVE FRNT 4 NEW YORK, NY 10022</td>
<td>25-1482764</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>THE FLORIDA THEATRE PERFORMING ARTS</td>
<td>128 E FORSYTH ST JACKSONVILLE, FL 32202</td>
<td>59-2850579</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>THE FOOD BANK FOR CENTRAL &amp; NORTHEAST MISSIO</td>
<td>2101 VANDIVER DR STE B COLUMBIA, MO 65202</td>
<td>43-1238934</td>
<td>501 (C) 3</td>
<td>42,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE FOOD BANK OF NORTHERN NEVADA INC</td>
<td>550 ITALY DR SPARKS, NV 89437</td>
<td>94-2924979</td>
<td>501 (C) 3</td>
<td>138,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THE FOOD BANK OF THE GOLDEN CRESCENT</td>
<td>3809 E RIO GRANDE ST VICTORIA, TX 77901</td>
<td>74-2534561</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>THE FOOD BANK OF WESTERN MASSACHUSETTS INC</td>
<td>97 N HATFIELD RD HATFIELD, MA 1038</td>
<td>06-2751023</td>
<td>501 (C) 3</td>
<td>39,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

#### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>THE FOOD BASKET INC</td>
<td>26-0349475</td>
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<td>46,800</td>
<td>FMV</td>
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<td>40 HOLOMUA ST HILO, HI 96720</td>
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<tr>
<td>THE FOOD GROUP MINNESOTA INC</td>
<td>41-1246504</td>
<td>501 (C) 3</td>
<td>33,500</td>
<td>FMV</td>
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<td>8501 54TH AVE N MINNEAPOLIS, MN 55428</td>
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<td>THE FOOD TRUST</td>
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<td>1617 JOHN F KENNEDY BLVD STE 900 PHILADELPH</td>
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<td>THE FORESIGHT INSTITUTE</td>
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<td>THE FOREST STEWARDS GUILD</td>
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<td>06-0646648</td>
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<td>17,500</td>
<td>FMV</td>
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<td>THE FORT WAYNE RESCUE MISSION MINISTRIES IN</td>
<td>35-1054670</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
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<td>THE FORUM FOR URBAN DESIGN INC</td>
<td>11-3756463</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>114 BOWERY STE 301 NEW YORK, NY 10013</td>
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<td>THE FOUNDATION FOR AIDS RESEARCH</td>
<td>13-3163817</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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<tr>
<td>120 WALL ST FL 13 NEW YORK, NY 10005</td>
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<tr>
<td>THE FOUNDATION FOR COMMUNITY BLOOD CENTER C</td>
<td>20-5676673</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>349 S MAIN ST DAYTON, OH 45402</td>
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<td>THE FOUNDATION FOR DELAWARE COUNTY</td>
<td>22-2540853</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>200 E STATE STE STE 304 MEDIA, PA 19063</td>
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<tr>
<td>THE FOUNDATION FOR ENHANCING COMMUNITIES</td>
<td>01-0564355</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
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<tr>
<td>200 N 3RD STE STE 8 NARRISBURG, PA 17101</td>
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<td></td>
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</tbody>
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**SCHEDULE I**

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>THE FOUNDATION FOR LEE COUNTY PUBLIC SCHOOL PO BOX 1608 FORT MYERS, FL 33902</td>
<td>59-2637849</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FOUNDATION FOR NORTH AMERICA WILD SHEEP PO BOX 2528 CODY, WY 82414</td>
<td>42-1109229</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FOUNDATION FOR PERIPHERAL NEUROPATHY 485 E RALD DAY RD STE 200 BUFFALO GROVE, IL 60089</td>
<td>26-1195248</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FOUNDATION FOR POST-ACUTE AND LONG-TERM 10500 LITTLE PATUXENT PKWY STE 210 COLUMBIA, MD</td>
<td>52-1948720</td>
<td>501 (c) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THE FOUNDATION FOR RESEARCH ON EQUAL OPPORT</td>
<td>81-2699310</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FOUNDATION FOR SANTA BARBARA CITY COLLEGE 721 CLIFF OR SANTA BARBARA, CA 93109</td>
<td>95-3195655</td>
<td>501 (c) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE FOUNDATION OF THE ST ANDREWS SOCIETY OF 100 S BROAD ST PHILADELPHIA, PA 19110</td>
<td>23-6291406</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>THE FOUNDATION OF THE UNIVERSITY OF NORTH CAROLINA 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 28277</td>
<td>56-6059417</td>
<td>501 (c) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE FRANCIS GUMET SCHOLARSHIP FUND INC 300 ARNOLD PALMER BLVD NORTON, MA 2766</td>
<td>04-2234126</td>
<td>501 (c) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE FREDERICK GUNN SCHOOL INCORPORATED 99 GREEN HILL RD WASHINGTON, CT 6793</td>
<td>06-0646661</td>
<td>501 (c) 3</td>
<td>112,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FREE LIBRARY OF PHILADELPHIA 1901 VINE ST PHILADELPHIA, PA 19103</td>
<td>52-1173474</td>
<td>501 (c) 3</td>
<td>232,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE FREE METHODIST FOUNDATION 8050 SPRING ARBOR RD SPRING ARBOR, MI 49283</td>
<td>73-1317073</td>
<td>501 (c) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **VANGUARD CHARITABLE ENDOWMENT PROGRAM**
   - EIN: 23-2888152
   - IRC section: 501 (C) 3
   - Amount of cash grant: $5,500
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

2. **THE FRESHWATER TRUST**
   - EIN: 93-0843521
   - IRC section: 501 (C) 3
   - Amount of cash grant: $5,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

3. **THE FRIENDLY KITCHEN INC**
   - EIN: 02-0354057
   - IRC section: 501 (C) 3
   - Amount of cash grant: $6,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

4. **THE FRIENDS OF THIRTEEN INC**
   - EIN: 13-3429208
   - IRC section: 501 (C) 3
   - Amount of cash grant: $8,500
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

5. **THE FRIENDS OF YIMBO**
   - EIN: 26-0820637
   - IRC section: 501 (C) 3
   - Amount of cash grant: $50,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

6. **THE FRIENDSHIP CLUB**
   - EIN: 68-0262000
   - IRC section: 501 (C) 3
   - Amount of cash grant: $20,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

7. **THE FRIENDSHIP FOUNDATION**
   - EIN: 20-8575157
   - IRC section: 501 (C) 3
   - Amount of cash grant: $12,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

8. **THE FRIENDSHIP PADDLE**
   - EIN: 20-3483818
   - IRC section: 501 (C) 3
   - Amount of cash grant: $6,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

9. **THE FULLER CENTER FOR HOUSING INC**
   - EIN: 13-3522732
   - IRC section: 501 (C) 3
   - Amount of cash grant: $7,000
   - Method of valuation: FMV
   - Description of non-cash assistance: N/A
   - Purpose of grant: FOR RECIPIENT'S EXEM

10. **THE FULTON SCHOOL AT ST ALBANS**
    - EIN: 123 SCHOOLHOUSE RD SAINT ALBANS, MO 63073
    - IRC section: 501 (C) 3
    - Amount of cash grant: $15,000
    - Method of valuation: FMV
    - Description of non-cash assistance: N/A
    - Purpose of grant: FOR RECIPIENT'S EXEM

11. **THE FUND FOR AMERICAN STUDIES**
    - EIN: 1706 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20
    - IRC section: 501 (C) 3
    - Amount of cash grant: $244,000
    - Method of valuation: FMV
    - Description of non-cash assistance: N/A
    - Purpose of grant: FOR RECIPIENT'S EXEM

12. **THE FUND FOR BLOOD AND CANCER RESEARCH INC**
    - EIN: 407 E 70TH ST NEW YORK, NY 10021
    - IRC section: 501 (C) 3
    - Amount of cash grant: $7,500
    - Method of valuation: FMV
    - Description of non-cash assistance: N/A
    - Purpose of grant: FOR RECIPIENT'S EXEM

13. **THE FUND FOR CHRISTIAN SERVICE**
    - EIN: 24 COTLISS RD RIVERDALE, NJ 7457
    - IRC section: 501 (C) 3
    - Amount of cash grant: $96,000
    - Method of valuation: FMV
    - Description of non-cash assistance: N/A
    - Purpose of grant: FOR RECIPIENT'S EXEM

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | THE FUND FOR LAKE GEORGE INC  
    PO BOX 352 LAKE GEORGE, NY 12845 | 22-2565313 | 501 (C) 3 | 13,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | THE FUND FOR THE SCHOOL DISTRICT OF PHILADELPHIA  
    30 S 17TH ST FL 11 PHILADELPHIA, PA 19103 | 20-0153451 | 501 (C) 3 | 130,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | THE GALLERY PATTERSON PARK  
    3115 EASTERN AVE BALTIMORE, MD 21224 | 27-0459856 | 501 (C) 3 | 26,200 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | THE GATHERING UNITED METHODIST CHURCH  
    2105 MCCCAUSLAND AVE SAINT LOUIS, MO 63143 | 20-4975687 | 501 (C) 3 | 32,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | THE GENERAL COUNCIL OF THE ASSEMBLIES OF GOD  
    1445 N BOONVILLE AVE SPRINGFIELD, MO 65802 | 44-0577787 | 501 (C) 3 | 65,363 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | THE GENERAL COUNCIL ON FINANCE AND ADMINISTRATION  
    458 PONCE DE LEON AVE NE ATLANTA, GA 30308 | 82-1449602 | 501 (C) 3 | 40,200 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | THE GENESIS YOUTH PROJECT INC  
    2400 N UNIVERSITY DR STE 203 PEMBROKE PINES | 51-0743449 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | THE GEORGE AND BARBARA BUSH FOUNDATION  
    PO BOX 14141 COLLEGE STATION, TX 77841 | 76-0345781 | 501 (C) 3 | 111,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | THE GEORGE WASHINGTON FOUNDATION  
    1201 WASHINGTON AVE FREDERICKSBURG, VA 2240 | 54-0525507 | 501 (C) 3 | 25,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | THE GEORGIA COALITION FOR THE PEOPLES AGENDA  
    501 PULLIAM ST SW RM 410 ATLANTA, GA 30312 | 31-1770856 | 501 (C) 3 | 8,700 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | THE GESU SCHOOL INC  
    1700 W THOMPSON ST PHILADELPHIA, PA 19121 | 23-2728931 | 501 (C) 3 | 252,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | THE GIVING KITCHEN INITIATIVE INC  
    513 EDGECWOOD AVE SE STE 100 ATLANTA, GA 303 | 46-2176788 | 501 (C) 3 | 38,500 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**SCHEDULE I**
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 THE GLOBAL FOODBANKING NETWORK</td>
<td>76 E LAKE ST STE 1200 CHICAGO, IL 60601</td>
<td>20-4268851</td>
<td>501 (C) 3</td>
<td>34,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 THE GLOBAL ORPHAN PROJECT INC</td>
<td>3161 WYANDOTTE ST KANSAS CITY, MO 64111</td>
<td>81-6079539</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 THE GLOBAL VILLAGE PROJECT INC</td>
<td>205 SLCAMORE ST DECatur, GA 30030</td>
<td>26-4152199</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 THE GOLDEN SCOOP LLC</td>
<td>9540 NALL AVE OVERLAND PARK, KS 66207</td>
<td>84-3863269</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 THE GOOD LISTENING PROJECT</td>
<td>3932 W ST NW APT 4 WASHINGTON, DC 20007</td>
<td>83-2700087</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 THE GOOD NATION FOUNDATION INC</td>
<td>601 W 26TH ST NEW YORK, NY 10001</td>
<td>81-4768448</td>
<td>501 (C) 3</td>
<td>205,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 THE GRADUATE CENTER FOUNDATION INC</td>
<td>365 FIFTH AVENUE 8TH FLOOR NEW YORK, NY 10010</td>
<td>13-3219419</td>
<td>501 (C) 3</td>
<td>200,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 THE GREAT COMMISSION FOUNDATION OF CAMPUS C</td>
<td>100 LAKE HART DR # 3900 ORLANDO, FL 32832</td>
<td>95-2814920</td>
<td>501 (C) 3</td>
<td>5,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10 THE GREAT MIAMI VALLEY YMCA</td>
<td>105 N 2ND ST RALHINGTON, OH 45011</td>
<td>31-0536719</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 THE GREATER BOSTON FOOD BANK INC</td>
<td>70 S BAY AVE BOSTON, MA 2118</td>
<td>04-2717782</td>
<td>501 (C) 3</td>
<td>920,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 THE GREATER NEW ORLEANS FOUNDATION</td>
<td>919 ST CHARLES AVE NEW ORLEANS, LA 70130</td>
<td>72-0408921</td>
<td>501 (C) 3</td>
<td>102.500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>13 THE GREENWICH LAND TRUST INC</td>
<td>370 ROUND HILL RD GREENWICH, CT 6831</td>
<td>06-0950851</td>
<td>501 (C) 3</td>
<td>39,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE GREENWOOD GARDENS &amp; NATURE</td>
<td>80-0038573</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE GUILD FOR HUMAN SERVICES INC</td>
<td>04-2104849</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE GUILFORD ART CENTER INC</td>
<td>06-6089567</td>
<td>501 (C) 3</td>
<td>5,500. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THE GUNTOWN COMMUNITY CHURCH OF CHRIST</td>
<td>10-0031056</td>
<td>501 (C) 3</td>
<td>10,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<td>THE GUTHRIE CLINIC</td>
<td>23-3055017</td>
<td>501 (C) 3</td>
<td>12,500. FMV</td>
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<td>6</td>
<td>THE HAGEDORN LITTLE VILLAGE SCHOOL</td>
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<td>501 (C) 3</td>
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<td>THE HAITIAN PROJECT</td>
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<td>15,967. FMV</td>
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<td>THE HALLOWS CHURCH</td>
<td>45-1535443</td>
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<td>94-1613808</td>
<td>501 (C) 3</td>
<td>60,000. FMV</td>
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<td>10</td>
<td>THE HARMONY PROJECT</td>
<td>95-4856236</td>
<td>501 (C) 3</td>
<td>11,000. FMV</td>
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<td>11</td>
<td>THE HAROLD HUNTER FOUNDATION</td>
<td>20-5126705</td>
<td>501 (C) 3</td>
<td>25,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>THE HARVEST CENTER OF CHARLOTTE INC</td>
<td>56-2261612</td>
<td>501 (C) 3</td>
<td>6,000. FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Name of the organization**

**Employer identification number**

**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> THE HAWN FOUNDATION</td>
<td>1815 PURDY AVE MIAMI BEACH, FL 33139</td>
<td>20-0653982</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>2.</strong> THE HEALING NET FOUNDATION</td>
<td>200 HILL AVENUE, SUITE 4 NASHVILLE, TN 3721</td>
<td>46-3196096</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>3.</strong> THE HEALTH TRUST</td>
<td>ATTENTION: DEVELOPMENT OFFICE SUITE 200 SAM</td>
<td>94-6050231</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>4.</strong> THE HEIGHTS INC</td>
<td>10400 SEVEN LOCKS RD POTOMAC, MD 20854</td>
<td>52-1128002</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>5.</strong> THE HELEN ROSS MCNABB CENTER</td>
<td>200 TECH CENTER DR KNOXVILLE, TN 37912</td>
<td>62-0548914</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>6.</strong> THE HENRY W GRADY HEALTH SYSTEM FOUNDATION</td>
<td>191 PEACHTREE ST NE STE 820 ATLANTA, GA 303</td>
<td>58-2130437</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td><strong>7.</strong> THE HERMITAGE MUSEUM AND GARDENS</td>
<td>7637 N SHORE RD NORFOLK, VA 23505</td>
<td>81-3329080</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>8.</strong> THE HIGH DESERT MUSEUM</td>
<td>59800 S HWY 97 BEND, OR 97702</td>
<td>51-0179336</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>9.</strong> THE HILL SCHOOL</td>
<td>860 BEECH ST POTTSOWN, PA 19464</td>
<td>23-1352647</td>
<td>501 (C) 3</td>
<td>60,105.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>10.</strong> THE HILLS CHURCH OF CHRIST</td>
<td>6300 NE LOOP 820 NORTH RICHLAND HILLS, TX 7</td>
<td>75-1166772</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>11.</strong> THE HISTORIC PRESERVATION FOUNDATION OF NOR</td>
<td>PO BOX 2764 RALEIGH, NC 27611</td>
<td>56-1145386</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td><strong>12.</strong> THE HISTORY THEATRE INC</td>
<td>30 10TH ST E SAINT PAUL, MN 55101</td>
<td>41-1408420</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes ☒ No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE HOME FOR LITTLE WANDERERS INC</td>
<td>04-2104764</td>
<td>501 (C) 3</td>
<td>66,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE HOMELESS FAMILIES FOUNDATION</td>
<td>31-1179492</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE HONORABLE TINA BROZMAN FOUNDATION INC</td>
<td>26-0413943</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE HOSPICE FOUNDATION OF MARTIN &amp; ST LUCIE</td>
<td>65-0047497</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE HOSPICE OF DAYTON INC</td>
<td>31-0933339</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>THE HUMAN RACE INC</td>
<td>31-1176135</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THE HUMANE LEAGUE</td>
<td>04-3817491</td>
<td>501 (C) 3</td>
<td>131,200.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE HUMANE SOCIETY OF BOULDER VALLEY INC</td>
<td>84-0152768</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THE HUMANE SOCIETY OF SOUTHERN WISCONSIN IN</td>
<td>39-0973879</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE HUNTSVILLE HOSPITAL FOUNDATION INC</td>
<td>63-0752604</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THE HUTTON SETTLEMENT</td>
<td>91-0564969</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>THE HYDE COLLECTION TRUST</td>
<td>14-1401101</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table. .................................................................................................................
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE ILLINOIS PATRONS OF THE ARTS IN THE VAT</td>
<td>36-3906160</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>835 N RUSH ST CHICAGO, IL 60611</td>
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<td>THE IM ABLE FOUNDATION</td>
<td>06-1783154</td>
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<td>N/A</td>
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<tr>
<td>220 PARK ROAD NORTH BLDG 7 WYOMISSING, PA 1</td>
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<tr>
<td>THE IMMOKALEE FOUNDATION INC</td>
<td>65-0315664</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>2375 TAMiami TRAIL NORTH NAPLES, FL 34103</td>
<td></td>
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<td>THE INDEPENDENCE FUND, INC</td>
<td>26-0322088</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9013 PERIMETER WOODS DRIVE SUITE E CHARLOTT</td>
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<td>THE INN BETWEEN</td>
<td>47-2329595</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
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<tr>
<td>1216 E 1300 S SALT LAKE CITY, UT 84105</td>
<td></td>
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<tr>
<td>THE INSTITUTE FOR THE ADVANCEMENT OF EDUCATION</td>
<td>11-2697261</td>
<td>501 (C) 3</td>
<td>30,750.</td>
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<td>N/A</td>
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<tr>
<td>297 S WASHINGTON AVE STE 2 BERGENFIELD, NJ</td>
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<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>THE INTERNATIONAL RHINO FOUNDATION</td>
<td>75-2395006</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>201 MAIN ST STE 2600 FORT WORTH, TX 76102</td>
<td></td>
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<tr>
<td>THE INTERNATIONAL WALDENSTROMS MACROGLOBULI</td>
<td>54-1784426</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6144 CLARK CENTER AVE SARASOTA, FL 34238</td>
<td></td>
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<td></td>
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<tr>
<td>THE INTERNATIONAL WILDERNESS LEADERSHIP FOU</td>
<td>23-7389749</td>
<td>501 (C) 3</td>
<td>85,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>717 POPULAR AVE BOULDER, CO 80304</td>
<td></td>
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<td>THE IRISH AMERICAN PARTNERSHIP INC</td>
<td>22-2801642</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>15 BROAD ST STE 501 BOSTON, MA 2109</td>
<td></td>
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<td></td>
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<tr>
<td>THE ISLAMIC SOCIETY OF GREATER FTORLAND</td>
<td>93-0907542</td>
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<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>16100 SW BLANTON ST BEAVERTON, OR 97078</td>
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<tr>
<td>THE JAMES MADISON INSTITUTE FOR PUBLIC POLI</td>
<td>59-2811908</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>100 N DUVAL ST TALLAHASSEE, FL 32301</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **X Yes** ** No

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<th>1 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>THE JAMES WILSON INSTITUTE FOR NATURAL RIGH 722 12TH ST. NW, FOURTH FLOOR WASHINGTON, D</td>
<td>1970028</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JAZZ GALLERY PO BOX 153 NEW YORK, NY 10021</td>
<td>3948717</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JED FOUNDATION PO BOX 60174 BROOKLYN, NY 11206</td>
<td>4131319</td>
<td>501 (C) 3</td>
<td>70,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH COMMUNITY CENTER IN MANHATTAN IN 334 AMSTERDAM AVE NEW YORK, NY 10023</td>
<td>3490745</td>
<td>501 (C) 3</td>
<td>14,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FEDERATION OF GREATER NEW HAVEN 360 AMITY RD WOODBRIDGE, CT 6525</td>
<td>06-0647025</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FEDERATION OF GREATER WASHINGTON 6101 EXECUTIVE BLVD NORTH BETHESDA, MD 2085</td>
<td>0212445</td>
<td>501 (C) 3</td>
<td>122,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FEDERATION OF NEW MEXICO 5520 WYOMING BLVD NE ALBUQUERQUE, NM 87109</td>
<td>0158242</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FEDERATION OF SARASOTA-MANATEE I 580 MCINTOSH RD SARASOTA, FL 34232</td>
<td>1227747</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FEDERATIONS OF NORTH AMERICA INC 25 BROADWAY 17TH FL NEW YORK, NY 10004</td>
<td>1624240</td>
<td>501 (C) 3</td>
<td>28,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH FOUNDATION FOR THE RIGHTEOUS INC 305 SEVENTH AVE 19TH FL NEW YORK, NY 10001</td>
<td>3807016</td>
<td>501 (C) 3</td>
<td>7,140.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JEWISH HOME FOR THE ELDERLY OF FAIRFIELD 4200 PINE AVE BRIDGEPORT, CT 6604</td>
<td>0846991</td>
<td>501 (C) 3</td>
<td>122,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE JEWISH INSTITUTE FOR NATIONAL SECURITY 1101 14TH ST NW STE 1030 WASHINGTON, DC 200</td>
<td>1233683</td>
<td>501 (C) 3</td>
<td>49,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.

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

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE JOFFREY BALLET 10 E RANDOLPH ST CHICAGO, IL 60601 36-4009741 501 (C) 3 44,925. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE JOHN BURROUGHS ASSOCIATION 201 ST PARK, NY 12493 13-6167885 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE JOHNS HOPKINS HOSPITAL 3910 KESWICK RD BLDG 4300A BALTIMORE, MD 21 52-0591656 501 (C) 3 25,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE JOURNEY CHURCH PO BOX 27039 ANAHEIM, CA 92809 33-0831015 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE JOURNEY COMMUNITY CHURCH P.O. BOX 465 C/O SHAWN ACREY FRANKLIN, OH 82-2262229 501 (C) 3 10,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE JUSTICE FOUNDATION 326 STERLING BROWNING RD SAN ANTONIO, TX 78 74-2676958 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE KANSAS CITY BAPTIST TEMPLE OF KANSAS CITY 5460 BLUE RIDGE CUTOFF RAYTOWN, MO 64133 46-0499711 501 (C) 3 10,600. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE KELSEY 1161 MISSION ST SAN FRANCISCO, CA 94103 84-2909645 501 (C) 3 300,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE KESWELL SCHOOL 331 W 25TH ST NEW YORK, NY 10001 68-0526818 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE KEY TO CHANGE 10473 47TH AVE S TUKWILA, WA 98178 47-4809104 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>THE KNOWLEDGE HOUSE FELLOWSHIP INC 363 RIDER AVE BRONX, NY 10451 47-2747713 501 (C) 3 51,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE KOBY MANDELL FOUNDATION INC 366 PEARLSALL AVE STE 1 CEDARHURST, NY 11516 91-2169027 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ✔ Yes  ❏ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE LAKES COMMUNITY HEALTH CENTER INC</td>
<td>7665 US HIGHWAY 2 IRON RIVER, WI 54847</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THE LAMB CENTER</td>
<td>PO BOX 1385 FAIRFAX, VA 22038</td>
<td>501 (c) 3</td>
<td>44,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE LAMP FOUNDATION INC</td>
<td>PO BOX 187 MONTCLAIR, NJ 7042</td>
<td>501 (c) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE LAMPLIGHTER SCHOOL</td>
<td>11611 INWOOD RD DALLAS, TX 75229</td>
<td>501 (c) 3</td>
<td>170,002.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE LAND CONSERVANCY OF NEW JERSEY</td>
<td>19 BOONTON AVE BOONTON, NJ 7005</td>
<td>501 (c) 3</td>
<td>71,351.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>THE LAND CONSERVANCY OF SAN LUIS OBISPO COU</td>
<td>1137 PACIFIC ST STE A SAN LUIS OBISPO, CA 9</td>
<td>501 (c) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>THE LEFFELL SCHOOL</td>
<td>555 W HARTSDALE AVE HARTSDALE, NY 10530</td>
<td>501 (c) 3</td>
<td>21,001.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE LEGACY FOUNDATION AT SHELL POINT INC</td>
<td>15010 SHELL POINT BLVD FORT MYERS, FL 33908</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>THE LEONARD AND MADLYN ABRAMS FAMILY CARC</td>
<td>421 CURIE BLVD PHILADELPHIA, PA 19104</td>
<td>501 (c) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>THE LGBTQ COMMUNITY CENTER OF THE DESERT</td>
<td>1301 N PALM CANYON DR STE 301 PALM SPRINGS,</td>
<td>501 (c) 3</td>
<td>8,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THE LIBRARY FOUNDATION OF MARTIN COUNTY INC</td>
<td>2351 SE MONTEREY RD STUART, FL 34996</td>
<td>501 (c) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE LIGHT HOUSE INC</td>
<td>10 HUDSON ST ANNAPOLIS, MD 21401</td>
<td>501 (c) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

---

Schedule I (Form 990) 2020
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1)</td>
<td>THE LINK OF CULLMAN COUNTY</td>
<td>45-4587097</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>THE LITTLE SISTERS OF THE POOR OF INDIANAPOLIS</td>
<td>52-1635802</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>THE LIVING DESERT</td>
<td>95-3385354</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(4)</td>
<td>THE LOCKER FOUNDATION</td>
<td>46-2239181</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>THE LOMA LINDA UNIVERSITY SDA CHURCH</td>
<td>95-2111211</td>
<td>501 (C) 3</td>
<td>125,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>THE LORDS GRACE CHRISTIAN CHURCH</td>
<td>94-2877121</td>
<td>501 (C) 3</td>
<td>45,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>THE LOS ANGELES CHAMBER ORCHESTRA SOCIETY I</td>
<td>23-7010825</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>THE LOS ANGELES DODGERS FOUNDATION</td>
<td>85-4623022</td>
<td>501 (C) 3</td>
<td>267,667.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>THE LOUISVILLE ORCHESTRA INC</td>
<td>61-6000384</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>THE LOWELL GENERAL HOSPITAL</td>
<td>04-2103590</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>THE LOWER LAB SCHOOL PARENT TEACHERS ASSOCI</td>
<td>13-3496389</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>THE LYRIC CHAMBER MUSIC SOCIETY OF NEW YORK</td>
<td>13-3947644</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table ........................................................................................................................................
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THE MADONNA FOUNDATION 5401 SOUTH ST LINCOLN, NE 68506</td>
<td>23-7159940</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MALALA FUND PO BOX 7367 WASHINGTON, DC 20056</td>
<td>81-1397590</td>
<td>501 (C) 3</td>
<td>113,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MAMMA PROJECT INC 8791 MCBRIDE PARK DR HARBOR SPRINGS, MI 497</td>
<td>38-2764533</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MARITIME AQUARIUM AT NORWALK INC 10 N WATER ST NORWALK, CT 6854</td>
<td>06-1062912</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MARIE FOUNDATION INC 2855 HILLCREST RD ROCKLIN, CA 95765</td>
<td>83-1684461</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MARTHA FUND TRUST 933 ROCKWOOD AVE PITTSBURGH, PA 15234</td>
<td>25-6482550</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MASONIC CHARITY FOUNDATION OF CONNECTIC PO BOX 70 WALLINGFORD, CT 6492</td>
<td>06-1435920</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MAVEN PROJECT PO BOX 156781 SAN FRANCISCO, CA 94115</td>
<td>46-5370676</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MAY INSTITUTE INC 41 PACELLA PARK DR RANDOLPH, MA 2368</td>
<td>04-2197449</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MAYORS FUND TO ADVANCE NEW YORK CITY 253 BROADWAY FL 8 NEW YORK, NY 10007</td>
<td>13-3783906</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MEADOWS CENTER AT OCEAN BEACH INC 50 BARRACUDA LN KEY LARGO, FL 33037</td>
<td>23-7438190</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MEDICAL CENTER AT WISCONSIN INC 8701 W WATERTOWN PLANK RD MILWAUKEE, WI 532</td>
<td>39-0806261</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

I

Attach to Form 990.

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>THE MEDICAL UNIVERSITY OF SOUTH CAROLINA FO 18 BEE ST CHARLESTON, SC 29425</td>
<td>57-6028985</td>
<td>501 (C) 3</td>
<td>118,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MENNINGER CLINIC FOUNDATION 12301 MAIN ST HOUSTON, TX 77035</td>
<td>81-0588012</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON ST RALEIGH, NC 27605</td>
<td>56-0547482</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE METHODIST HOSPITAL 6565 FANNIN ST # GB240 HOUSTON, TX 77030</td>
<td>74-1180155</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE METROPOLITAN MUSEUM OF ART 1000 5TH AVE NEW YORK, NY 10028</td>
<td>13-1624086</td>
<td>501 (C) 3</td>
<td>196,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MIAMI FOUNDATION INC 200 S BISCAYNE BLVD STE 505 MIAMI, FL 33131</td>
<td>65-0350357</td>
<td>501 (C) 3</td>
<td>81,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MINISTRY OF CARING INC 115 EAST 14TH STREET WILMINGTON, DE 19801</td>
<td>51-0209843</td>
<td>501 (C) 3</td>
<td>55,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MINNESOTA OPERA 620 N 1ST ST MINNEAPOLIS, MN 55401</td>
<td>41-0946789</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MONDAY CLUBHOUSE CONSERVANCY PO BOX 167 SAN LUIS OBISPO, CA 93406</td>
<td>95-1679667</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MONO LAKE FOUNDATION PO BOX 29 LEE Vining, CA 93541</td>
<td>77-0051124</td>
<td>501 (C) 3</td>
<td>14,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MOODY CHURCH 1635 N LA SALLE DR CHICAGO, IL 60614</td>
<td>36-2182069</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE MOREHOUSE SCHOOL OF MEDICINE INC 720 WESTVIEW DR SW ATLANTA, GA 30310</td>
<td>58-1438873</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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### Part I: General Information on Grants and Assistance

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<th>No</th>
</tr>
</thead>
</table>

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1(a) Name and address of organization or government</th>
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<th>1(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE MOSAIC FOUNDATION</td>
<td>4980 S 118TH ST # A OMAHA, NE 68137</td>
<td>36-3837360</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE MOUNTAINEERS</td>
<td>7700 SAND POINT WAY NE SEATTLE, WA 98115</td>
<td>27-3009280</td>
<td>501 (c) 3</td>
<td>40,417.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MOUNTAINS TO SOUND GREENWAY TR</td>
<td>2701 1ST AVE STE 240 SEATTLE, WA 98121</td>
<td>91-1531234</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE MULTIPLE MYELOMA RESEARCH FOUNDATION IN</td>
<td>383 MAIN AVE FL 5 NORWALK, CT 6851</td>
<td>06-1504413</td>
<td>501 (c) 3</td>
<td>151,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE MULTIPLE SYSTEM ATROPHY COALITION INC</td>
<td>7918 JONES BRANCH DR STE 300 MC LEAN, VA 22</td>
<td>74-2926378</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MUSEUM OF WESTERN ART FOUNDATION</td>
<td>1550 BANDERA HWY KERRVILLE, TX 78028</td>
<td>74-2131413</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MUSIC SCHOOL OF DELAWARE INC</td>
<td>4101 N WASHINGTON ST WILMINGTON, DE 19802</td>
<td>51-0066934</td>
<td>501 (c) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE MUSICAL ARTS ASSOCIATION</td>
<td>11001 EUCLID AVE CLEVELAND, OH 44106</td>
<td>34-0714468</td>
<td>501 (c) 3</td>
<td>619,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NATIONAL ALLIANCE TO END HOMELESSNESS I</td>
<td>1516 K ST NW FL 2 WASHINGTON, DC 20005</td>
<td>52-1299641</td>
<td>501 (c) 3</td>
<td>184,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NATIONAL ASSOCIATION FOR URBAN DEBATE L</td>
<td>405 W SUPERIOR ST CHICAGO, IL 60654</td>
<td>20-4323096</td>
<td>501 (c) 3</td>
<td>27,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NATIONAL CAMPAIGN TO PREVENT TEEN AND U</td>
<td>1776 MASSACHUSETTS NW AVE WASHINGTON, DC 20</td>
<td>52-1974611</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NATIONAL CENTER FOR SCIENCE EDUCATION I</td>
<td>230 GRAND AVENUE OAKLAND, CA 94610</td>
<td>11-2656357</td>
<td>501 (c) 3</td>
<td>29,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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<tr>
<td>(1)</td>
<td>THE NATIONAL JAZZ MUSEUM IN HARLEM</td>
<td>58 W 129TH ST NEW YORK, NY 10027</td>
<td>13-3853627</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>THE NATIONAL MILITARY FAMILY ASSOCIATION</td>
<td>2800 EISENHOWER AVE STE 250 ALEXANDRIA, VA</td>
<td>52-0899384</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>THE NATIONAL ORGANIZATION FOR WOMEN FOUNDAT</td>
<td>1100 N ST NW STE 300 WASHINGTON, DC 20005</td>
<td>52-1477004</td>
<td>501 (C) 3</td>
<td>6,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4)</td>
<td>THE NATIONAL PRESBYTERIAN CHURCH INC</td>
<td>4101 NEBRASKA AVE NW WASHINGTON, DC 20016</td>
<td>52-0196611</td>
<td>501 (C) 3</td>
<td>34,319.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>THE NATIONAL PUBLIC HOUSING MUSEUM</td>
<td>625 N KINGSBURY ST CHICAGO, IL 60654</td>
<td>51-0649843</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6)</td>
<td>THE NATURE CONSERVANCY OF CALIFORNIA</td>
<td>201 MISSION ST FL 4 SAN FRANCISCO, CA 94105</td>
<td>20-5797732</td>
<td>501 (C) 3</td>
<td>148,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>THE NAVAL INSTITUTE FOUNDATION INCORPORATED</td>
<td>291 WOOD RD ANNAPOLIS, MD 21402</td>
<td>52-1413444</td>
<td>501 (C) 3</td>
<td>207,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>THE NAVIGATORS</td>
<td>3820 W 30TH ST COLORADO SPRINGS, CO 80904</td>
<td>84-6007896</td>
<td>501 (C) 3</td>
<td>251,901.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(9)</td>
<td>THE NEIGHBORHOOD CHRISTIAN CLINIC INC</td>
<td>1929 W FILLMORE ST BLDG C PHOENIX, AZ 85009</td>
<td>86-0839580</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>THE NEMOURS FOUNDATION</td>
<td>10140 CENTURION PKWY N JACKSONVILLE, FL 322</td>
<td>59-0634033</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11)</td>
<td>THE NEW CANAAN COMMUNITY YOUNG MENS CHRISTI</td>
<td>564 SOUTH AVE NEW CANAAN, CT 6840</td>
<td>06-0763077</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>THE NEW HAVEN READS COMMUNITY BOOK BANK INC</td>
<td>45 BRISTOL ST NEW HAVEN, CT 6511</td>
<td>76-0807030</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Name of the organization

Employer identification number

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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I Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

SCHEDULE I
(Form 990)

PART I
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<tr>
<td>THE NEW HORIZONS FOUNDATION INC</td>
<td>5550 TECH CENTER DR STE 303 COLORADO SPRING</td>
<td>84-1123082</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NEW PRESS INC</td>
<td>120 WALL ST FL 31 NEW YORK, NY 10005</td>
<td>13-3584516</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NEW SCHOOL</td>
<td>80 5TH AVE 4TH FL NEW YORK, NY 10011</td>
<td>13-3297197</td>
<td>501 (C) 3</td>
<td>FMV</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NEW SHUL</td>
<td>12 W 12TH ST NEW YORK, NY 10011</td>
<td>06-1538090</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NEW YORK CITY CHURCH OF CHRIST</td>
<td>400 PLAZA DR FL 1 SECAUCUS, NJ 7094</td>
<td>13-3167629</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NEW YORK CITY LEADERSHIP CENTER INC</td>
<td>2 WASHINGTON ST FL 20 NEW YORK, NY 10004</td>
<td>20-8991671</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NEW YORK COMMUNITY TRUST</td>
<td>909 3RD AVE FL 22 NEW YORK, NY 10022</td>
<td>13-3062214</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NEW YORK FOUNDLING</td>
<td>590 AVE OF THE AMERICAS NEW YORK, NY 10011</td>
<td>13-1624123</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NEW YORK PUBLIC LIBRARY ASTOR LENOX AND</td>
<td>445 5TH AVE FL 8 NEW YORK, NY 10016</td>
<td>13-1887440</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NEW YORK STATE CASA ASSOCIATION INC</td>
<td>14 COLUMBIA CIR STE 206 ALBANY, NY 12203</td>
<td>14-1782329</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE NISKANEN CENTER INC</td>
<td>820 1ST ST NE STE 675 WASHINGTON, DC 20002</td>
<td>45-5308952</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE NONHUMAN RIGHTS PROJECT INC</td>
<td>5195 NW 112TH TER CORAL SPRINGS, FL 33076</td>
<td>06-3289466</td>
<td>501 (C) 3</td>
<td>FMV</td>
<td>N/A</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
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Schedule I (Form 990) 2020

JSA
0E1288 1.000

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## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (d) Amount of cash grant</th>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of non-cash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE NORTH AMERICAN FOUNDATION FOR THE UNIVERSE</td>
<td>52-1654821</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 12231 DURHAM, NC 27709</td>
<td>58-1720178</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE NORTH UMPQUA FOUNDATION</td>
<td>93-0846958</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1415 SUMMIT AVE SEATTLE, WA 98122</td>
<td>91-1061146</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6565 SKYLINE BLVD HILLSBOROUGH, CA 94010</td>
<td>94-1633387</td>
<td>501 (C) 3</td>
<td>518,148.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 71005 OAKLAND, CA 94612</td>
<td>43-2014630</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OASIS HAVEN FOR WOMEN &amp; CHILDREN INC</td>
<td>22-3491573</td>
<td>501 (C) 3</td>
<td>106,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11780 BORMAN DR STE 400 SAINT LOUIS, MO 631</td>
<td>43-1830354</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>54 FITMAN AVE OCEAN GROVE, NJ 7756</td>
<td>21-0652120</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>37 AVON ST SOMERVILLE, MA 2143</td>
<td>84-4881059</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>37 AVON ST SOMERVILLE, MA 2143</td>
<td>84-4881059</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OASIS INSTITUTE</td>
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<tr>
<td>THE OCEAN GROVE CAMP MEETING ASSOC OF THE U</td>
<td>43-1830354</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OCTET COLLABORATIVE INC</td>
<td>22-3491573</td>
<td>501 (C) 3</td>
<td>106,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 869 ATHENS, OH 45071</td>
<td>31-6402269</td>
<td>501 (C) 3</td>
<td>37,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THE OJC FUND</td>
<td>11-3618879</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
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<th>4 (d) Amount of cash grant</th>
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<th>8 (h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>THE OMPRAKASH FOUNDATION</td>
<td>20-8655418</td>
<td>501 (c) 3</td>
<td>200,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ONE LOVE FOUNDATION IN HONOR OF YEARDLE</td>
<td>27-2904497</td>
<td>501 (c) 3</td>
<td>7,250. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OPEN DOOR</td>
<td>27-0415900</td>
<td>501 (c) 3</td>
<td>19,250. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OPEN DOOR CAFE ANN FOOD PANTRY INC</td>
<td>22-2513482</td>
<td>501 (c) 3</td>
<td>122,500. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OPEN DOOR SHELTER INC</td>
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<td>501 (c) 3</td>
<td>8,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE OPEN WINDOW SCHOOL</td>
<td>91-1303536</td>
<td>501 (c) 3</td>
<td>22,500. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE OPPORTUNITY ALLIANCE</td>
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<td>10,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ORATORY OF SAINT PHILIP OF HERI</td>
<td>57-0314449</td>
<td>501 (c) 3</td>
<td>30,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE ORPHANNETWORK</td>
<td>54-1983817</td>
<td>501 (c) 3</td>
<td>62,000. FMV</td>
<td>N/A</td>
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<td>THE ORTHODOX PRESBYTERIAN CHURCH</td>
<td>23-7001990</td>
<td>501 (c) 3</td>
<td>6,400. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE OSCPA EDUCATIONAL FOUNDATION</td>
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<td>501 (c) 3</td>
<td>51,000. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE PALO ALTO COMMUNITY FUND</td>
<td>77-0483215</td>
<td>501 (c) 3</td>
<td>10,100. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
</tbody>
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## SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
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<tr>
<td></td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td></td>
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<tr>
<td>1</td>
<td>THE PANDO INITIATIVE INC</td>
<td>412 S MAIN ST STE 212 WICHITA, KS 67202</td>
<td>48-1093130</td>
<td>501 (C) 3</td>
<td>52,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>THE PAPAL FOUNDATION</td>
<td>2501 SEAPORT DR STE SH100 CHESTER, PA 19013</td>
<td>23-2511991</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THE PARASOL TANGE COMMUNITY FOUNDATION INC</td>
<td>948 INCLINE WAY INCLINE VILLAGE, NV 89451</td>
<td>88-0362053</td>
<td>501 (C) 3</td>
<td>41,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>THE PARENT PROJECT FOR MUSCULAR DYSTROPHY R</td>
<td>401 HACKENSACK AVE FL 9 HACKENSACK, NJ 7601</td>
<td>31-1405490</td>
<td>501 (C) 3</td>
<td>16,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>THE PARENT-TEACHER ASSOCIATION OF THE CLINT</td>
<td>10 E 15TH ST NEW YORK, NY 10003</td>
<td>51-0481670</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>THE PARISH OF THE EPHPHANY</td>
<td>70 CHURCH ST WINCHESTER, MA 1890</td>
<td>04-2146060</td>
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<td>32,250.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>THE PARISH OF TRINITY CHURCH</td>
<td>74 TRINITY PL NEW YORK, NY 10006</td>
<td>13-5562393</td>
<td>501 (C) 3</td>
<td>6,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE PARK AND RESOURCES CONSERVATION FOUNDAT</td>
<td>10400 GOOD LUCK RD GLENN DALE, MD 20769</td>
<td>52-1339854</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THE PATH OF CITRUS COUNTY INC</td>
<td>PO BOX 3024 INVERNESS, FL 34451</td>
<td>59-3111520</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>THE PAULIST FATHERS</td>
<td>3015 4TH ST NE WASHINGTON, DC 20017</td>
<td>74-3188659</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THE PEOPLE CONCERN</td>
<td>2116 ARLINGTON AVE STE 100 LOS ANGELES, CA 90026</td>
<td>95-6143865</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>THE PEOPLE OF PRAISE VANCOUVER WASHINGTON</td>
<td>421 MEMPHIS WAY VANCOUVER, WA 98664</td>
<td>91-1229946</td>
<td>501 (C) 3</td>
<td>16,600.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table .........................................................................................................................

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Schedule I (Form 990) 2020
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE PHILADELPHIA EDUCATION FUND 718 ARCH ST STE 700N PHILADELPHIA, PA 19106</td>
<td>22-2567982</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE PHILANTHROPY WORKSHOP INC 100 BROADWAY PL 17 NEW YORK, NY 10005</td>
<td>98-0592591</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>THE PINES AT DAVIDSON INC 400 AVINGER LN DAVIDSON, NC 28036</td>
<td>58-1598135</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE PINES FOUNDATION INC PO BOX 5305 SAYVILLE, NY 11782</td>
<td>11-3488704</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE PINHEAD INSTITUTE INC PO BOX 2905 TELLURIDE, CO 81435</td>
<td>84-1605984</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>THE PITTSBURGH PARKS CONSERVANCY 45 S 23RD ST STE 101 PITTSBURGH, PA 15203</td>
<td>23-2882145</td>
<td>501 (C) 3</td>
<td>105,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE PLANETARY SOCIETY 60 S LOS ROBLES AVE PASADENA, CA 91101</td>
<td>95-3423566</td>
<td>501 (C) 3</td>
<td>66,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE PLAY EQUITY FUND 2141 W ADAMS BLVD LOS ANGELES, CA 90018</td>
<td>47-1295322</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE POORPEOPLESCAMPAIGNINC 737 E 69TH ST APT 806 CHICAGO, IL 60637</td>
<td>03-0560551</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE POSSIES FOUNDATION INC 14 WALL ST STE 8A60 NEW YORK, NY 10005</td>
<td>13-3840394</td>
<td>501 (C) 3</td>
<td>290,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE POSSIBILITY PROJECT INC 104 W 27TH STREET 12TH FLOOR NEW YORK, NY 1</td>
<td>13-4134366</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE POTTERS WHEEL INC 333 JEFFERSON AVE EVANSVILLE, IN 47713</td>
<td>74-3105998</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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Schedule I (Form 990) 2020

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### Schedule I (Form 990) 2020

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---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>(6) THE PRIORY IN THE US OF AMER OF THE MST VEN</td>
<td>13-6161455</td>
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<td>(7) THE PROJECT ON GOVERNMENT OVERSIGHT INC</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

3. Enter total number of other organizations listed in the line 1 table: .................................................................

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization: VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number: 23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................................................. X Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X] 
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<td>THE RWJ UNIVERSITY HOSPITAL FOUNDATION INC</td>
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<td>501 (C) 3</td>
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<td>47-4033909</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**SCHEDULE I**

(Form 990)

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>2 THE SAINT PAUL SEMINARY SCHOOL OF DIVINITY 2260 SUMMIT AVE SAINT PAUL, MN 55105</td>
<td>41-0693969</td>
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<td>3 THE SALEM PANTRY INC PO BOX 295 SALEM, MA 1970</td>
<td>20-1691756</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 THE SALVATION ARMY 440 W NYACK RD WEST NYACK, MS 39202</td>
<td>13-5562351</td>
<td>501 (C) 3</td>
<td>1,134,008.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 THE SALVATION ARMY 1450 RIVERSIDE DR JACKSON, NY 10994</td>
<td>58-0660607</td>
<td>501 (C) 3</td>
<td>681,427.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 THE SALVATION ARMY 5550 PRAIRIE STONE PKWY HOFFMAN ESTATES, CA 30840 HAWTHORNE BLVD RANCHO PALOS VERDES, I</td>
<td>36-2167910</td>
<td>501 (C) 3</td>
<td>36-2167910</td>
<td>501 (C) 3</td>
<td>721,672.</td>
<td>FMV</td>
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<tr>
<td>7 THE SALVATION ARMY 30840 HAWTHORNE BLVD RANCHO PALOS VERDES, I</td>
<td>94-1156347</td>
<td>501 (C) 3</td>
<td>721,672.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8 THE SALVATION ARMY PHILADELPHIA BOOTH MANOR 5522 ARCH ST PHILADELPHIA, PA 19139</td>
<td>23-2822333</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 THE SAMARITAN MEDICAL CENTER FOUNDATION OF 830 WASHINGTON ST WATERTOWN, NY 13601</td>
<td>16-1490523</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10 THE SAMARITANS INC 67 PARK PL PANTUCKET, RI 2860</td>
<td>05-0376250</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11 THE SAN DIEGO FOUNDATION 2508 HISTORIC DECATOR SAN DIEGO, CA 92106</td>
<td>95-2942582</td>
<td>501 (C) 3</td>
<td>113,000.</td>
<td>FMV</td>
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<tr>
<td>12 THE SAN FRANCISCO SCHOOL 300 GAVEN ST SAN FRANCISCO, CA 94134</td>
<td>94-1629702</td>
<td>501 (C) 3</td>
<td>856,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ................................................................. □

3. Enter total number of other organizations listed in the line 1 table ......................................................................................................................... □
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE SANTA FE OPERA P.O. BOX 2408 SANTA FE, NM 87504</td>
<td>85-0131810</td>
<td>501 (c) 3</td>
<td>330,000.</td>
<td>FMV</td>
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<td>2</td>
<td>THE SANTA MONICA COLLEGE FOUNDATION 2714 PICO BLVD 230 SANTA MONICA, CA 90405</td>
<td>95-6047779</td>
<td>501 (c) 3</td>
<td>27,580.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3</td>
<td>THE SCARSDALE ADULT SCHOOL P.O. BOX 205 SCARSDALE, NY 10583</td>
<td>13-3230407</td>
<td>501 (c) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THE SCCA FOUNDATION 3740 CAHUENGA BLVD STUDIO CITY, CA 91604</td>
<td>95-3858373</td>
<td>501 (c) 3</td>
<td>12,500.</td>
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<td>5</td>
<td>THE SCHECHTER INSTITUTES INC 101 GREENWOOD AVE JENKINTOWN, PA 19046</td>
<td>22-3342043</td>
<td>501 (c) 3</td>
<td>20,600.</td>
<td>FMV</td>
<td>N/A</td>
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<td>6</td>
<td>THE SCHOOL DISTRICT OF STURGEON BAY 1230 MICHIGAN STREET STURGEON BAY, WI 54235</td>
<td>39-6004697</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>THE SCHUYLKILL CENTER FOR ENVIRONMENTAL EDU 8480 HAGYS MILL RD PHILADELPHIA, PA 19128</td>
<td>23-1654975</td>
<td>501 (c) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>THE SCIOTO COUNTY AREA FOUNDATION P.O. BOX 911 PORTSMOUTH, OH 45662</td>
<td>51-0157026</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THE SCRIBE VIDEO CENTER INC PO BOX 13267 PHILADELPHIA, PA 19101</td>
<td>23-2358942</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>THE SEACHANGE AGENCY 2333 CLARK AVE VENICE, CA 90291</td>
<td>45-2639830</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THE SEATTLE ACADEMY OF ARTS AND SCIENCES 1201 E UNION ST SEATTLE, WA 98122</td>
<td>91-1223580</td>
<td>501 (c) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE SEATTLE FOUNDATION 1601 5TH AVE STE 1900 SEATTLE, WA 98101</td>
<td>91-6013536</td>
<td>501 (c) 3</td>
<td>5,610,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x], No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE SECOND BAPTIST SCHOOL FOUNDATION INC</td>
<td>6400 WOODWAY DR HOUSTON, TX 77057</td>
<td>088961</td>
<td>501 (c) 3</td>
<td>32,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE SEEING EYE INC</td>
<td>10 WASHINGTON VALLEY RD MORRISTOWN, NJ 7960</td>
<td>22-1539721</td>
<td>501 (c) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE SEMINAR NETWORK INC</td>
<td>1320 N COURTHOUSE RD STE 500 ARLINGTON, VA</td>
<td>46-3508366</td>
<td>501 (c) 3</td>
<td>105,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SENTENCING PROJECT</td>
<td>1705 DESEAS ST NW FL 8 WASHINGTON, DC 2003</td>
<td>52-1472546</td>
<td>501 (c) 3</td>
<td>15,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SERRA PRESCCHOOL</td>
<td>2443 FILMORE ST # 368 SAN FRANCISCO, CA 94</td>
<td>91-2148841</td>
<td>501 (c) 3</td>
<td>15,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SEVENTH GENERATION FUND FOR INDIGENOUS</td>
<td>PO BOX 4569 ARCATA, CA 95518</td>
<td>68-0027247</td>
<td>501 (c) 3</td>
<td>162,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHAKESPEARE THEATRE OF NEW JERSEY INC</td>
<td>36 MADISON AVE MADISON, NJ 7940</td>
<td>22-1962163</td>
<td>501 (c) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHALOM HARTMAN INSTITUTE OF NORTH AMERI</td>
<td>475 RIVERSIDE DR STE 1450 NEW YORK, NY 1011</td>
<td>13-3014387</td>
<td>501 (c) 3</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHALOM PROJECT INC</td>
<td>639 S GREEN ST WINSTON SALEM, NC 27101</td>
<td>20-2136431</td>
<td>501 (c) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHARING SHELF INC</td>
<td>47 PURDY AVE PORT CHESTER, NY 10573</td>
<td>84-4315667</td>
<td>501 (c) 3</td>
<td>28,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHEEPFOLD</td>
<td>3170 E LA PALMA AVE ANAHEIM, CA 92806</td>
<td>95-3426900</td>
<td>501 (c) 3</td>
<td>358,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SHELTER FOR ABUSED WOMEN &amp; CHILDREN INC</td>
<td>2635 WEEKS AVE NAPLES, FL 34112</td>
<td>59-2752895</td>
<td>501 (c) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | THE SHEPHERDS TABLE INC  
8106 GEORGIA AVE SILVER SPRING, MD 20910 | 52-1381738 | 501 (C) 3 | 21,100. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | THE SHRINERS HOSPITAL FOR CHILDREN  
2900 N ROCKY POINT DR TAMPA, FL 33607 | 04-2121377 | 501 (C) 3 | 24,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | THE SHUL OF EAGAN  
18 ORME CT SAINT PAUL, MN 55116 | 41-1791384 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | THE SHUMLA SCHOOL INC  
PO BOX 627 COMSTOCK, TX 78837 | 74-2869788 | 501 (C) 3 | 7,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | THE SILOE PROJECT  
217 LOS ANGELES BLVD SAN ANSELMO, CA 94960 | 68-0030247 | 501 (C) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | THE SISKIYOU SCHOOL  
631 CLAY ST ASHLAND, OR 97520 | 82-0540335 | 501 (C) 3 | 11,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | THE SOCIETY FOR CHRISTIAN INSTRUCTION AT BR  
8840 BYRON CENTER AVE SW BYRON CENTER, MI 4 | 38-1438661 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | THE SOCIETY OF JESUS OF NEW ENGLAND  
39 E 83RD ST NEW YORK, NY 10028 | 04-2104399 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | THE SOCIETY OF SAINT ANDREW INC  
3383 SWEET HOLLOW RD BIG ISLAND, VA 24526 | 54-1285793 | 501 (C) 3 | 13,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | THE SOCIETY OF ST VINCENT DE PAUL Diocesan  
901 W BRAKER LN AUSTIN, TX 78758 | 74-2763690 | 501 (C) 3 | 6,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | THE SOCIETY OF ST VINCENT DE PAUL IN THE AR  
3000 GRATIOT AVE DETROIT, MI 48207 | 38-1359592 | 501 (C) 3 | 5,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | THE SOUTHWEST NATIVE-AMERICAN FOUNDATION  
PO BOX W BOULDER, CO 80306 | 42-2061635 | 501 (C) 3 | 21,600. | FMV | N/A | FOR RECIPIENT'S EXEM |

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3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

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   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>THE SPARTANBURG SOUP KITCHEN INC</td>
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<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
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<td>136 S FOREST ST SPARTANBURG, SC 29306</td>
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<td>THE SPAYED CLUB</td>
<td>23-2822590</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>13 TALL TREE CIR BROOMALL, PA 19008</td>
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<tr>
<td>THE SPORTMEN'S TENNIS &amp; ENRICHMENT CENTER IN</td>
<td>22-7037183</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>950 BLUE HILL AVE DORCHESTER CENTER, MA 212</td>
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<td>THE SPRINGDALE ROTARY CHARITABLE FOUNDATION</td>
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<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 6006 SPRINGDALE, AR 72766</td>
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<td>THE STAR CENTER FOUNDATION</td>
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<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6911 S YOSEMITE ST CENTENNIAL, CO 80112</td>
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<td></td>
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<tr>
<td>THE STATE UNIVERSITY COLLEGE AT ONEONTA FOU</td>
<td>22-2403203</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>308 NETZER ADMINISTRATION BUILDING ONEONTA</td>
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<td>THE STATION FOUNDATION</td>
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<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1627 W MAIN STE 258 BOZEMAN, MT 59715</td>
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<tr>
<td>THE STOREHOUSE OF COLLIN COUNTY</td>
<td>27-1883333</td>
<td>501 (C) 3</td>
<td>440,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1401 MIRA VISTA BLVD PLANO, TX 75093</td>
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<td>THE STUDIO MUSEUM IN HARLEM</td>
<td>13-2590805</td>
<td>501 (C) 3</td>
<td>175,500.</td>
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<td>N/A</td>
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<tr>
<td>144 W 125TH STREET NEW YORK, NY 10027</td>
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<td>THE STUDIOS OF KEY WEST INC</td>
<td>20-5116495</td>
<td>501 (C) 3</td>
<td>11,200.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>533 EATON ST KEY WEST, FL 33040</td>
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<tr>
<td>THE SUMMER TREE INSTITUTE</td>
<td>33-0939467</td>
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<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 307 MORONGO VALLEY, CA 92256</td>
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<tr>
<td>THE SUMMIT FOUNDATION</td>
<td>74-2341399</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 4000 BRECKENRIDGE, CO 80424</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

3. Enter total number of other organizations listed in the line 1 table.  

---

JSA 0E1288 1.000  
18674H 1467 V 20-7.21
# SCHEDULE I

## (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE SUN PUBLISHING COMPANY</td>
<td>56-1187623</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE SUNDAY BREAKFAST ASSOCIATION OF PHILADELPHIA</td>
<td>23-1352558</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TANDANA FOUNDATION INC</td>
<td>20-4748423</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TANK LTD</td>
<td>01-0798319</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TASK FORCE FOR GLOBAL HEALTH INC</td>
<td>58-1698648</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE TAUERNS MUSEUM OF ART</td>
<td>54-6026841</td>
<td>501 (C) 3</td>
<td>22,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE THORACIC SURGERY FOUNDATION</td>
<td>36-3635910</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE THRESHOLD FOUNDATION</td>
<td>13-3028214</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TIBETAN COMMUNITY OF NEW YORK AND NEW J</td>
<td>01-0685280</td>
<td>501 (C) 3</td>
<td>37,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TIME IS NOW TO HELP THE CHILDREN AND EL</td>
<td>36-3641124</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE TFC FOUNDATION FOR BODY FOCUSED REPEATIT</td>
<td>77-0266587</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table: .................................................................
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</tbody>
</table>

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>(1) THE TOWER FOUNDATION OF SAN JOSE STATE UNIV</td>
<td>83-0403915</td>
<td>501 (C) 3</td>
<td>45,400</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1 WASHINGTON SQ SAN JOSE, CA 95192</td>
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<tr>
<td>(2) THE TOWER GROVE PARK FOUNDATION</td>
<td>43-1392832</td>
<td>501 (C) 3</td>
<td>53,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>4257 NORTHEAST DR SAINT LOUIS, MO 63110</td>
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<td>(3) THE TREVOR PROJECT INC</td>
<td>95-4681287</td>
<td>501 (C) 3</td>
<td>100,600</td>
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<td>N/A</td>
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<td>8704 SANTA MONICA BLVD WEST HOLLYWOOD, CA 90069</td>
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<td>(4) THE TRUST FOR HIDDEN VILLA</td>
<td>94-1539836</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>26870 MOODY RD LOS ALTOS HILLS, CA 94022</td>
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<tr>
<td>(5) THE TRUSTEES OF FRYEBURG ACADEMY</td>
<td>01-0211505</td>
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<td>FMV</td>
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<td>745 MAIN ST FRYEBURG, ME 04347</td>
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<td>(6) THE TRUSTEES OF THE STEVENS INSTITUTE OF TECH</td>
<td>22-1487354</td>
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<td>128,750</td>
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<td>1 CASTLE POINT TER HOBOKEN, NJ 7030</td>
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<td>(7) THE TZUR FOUNDATION INC</td>
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<td>501 (C) 3</td>
<td>8,500</td>
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<td>418 CLIFTON AVE LAKewood, NJ 8701</td>
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<td>(8) THE U C DAVIS FOUNDATION</td>
<td>94-6081352</td>
<td>501 (C) 3</td>
<td>321,254</td>
<td>FMV</td>
<td>N/A</td>
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<td>202 COUSTEAU PL STE 185 DAVIS, CA 95618</td>
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<td>(9) THE UCL A FOUNDATION</td>
<td>95-2250801</td>
<td>501 (C) 3</td>
<td>2,039,548</td>
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<td>10889 WILSHIRE BLVD STE 1500 LOS ANGELES, CA 90025</td>
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<tr>
<td>(10) THE ULMAN CANCER FUND FOR YOUNG ADULTS INC</td>
<td>52-2057636</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2118 E MADISON ST BALTIMORE,M D 21205</td>
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<tr>
<td>(11) THE UNITARIAN CHURCH IN SUMMIT</td>
<td>22-1508563</td>
<td>501 (C) 3</td>
<td>131,700</td>
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<td>4 WALDRON AVE SUMMIT, NJ 7901</td>
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<td>(12) THE UNITARIAN UNIVERSALIST CONGREGATION OF</td>
<td>58-0707530</td>
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<td>99,333</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>1911 CLIFF VALLEY WAY NE ATLANTA, GA 30329</td>
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</table>

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### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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#### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☑ No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>THE UNITED CHURCH OF CHRIST OF ANNAPOLIS</td>
<td>8 CARVEL CIRCLE EDGECOMER, MD 21037</td>
<td>52-0807721</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE UNITED WAY INC</td>
<td>2207 LINE AVE AMARILLO, TX 79106</td>
<td>75-0800600</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNITED WAY OF BEMIDJI AREA</td>
<td>PO BOX 27 BEMIDJI, MN 56619</td>
<td>41-1567744</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNITED WAY OF CENTRAL MARYLAND INC</td>
<td>1800 WASHINGTON BLVD STE 340 BALTIMORE, MD</td>
<td>52-0591543</td>
<td>501 (C) 3</td>
<td>36,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNITED WAY OF GREATER WATERBURY INC</td>
<td>PO BOX 2688 WATERBURY, CT 6723</td>
<td>06-0646634</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNITED WAY OF SOUTHWESTERN PENNSYLVANIA</td>
<td>PO BOX 735 PITTSBURGH, PA 15230</td>
<td>25-1043578</td>
<td>501 (C) 3</td>
<td>39,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNITED WAY OF WILLIAMSON COUNTY</td>
<td>1111 N INTERSTATE 35 STE 220 ROUND ROCK, TX</td>
<td>23-7396732</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNIVERSITY FOUNDATION CALIFORNIA STATE</td>
<td>25 MAIN ST UNIT 103 CHICO, CA 95928</td>
<td>85-1230865</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNIVERSITY OF ALABAMA AT BIRMINGHAM</td>
<td>1530 3RD AVE S # AB-1230 BIRMINGHAM, AL 352</td>
<td>63-6005396</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE UNIVERSITY OF NORTH FLORIDA FOUNDATION</td>
<td>1 UNIF DR FL # 2900 JACKSONVILLE, FL 32224</td>
<td>23-7167701</td>
<td>501 (C) 3</td>
<td>21,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE UNIVERSITY OF RHODE ISLAND FOUNDATION</td>
<td>79 UPPER COLLEGE RD KINGSTON, RI 2881</td>
<td>05-6014351</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>THE UNIVERSITY OF TENNESSEE FOUNDATION INC</td>
<td>1525 UNIVERSITY AVE RM 223 KNOXVILLE, TN 37</td>
<td>62-1846886</td>
<td>501 (C) 3</td>
<td>140,846.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE UNIVERSITY OF TEXAS AT AUSTIN 1011 SAN JACINTO BLVD STE 205 AUSTIN, TX 78 74-6000203 501 (c) 3 467,107 69 12 11 8 6 7 5</td>
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<td>PO BOX 4486 HOUSTON, TX 77210 74-6001118 501 (c) 3 517,000 51 1 0 2 1 3 4 4 4 4</td>
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<td>THE UNIVERSITY OF VIRGINIA CURRY SCHOOL OF PO BOX 4486 AUSTIN, TX 78 74-6000001 501 (c) 3 517,000 51 1 0 2 1 3 4 4 4 4</td>
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<td>THE URBAN OUTREACH CENTER OF NEW YORK CITY 1745 1ST AVE NEW YORK, NY 10128 82-0642308 501 (c) 3 50,000 50 1 0 4 1 2 3 8</td>
<td>82-0642308 501 (c) 3 50,000 50 1 0 4 1 2 3 8</td>
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<td>THE US CHARITABLE GIFT TRUST 2 INTERNATIONAL PL BOSTON, MA 2110 31-1663020 501 (c) 3 90,647 90 6 4 7 8 7 6 5 3 2 0</td>
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<td>THE V FOUNDATION 14600 WESTON PKWY CARY, NC 27513 13-3705951 501 (c) 3 64,600 64 6 0 0 9 5 1 3 1 3</td>
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<td>THE VAIL JAZZ FOUNDATION INC PO BOX 3035 VAIL, CO 81658 84-1305072 501 (c) 3 15,500 15 5 0 0 7 2 5 0 3 8 4</td>
<td>84-1305072 501 (c) 3 15,500 15 5 0 0 7 2 5 0 3 8 4</td>
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<td>THE VAJRAYANA FOUNDATION 1013 EUREKA CANYON RD WATSONVILLE, CA 95076 77-0181842 501 (c) 3 15,000 15 0 0 0 8 4 2 1 8 1 0 7 7</td>
<td>77-0181842 501 (c) 3 15,000 15 0 0 0 8 4 2 1 8 1 0 7 7</td>
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<td>THE VELLOR CHRISTIAN MEDICAL COLLEGE FOUND 475 RIVERSIDE DR STE 725 NEW YORK, NY 10115 13-2753536 501 (c) 3 22,500 22 5 0 0 2 3 5 3 6 9 2 7 5 13</td>
<td>13-2753536 501 (c) 3 22,500 22 5 0 0 2 3 5 3 6 9 2 7 5 13</td>
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<td>THE VERITAS FORUM INC 1 BROADWAY STE 14 CAMBRIDGE, MA 2142 20-5616941 501 (c) 3 12,500 12 5 0 0 4 1 6 9 4 1 5 6 2 0</td>
<td>20-5616941 501 (c) 3 12,500 12 5 0 0 4 1 6 9 4 1 5 6 2 0</td>
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<td>THE VERMONT CENTER FOR ECOSTUDIES INC PO BOX 2 2001 NW 5055 NORWICH, VT 5055 51-0639428 501 (c) 3 48,500 48 5 0 0 6 3 9 4 2 8 5 1</td>
<td>51-0639428 501 (c) 3 48,500 48 5 0 0 6 3 9 4 2 8 5 1</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>THE VILLAGE SCHOOL INC 1000 W PROSPECT ST WALDWICK, NJ 7463 22-2170151 501 (c) 3 8,000 8 0 0 0 2 1 7 0 1 5 1 2 2 0 0 1</td>
<td>22-2170151 501 (c) 3 8,000 8 0 0 0 2 1 7 0 1 5 1 2 2 0 0 1</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THE VINE CHURCH OF RANCHO CUCAMONGA</td>
<td>20-2652542</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 647 SPOKANE, WA 99210</td>
<td>65-1252399</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>THE VIRGINIA ARTS FESTIVAL INC</td>
<td>54-1786140</td>
<td>501 (C) 3</td>
<td>28,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE VOTER PARTICIPATION CENTER</td>
<td>55-0889748</td>
<td>501 (C) 3</td>
<td>1,289,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE WAREHOUSE THEATRE</td>
<td>37 AUGUSTA ST GREENVILLE, SC 29601</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE WASHINGTON SCHOOL FOR GIRLS</td>
<td>1901 MISSISSIPPI AVE SE STE 104 WASHINGTON,</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE WATERSHIP CENTER INC</td>
<td>44 KAYE RD MILLERTON, NY 12546</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE MAY CHURCH</td>
<td>811 W. TAFT AVENUE SAPULPA, OK 74066</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>THE WELL</td>
<td>90-0142323</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>THE WELL</td>
<td>27-3308269</td>
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<td>20,500.</td>
<td>FMV</td>
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<td>THE WELLHOUSE</td>
<td>27-2973046</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THE WENDE MUSEUM OF THE COLD WAR INC</td>
<td>16-0470118</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
# Schedule I (Form 990) 2020

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | THE WEST COAST CARE FOUNDATION INC  
8218 BELFORD AVE LOS ANGELES, CA 90045 | 20-5340904 | 501 (c) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | THE WEST MARIN FUND  
65 3RD ST SUITE 24 POINT REYES STATION, CA 27-4102086 | 501 (c) 3 | 58,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | THE WEST TEXAS REHABILITATION CENTER  
4601 HARTFORD ST ABILENE, TX 79605 75-0868320 | 501 (c) 3 | 6,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | THE WESTERN YOUTH NETWORK INC  
155 WYN WAY BOONE, NC 28607 56-1454674 | 501 (c) 3 | 10,100 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | THE WIDOWS MITE  
500 W VAN BUREN AVE LAS VEGAS, NV 89106 88-0486834 | 501 (c) 3 | 14,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | THE WILD ANIMAL SANCTUARY A COLORADO NON-PR  
1946 COUNTY ROAD 53 KEENESBURG, CO 80643 84-1351483 | 501 (c) 3 | 40,608 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | THE WILDLIFE CENTER OF SILICON VALLEY  
3027 PENITENCIA CREEK RD SAN JOSE, CA 95132 77-0378066 | 501 (c) 3 | 8,080 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | THE WILLIAM BREMAN JEWISH HOME INC  
3150 HOWELL MILL RD NW ATLANTA, GA 30327 58-0610059 | 501 (c) 3 | 13,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | THE WILLIAM PATERSON UNIVERSITY OF NEW JERS  
300 FOMPONT RD WAYNE, NJ 7470 22-3160107 | 501 (c) 3 | 12,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | THE WINDWARD SCHOOL  
40 W RED OAK LN WEST HARRISON, NY 10604 13-1740499 | 501 (c) 3 | 36,750 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | THE WINGS CLUB FOUNDATION INC  
EAST MEZZANINE SUITE 11 NEW YORK, NY 10166 13-3648312 | 501 (c) 3 | 6,250 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | THE WINDSOR SCHOOL OF SAN DIEGO  
215 9TH ST DEL MAR, CA 92014 33-0294044 | 501 (c) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | |</p>
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<td>(1)</td>
<td>THE WOMENS CENTER INC</td>
<td>PO BOX 1057 CHAPEL HILL, NC 27514</td>
<td>56-1271474</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
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<td>(2)</td>
<td>THE WOMENS HOME</td>
<td>607 WESTHEIMER RD HOUSTON, TX 77006</td>
<td>74-1467811</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(3)</td>
<td>THE WOMENS INITIATIVE</td>
<td>1101 E HIGH ST STE A CHARLOTTE, VA 22</td>
<td>20-5913090</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(4)</td>
<td>THE WOMENS PROJECT &amp; PRODUCTIONS</td>
<td>55 WEST END AVENUE NEW YORK, NY 10023</td>
<td>13-3369451</td>
<td>501 (C) 3</td>
<td>11,750.</td>
<td>FMV</td>
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<td>(5)</td>
<td>THE WOODLANDS UNITED METHODIST CHURCH</td>
<td>2200 LAKE WOODLANDS DR SPRING, TX 77380</td>
<td>74-2011753</td>
<td>501 (C) 3</td>
<td>584,350.</td>
<td>FMV</td>
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<td>(6)</td>
<td>THE WOODROW WILSON PRESIDENTIAL LIBRARY FOUNDATION</td>
<td>PO BOX 24 STAUNTON, VA 24402</td>
<td>54-0505980</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>(7)</td>
<td>THE WOODWARD SCHOOL FOR GIRLS INC</td>
<td>1102 HANCOCK ST QUINCY, MA 2169</td>
<td>04-2952746</td>
<td>501 (C) 3</td>
<td>475,000.</td>
<td>FMV</td>
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<td>(8)</td>
<td>THE WORD AT WORK</td>
<td>1400 WOLFLIN AVE AMARILLO, TX 79109</td>
<td>68-0513148</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>(9)</td>
<td>THE WOMEN'S CIRCLE ARBETE RING INCORPORATED</td>
<td>247 W 37TH ST FN 5 NEW YORK, NY 10018</td>
<td>13-6178558</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>THE WORKS</td>
<td>705 S WEST ST GALENA, IL 61036</td>
<td>36-2646411</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<td>THE WORLD VALUES NETWORK</td>
<td>394 E PALISADE AVE ENGLEWOOD, NJ 7631</td>
<td>11-3483906</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
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<td>(12)</td>
<td>THE WORSHIP PLACE</td>
<td>811 SUN CITY BOULEVARD GEORGETOWN, TX 78633</td>
<td>74-2889382</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
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</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
## (Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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### Part I
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) THE YANKEE INSTITUTE FOR PUBLIC POLICY STUD</td>
<td>52-1358144</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
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<td>501 (C) 3</td>
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<td>(3) THE YOUNG CENTER FOR IMMIGRANT CHILDRENS RI</td>
<td>26-1839249</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(4) THE YOUNG MENS AND YOUNG WOMENS HEbrew ASSO</td>
<td>13-1624229</td>
<td>501 (C) 3</td>
<td>79,300</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5) THE YOUNG MENS CHRISTIAN ASSOCIATION OF GRE</td>
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<td>FMV</td>
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<td>(6) THE YOUNG MENS CHRISTIAN ASSOCIATION OF THE</td>
<td>801 CORPORATE CENTER DR STE 200 RALEIGH, NC</td>
<td>501 (C) 3</td>
<td>29,000</td>
<td>FMV</td>
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<td>FMV</td>
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<td>(9) THEATRE ASPEN</td>
<td>74-2319032</td>
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<td>10,000</td>
<td>FMV</td>
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<td>(10) THEATRE BAY AREA</td>
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<td>N/A</td>
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<td>(11) THEATRE FOR A NEW AUDIENCE INC</td>
<td>13-3059081</td>
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<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) THEATRE FOR THE NEW CITY FOUNDATION INC</td>
<td>13-2694851</td>
<td>501 (C) 3</td>
<td>28,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

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

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
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<th>4 (d) Amount of cash grant</th>
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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THEATRE HORIZON 401 DEKalb St Fl 1 Norristown, PA 19401</td>
<td>20-3708656</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THEATRE LATTE-DA 345 13TH AVE NE Minneapolis, MN 55413</td>
<td>41-1908432</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THEATRE NORTH PO BOX 32 Ironwood, MI 49938</td>
<td>38-2713948</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THEATREWORKS Silicon Valley 350 Twin Dolphin Dr Ste 127 Redwood City, CA</td>
<td>94-2831245</td>
<td>501 (C) 3</td>
<td>12,250.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THEATRIKOS INCORPORATED 11 W Cherry Ave Flagstaff, AZ 86001</td>
<td>23-7245174</td>
<td>501 (C) 3</td>
<td>13,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THEODORE ROOSEVELT CONSERVATION PARTNERSHIP 529 14TH ST NW Ste 500 Washington, DC 20045</td>
<td>04-3706385</td>
<td>501 (C) 3</td>
<td>92,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THERAPY PET PALS of Texas Inc 3930 Bee Caves Rd Ste C west Lake Hills, TX</td>
<td>74-2569091</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THESEND 380 Pacific Coast Hwy Ste 111 huntington Beach</td>
<td>82-5368845</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THESALONICA Agricultural &amp; Industrial Inst 800 3rd Ave Ste 2800 New York, NY 10022</td>
<td>13-1624204</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THINK NEW MEXICO 1227 Paseo de Peralta Santa Fe, NM 87501</td>
<td>31-1611995</td>
<td>501 (C) 3</td>
<td>8,250.</td>
<td>FMV</td>
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<tr>
<td>THIRD CHURCH INC 500 Forest Ave HenriCO, VA 23229</td>
<td>46-4234869</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>THIRD SECTOR CAPITAL PARTNERS INC 225 Franklin St Boston, MA 2110</td>
<td>46-1301032</td>
<td>501 (C) 3</td>
<td>300,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

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# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>THIRD SECTOR NEW ENGLAND INC 89 SOUTH ST 700 BOSTON, MA 2111</td>
<td>04-2261109</td>
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<td>258,500</td>
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<td>THIRD STREET ALLIANCE FOR WOMEN AND CHILDREN 41 N 3RD ST EASTON, PA 18042</td>
<td>26-0795639</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THIRD STREET EDUCATION CENTER 600 W 3RD ST GREENVILLE, NC 27834</td>
<td>26-3224953</td>
<td>501 (C) 3</td>
<td>111,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THIRD WAY INSTITUTE 1025 CONNECTICUT AVE NW STE 400 WASHINGTON,</td>
<td>26-0535276</td>
<td>501 (C) 3</td>
<td>3,001,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THIRTEENTH STREET BAPTIST CHURCH P.O. BOX 1700 ASHLAND, KY 41105</td>
<td>61-1050014</td>
<td>501 (C) 3</td>
<td>9,850</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THISTLE FARMS INC 5122 CHARLOTTE AVE NASHVILLE, TN 37209</td>
<td>58-2050089</td>
<td>501 (C) 3</td>
<td>120,000</td>
<td>FMV</td>
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<tr>
<td>THOMAS AQUINAS COLLEGE 10000 OJAI RD SANTA PAULA, CA 93060</td>
<td>94-1698615</td>
<td>501 (C) 3</td>
<td>20,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THOMAS B FORDHAM INSTITUTE 1016 16TH ST NW WASHINGTON, DC 20036</td>
<td>31-1816446</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>THOMAS COLE HISTORIC HOUSE 218 SPRING ST CASKILL, NY 12414</td>
<td>27-0599147</td>
<td>501 (C) 3</td>
<td>6,860</td>
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<tr>
<td>THOMAS COLLEGE 180 W RIVER RD WATERTOWN, ME 4901</td>
<td>01-0263385</td>
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<td>71,000</td>
<td>FMV</td>
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<tr>
<td>THOMAS HOUSE TEMPORARY SHELTER 12601 MORNINGSIDE AVE APT 6 GARDEN GROVE,</td>
<td>33-0204757</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>THOMAS IRVINE DODGE FOUNDATION 365 MARIE AVE W SAINT PAUL, MN 55118</td>
<td>41-6081794</td>
<td>501 (C) 3</td>
<td>250,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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Schedule I (Form 990) 2020

JSA 0E288 1.000

18674H 1467 V 20-7.21
### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

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<td>PO BOX 316 CHARLOTTESVILLE, VA 22902</td>
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<td>FMV</td>
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<td>1020 WALNUT ST ROOM 537 PHILADELPHIA, PA 19</td>
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<td>THOMAS JEFFERSON UNIVERSITY HOSPITAL</td>
<td>23-2829095</td>
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<td>FMV</td>
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<td>111 S 11TH ST PHILADELPHIA, PA 19107</td>
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<tr>
<td>THOMAS MORE COLLEGE OF LIBERAL ARTS INCORPO</td>
<td>02-0344073</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<tr>
<td>6 MANCHESTER ST MERRIMACK, NH 3054</td>
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<tr>
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<td>THOMPSON FALLS FILM &amp; THEATER FOUNDATION</td>
<td>85-1286154</td>
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<td>FMV</td>
<td>N/A</td>
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<td>PO BOX 1382 THOMPSON FALLS, MT 59873</td>
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<td>THORN</td>
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<td>40,000.</td>
<td>FMV</td>
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<tr>
<td>1240 ROSECRAINS AVE STE 120 MANHATTAN BEACH,</td>
<td></td>
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<tr>
<td>THERAPEUTIC HORSEBACK RIDING INC 19 MALVERN</td>
<td>23-2218431</td>
<td>501 (C) 3</td>
<td>35,500.</td>
<td>FMV</td>
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<td>THORNCROFT EQUESTRIAN CENTER</td>
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<tr>
<td>302 S BROAD ST CLINTON, SC 29325</td>
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<td>13,000.</td>
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<td>THORNEWEL</td>
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<td>6,000.</td>
<td>FMV</td>
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<td>THOROUGHBRED CHARITIES OF AMERICA INC</td>
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<td>10 LAKE AVE SARATOGA SPRINGS, NY 12866</td>
<td>13-3132741</td>
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<td>THOUSAND CURRENTS</td>
<td>77-0071852</td>
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<td>FMV</td>
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<tr>
<td>1330 BROADWAY # 301 OAKLAND, CA 94612</td>
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<tr>
<td>1</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>THOUSAND ISLANDS PERFORMING ARTSFUND INC</td>
<td>22-2317579</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THREE GIRLS THEATRE COMPANY INC</td>
<td>45-1296583</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THREE HOLY WOMEN CATHOLIC CONGREGATION</td>
<td>39-1991510</td>
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<td>5</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>THREE RIVERS WESLEYAN CHURCH</td>
<td>35-1856949</td>
<td>501 (C) 3</td>
<td>43,200.</td>
<td>FMV</td>
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<td>7</td>
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<td>30-0396918</td>
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<td>93,000.</td>
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<td>8</td>
<td>THREE VILLAGE COMMUNITY TRUST INC</td>
<td>14-1889124</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THREEINC</td>
<td>20-3777322</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
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<td>20-4745089</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>THRIVE CHICAGO NFP</td>
<td>47-2478889</td>
<td>501 (C) 3</td>
<td>800,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THRIVE CHURCH INC</td>
<td>45-5200913</td>
<td>501 (C) 3</td>
<td>56,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table... .................................................................

3. Enter total number of other organizations listed in the line 1 table... .................................................................................................
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THRIVE COMMUNITY CHURCH OF LEE COUNTY INC</td>
<td>20041 S TAMIAI TRL STE 1 ESTERO, FL 33928</td>
<td>81-1610359</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>THRIVE COUNSELING CENTER</td>
<td>120 S MARION ST OAK PARK, IL 60302</td>
<td>36-2179793</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>THRIVE INC</td>
<td>400 E BABCOCK ST BOZEMAN, MT 59715</td>
<td>36-3501185</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>THRIVE NETWORKS</td>
<td>180 STEUART STREET #191226 SAN FRANCISCO, CA</td>
<td>33-0316095</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
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<td>5</td>
<td>THRIVE SCHOLARS</td>
<td>160 STATE ST FL 3 BOSTON, MA 2109</td>
<td>45-5619310</td>
<td>501 (C) 3</td>
<td>52,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>THROUGH THE ROFF FELLOWSHIP A MISSIONARY CH</td>
<td>6517 BATES RD WILLIAMSBURG, MI 49690</td>
<td>38-2330482</td>
<td>501 (C) 3</td>
<td>24,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>THRU THE BIBLE RADIO NETWORK</td>
<td>500 N CENTRAL AVE STE 325 GLENDALE, CA 9120</td>
<td>95-6145276</td>
<td>501 (C) 3</td>
<td>14,885.</td>
<td>FMV</td>
<td>N/A</td>
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<td>8</td>
<td>THRUST ATHLETIC FOUNDATION INC</td>
<td>PO BOX 682 NYACK, NY 10960</td>
<td>47-1971962</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>THUNDERBIRD LODGE PRESERVATION SOCIETY</td>
<td>PO BOX 6812 INCLINE VILLAGE, NV 89450</td>
<td>88-0434866</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>THURGOOD MARSHALL COLLEGE FUND INC</td>
<td>901 F ST NW STE 700 WASHINGTON, DC 20004</td>
<td>41-1750692</td>
<td>501 (C) 3</td>
<td>112,050.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>THURSTON COUNTY FOOD BANK</td>
<td>220 THURSTON AVE NE OLYMPIA, WA 98501</td>
<td>23-7297837</td>
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<td>7,200.</td>
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<td>12</td>
<td>TIBA FOUNDATION</td>
<td>163 SAINT JAMES DR PIEDMONT, CA 94611</td>
<td>20-1102853</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
# Schedule I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>TIBET FUND</td>
<td>241 E 32ND ST FL 3 NEW YORK, NY 10016</td>
<td>13-3115145</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>TICKET TO DREAM FOUNDATION</td>
<td>1400 ROCKY RIDGE DR STE 280 ROSEVILLE, CA 9</td>
<td>90-0355853</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIDEPOOL PROJECT</td>
<td>555 BRYANT ST # 429 PALO ALTO, CA 94301</td>
<td>46-2302287</td>
<td>501 (C) 3</td>
<td>224,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIDES CENTER</td>
<td>1014 TORNEY AVENUE SAN FRANCISCO, CA 94129</td>
<td>94-3213100</td>
<td>501 (C) 3</td>
<td>172,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIDES FOUNDATION</td>
<td>PO BOX 29903 SAN FRANCISCO, CA 94129</td>
<td>51-0198509</td>
<td>501 (C) 3</td>
<td>1,130,390.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIDEWATER JEWISH FOUNDATION INC</td>
<td>5000 CORPORATE WOODS DRIVE SUITE 20 VIRGINI</td>
<td>54-1653165</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>TIDEWELL HOSPICE INC</td>
<td>5955 RAND BLVD BRASHER, FL 34238</td>
<td>59-1911861</td>
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<td>36,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>TIFERETH ISRAEL CONGREGATION</td>
<td>7701 16TH ST NW WASHINGTON, DC 20012</td>
<td>52-0743363</td>
<td>501 (C) 3</td>
<td>9,215.</td>
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<td>TIGER ATHLETIC FOUNDATION</td>
<td>PO BOX 711 BATON ROUGE, LA 70821</td>
<td>72-1004960</td>
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<td>N/A</td>
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<tr>
<td>TIGER RAVEN</td>
<td>237 HARVEY RD KINGSTON, TN 37763</td>
<td>62-1536897</td>
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<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIGER WOODS FOUNDATION INC</td>
<td>1 TIGER WOODS WAY ANAHEIM, CA 92801</td>
<td>20-0677815</td>
<td>501 (C) 3</td>
<td>350,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TIGERS UNLIMITED FOUNDATION</td>
<td>PO BOX 351 AUBURN, AL 36831</td>
<td>36-4538203</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **[X]** Yes  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
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<td>13-3676152</td>
<td>501 (C) 3</td>
<td>278,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>TILTED ACRES RESCUE AND ADOPTIONS</td>
<td>46-0736492</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>TIMANOUS FOUNDATION</td>
<td>35-2580434</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>5</td>
<td>TIMBER COVE VOLUNTEER FIRE DEPARTMENT INC</td>
<td>23-7414583</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>9</td>
<td>TIME TO RISE INC</td>
<td>62-1570175</td>
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<td>FMV</td>
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<td>10</td>
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<td>N/A</td>
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<td>11</td>
<td>TIMES UP FOUNDATION</td>
<td>82-4526736</td>
<td>501 (C) 3</td>
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<td>12</td>
<td>TIMOTHY INITIATIVE INC</td>
<td>80-0472803</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

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

(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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## Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<p>| | | | | | | | |</p>
<table>
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<th></th>
<th></th>
<th></th>
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<tr>
<td>(1)</td>
<td>TIMOTHY TWO PROJECT INTERNATIONAL</td>
<td>1340 PATTON AVE STE J ASHEVILLE, NC 28806</td>
<td>45-3052440</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>TIN MOUNTAIN CONSERVATION CENTER INCORPOR</td>
<td>1245 BALD HILL RD ALBANY, NY 12208</td>
<td>02-0353541</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>(3)</td>
<td>TINY HOPE VILLAGE</td>
<td>708 W 17TH ST BRYAN, TX 77803</td>
<td>82-4639863</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>TIOGA POINT MUSEUM ASSN</td>
<td>PO BOX 143 ATHENS, PA 18810</td>
<td>24-0841989</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>TIP OF THE SPEAR FOUNDATION</td>
<td>2401 INTERNET BLVD STE 112 FRISCO, TX 75034</td>
<td>45-3000590</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>TIPPING POINT COMMUNITY</td>
<td>220 MONTGOMERY ST SF SAN FRANCISCO, CA 94104</td>
<td>20-2121739</td>
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<td>2,293,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>TISCH MULTIPLE SCLEROSIS RESEARCH CENTER OF</td>
<td>521 W 57TH ST FL 4 NEW YORK, NY 10019</td>
<td>25-1922851</td>
<td>501 (C) 3</td>
<td>33,500.</td>
<td>FMV</td>
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<tr>
<td>(8)</td>
<td>TIE THE JEWISH ENTREPRENEUR</td>
<td>444 MADISON AVE NEW YORK, NY 10022</td>
<td>47-3697248</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>(9)</td>
<td>TKE FOUNDATION INC</td>
<td>7439 WOODLAND DR INDIANAPOLIS, IN 46278</td>
<td>51-0166412</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>(10)</td>
<td>TLC- THE TREATMENT &amp; LEARNING CENTERS INC</td>
<td>2092 GAITHER RD STE 100 ROCKVILLE, MD 20850</td>
<td>52-0607924</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
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<td>(11)</td>
<td>TMS GLOBAL INC</td>
<td>6234 CROOKED CREEK RD PEACHTREE CORNERS, GA</td>
<td>58-1546441</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
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<td>(12)</td>
<td>T-NET INTERNATIONAL</td>
<td>PO BOX 460579 AURORA, CO 80046</td>
<td>41-1841238</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

<table>
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[Table with organizations' names, EINs, and details of grants or assistance]
### Part I  General Information on Grants and Assistance

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   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
<tr>
<td>(1) TOM FARELL EVANGELISTIC MINISTRIES</td>
<td>56-1703112</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) TOMAH AREA CANCER SUPPORT INC</td>
<td>84-1619331</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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</tr>
<tr>
<td>(3) TOMCHE SHABROS FUND INC</td>
<td>65-0421128</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) TOMCHE SHABROS OF ROCKLAND COUNTY</td>
<td>13-3694712</td>
<td>501 (C) 3</td>
<td>23,610.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(5) TOMCHEI SHABROS DLAKEWOOD INC</td>
<td>04-3731340</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) TOMORROW RIVER SCHOOLS</td>
<td>39-6000676</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) TOMPKINS CONSERVATION</td>
<td>94-3363675</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>(8) TOMPKINS COUNTY SPCA</td>
<td>15-0624378</td>
<td>501 (C) 3</td>
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<tr>
<td>(9) TONY HAWK FOUNDATION</td>
<td>33-0965889</td>
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<td>125,000.</td>
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<td>N/A</td>
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<tr>
<td>(10) TONY LARUSAS ANIMAL RESCUE FOUNDATION</td>
<td>68-0240341</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) TOO YOUNG TO WED</td>
<td>46-5222420</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<tbody>
<tr>
<td>1</td>
<td>TOP OF MICHIGAN TRAILS COUNCIL INC</td>
<td>1678 M 119 PETOSKEY, MI 49770</td>
<td>38-3263521</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2</td>
<td>TOPAZ MUSEUM</td>
<td>PO BOX 241 DELTA, UT 84624</td>
<td>84-1385894</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3</td>
<td>TOPEKA BIBLE CHURCH</td>
<td>1135 SW COLLEGE AVE TOPEKA, KS 66604</td>
<td>48-0597125</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>TOPEKA HABITAT FOR HUMANITY INC</td>
<td>121 NE GORDON ST TOPEKA, KS 66608</td>
<td>48-0980011</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td>TOPEKA RESCUE MISSION INC</td>
<td>600 N KANSAS AVE TOPEKA, KS 66608</td>
<td>48-0688068</td>
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<td>43,000</td>
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<td>N/A</td>
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<td>6</td>
<td>TOPPS-TARGETING OUR PEOPLES PRIORITIES WITH</td>
<td>1000 TOWNSEND DR PINE BLUFF, AR 71601</td>
<td>74-3041819</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
<td>TOPSAIL HIGH SCHOOL PARENT TEACHER STUDENT</td>
<td>48 SALLY LN HAMPSTEAD, NC 28443</td>
<td>35-2369267</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>8</td>
<td>TOR PROJECT INC</td>
<td>56 WATERHOUSE ST APT 001 SOMERVILLE, MA 214</td>
<td>20-8096820</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>9</td>
<td>TORAH ACADEMY OF BERGEN COUNTY</td>
<td>1600 QUEEN ANNE RD TRANECK, NJ 7666</td>
<td>22-2890836</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>10</td>
<td>TORAH AND NATURE FOUNDATION</td>
<td>2711 CENTERVILLE RD WILMINGTON, DE 19808</td>
<td>46-0957232</td>
<td>501 (C) 3</td>
<td>5,400</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>TORAH COMMUNITY FUND INC</td>
<td>C/O JOSH WINTER 4 KATHERINE AVENUE PASSAIC,</td>
<td>27-4316702</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
<td>N/A</td>
</tr>
<tr>
<td>12</td>
<td>TORAS EMES ACADEMY OF MIAMI INC</td>
<td>1025 NE MIAMI GARDENS DR MIAMI, FL 33179</td>
<td>59-1870702</td>
<td>501 (C) 3</td>
<td>102,000</td>
<td>FMV</td>
<td>N/A</td>
</tr>
</tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I

**General Information on Grants and Assistance**

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## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>(1) TORAT SHRAGA INC 1 COPPERBEECH LN LAWRENCE, NY 11559</td>
<td>47-3163235</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) TORCHBEARERS OF THE CAPELWICK MISSIONARY F</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td></td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) TORRANCE MEMORIAL MEDICAL CENTER HEALTH CAR</td>
<td>3330 LOMITA BLVD TORRANCE, CA 90503</td>
<td>501 (C) 3</td>
<td>39,250.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) TOUCH THE WORLD INC</td>
<td>1 MAPLE ST ALLENDALE, NJ 7401</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) TOUCHED BY AN ANIMAL</td>
<td>2131 W BERWYN AVE CHICAGO, IL 60625</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) TOUR FOR DIVERSITY INC</td>
<td>11 AUGUSTA RD MILTON, MA 2186</td>
<td>501 (C) 3</td>
<td>11,200.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) TOW VCHESED FOUNDATION INC</td>
<td>PO BOX 855 MONSEY, NY 10952</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) TOWER MILL SCHOOL</td>
<td>1813 WEST 17TH ST. WILMINGTON, DE 19806</td>
<td>501 (C) 3</td>
<td>69,500.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) TOWN &amp; VILLAGE CONSERVATIVE SYNAGOGUE INC</td>
<td>331 E 14TH ST NEW YORK, NY 10003</td>
<td>501 (C) 3</td>
<td>6,260.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) TOWN HALL ASSOCIATION</td>
<td>720 SENECA ST STE A SEATTLE, WA 98101</td>
<td>501 (C) 3</td>
<td>26,500.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) TOWN OF DURHAM</td>
<td>8 NEWMARKET RD DURHAM, NH 3824</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) TOWN OF LIMON COLORADO</td>
<td>PO BOX 9 LIMON, CO 80828</td>
<td>501 (C) 3</td>
<td>173,581.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TOWN OF PALM BEACH UNITED WAY INC</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TOWN SCHOOL FOR BOYS</td>
<td>94-1170412</td>
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<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TOWN SCHOOL INC</td>
<td>13-1393610</td>
<td>501 (C) 3</td>
<td>47,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
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<td>23-6000444</td>
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<td>TPF SPECIAL ASSETS FUND</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
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<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
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<tr>
<td>TRADERS POINT CHRISTIAN CHURCH INC</td>
<td>35-1181695</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT’S EXEM</td>
<td></td>
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<tr>
<td>TRAILS 2000 INC</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TRANS WORLD RADIO</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>TRANSCENDENCE THEATER COMPANY</td>
<td>46-2182873</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TRANSPERFORMANCE LUTHERAN CHURCH</td>
<td>41-0850643</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<td>TRANSFORM CHURCH</td>
<td>83-3731320</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRANSFORMATION VILLAGE FOUNDATION</td>
<td>80-0854646</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRANSFORMATIONS BY AUSTIN ANGELS</td>
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<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
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<td>TRANSFORMING EDUCATION INC</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>199,750.</td>
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<td>N/A</td>
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<tr>
<td>TRANSITION HOUSE</td>
<td>77-0099755</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>TRANSITION PROJECTS INC</td>
<td>93-0591582</td>
<td>501 (C) 3</td>
<td>5,750.</td>
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<tr>
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<td>30-0539205</td>
<td>501 (C) 3</td>
<td>250,000.</td>
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<tr>
<td>TRANSITIONAL RESOURCES</td>
<td>91-0967836</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>TRANSLATIONAL GENOMICS RESEARCH INSTITUTE F</td>
<td>33-1092191</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>TRANSLATIONAL PULMONARY AND IMMUNOLOGY RESE</td>
<td>47-2364652</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>TRANSLIFELINE</td>
<td>47-2097494</td>
<td>501 (C) 3</td>
<td>148,770.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>TRANSPARENCY TEXAS 6125 LUTHER LN PMB 262 DALLAS, TX 75225 27-1365206 501 (C) 3 90,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRANSPARENT EM LTD 310 ATLANTIC AVE APT 3 BROOKLYN, NY 11201 47-5175472 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRANSPLANT RESOURCE CENTER OF MARYLAND INC 1730 TWIN SPRINGS RD STE 200 HALETHORPE, MD 52-1736533 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRANSPORTATION ALTERNATIVES INC 111 JOHN ST RM 260 NEW YORK, NY 10038 51-0186015 501 (C) 3 21,267. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRANSYLVANIA CHRISTIAN MINISTRY INC PO BOX 958 BREVARD, NC 28712 56-1292875 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRAP GARDEN INC 281 CUMBERLAND BND APT 339 NASHVILLE, TN 37 81-2052231 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRASH MOUNTAIN PROJECT INC 4110 NW 62ND ST STE B TOPEKA, KS 66618 26-4775012 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRAUMA-SENSITIVE AWARENESS FOUNDATION INC 500 E LANCASTER AVE UNIT 126D WAYNE, PA 190 83-3207758 501 (C) 3 50,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRAVELING STORIES 1240 E PLAZA BLVD STE 604 # 430 NATIONAL CI 32-0298884 501 (C) 3 7,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TRAVIS MANION FOUNDATION 164 E STATE ST DOYLESTOWN, PA 18901 41-2237951 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>TREASURE COAST FOOD BANK INCORPORATED 401 ANGLE RD FORT PIERCE, FL 34947 65-0123281 501 (C) 3 153,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   ![ Yes ] Yes  

   ![ No ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>TREASURE VALLEY CLASSICAL ACADEMY INC</td>
<td>81-4720145</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2</td>
<td>TREASURY HISTORICAL ASSOCIATION</td>
<td>23-7389186</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>TREATMENT ADVOCACY CENTER</td>
<td>54-1905826</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>TREBUCHET INC</td>
<td>82-4718373</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>TREDYFFRIN &amp; EASTTOWN CARE</td>
<td>04-3846699</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
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<td>6</td>
<td>TREDYFFRIN/EASTOWN SCHOOL DISTRICT</td>
<td>23-1715231</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>TREE HOUSE HUMANE SOCIETY</td>
<td>7225 N WESTERN AVE CHICAGO, IL 60645</td>
<td>23-7444825</td>
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<td>5,500.</td>
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<td>8</td>
<td>TREE TRUST</td>
<td>1419 ENERGY PARK DR SAINT PAUL, MN 55108</td>
<td>41-1291626</td>
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<td>27,464.</td>
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<td>91-1425676</td>
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<td>116,500.</td>
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<td>10</td>
<td>TREEHOUSE INC</td>
<td>5757 WAYZATA BLVD MINNEAPOLIS, MN 55416</td>
<td>36-3287099</td>
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<td>8,000.</td>
<td>FMV</td>
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<td>11</td>
<td>TREEHOUSE WILDLIFE CENTER INC</td>
<td>23956 GREEN ACRES RD DOW, IL 62022</td>
<td>37-1093617</td>
<td>501 (C) 3</td>
<td>5,500.</td>
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<td>12</td>
<td>TREELINE PASS</td>
<td>5910 S UNIVERSITY BLVD STE 149 GREENWOOD VI</td>
<td>82-5279131</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**SCHEDULE I**  
(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.  

**Part I** General Information on Grants and Assistance  
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>TREEPeople INC</td>
<td>12601 MULHOLLAND DR BEVERLY HILLS, CA 90210</td>
<td>23-7314838</td>
<td>501 (C) 3</td>
<td>21,500</td>
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<tr>
<td>TREES ATLANTA INC</td>
<td>225 CHESTER AVE SE ATLANTA, GA 30316</td>
<td>58-1584758</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<td>TREES FOR THE FUTURE INC</td>
<td>1400 SPRING ST SILVER SPRING, MD 20910</td>
<td>52-1644869</td>
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<td>48,500</td>
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<td>TREES WATER AND PEOPLE</td>
<td>633 REMINGTON ST FORT COLLINS, CO 80524</td>
<td>84-1462044</td>
<td>501 (C) 3</td>
<td>7,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TREGARON CONSERVANCY</td>
<td>2954 MACOMB ST NW WASHINGTON, DC 20008</td>
<td>20-5111004</td>
<td>501 (C) 3</td>
<td>6,000</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRENTON CHILDRENS CHORUS</td>
<td>490 GRAND AVE EWING, NJ 8628</td>
<td>45-2633120</td>
<td>501 (C) 3</td>
<td>6,000</td>
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<td>TRENTON MUSIC MAKERS INC</td>
<td>PO BOX 5206 TRENTON, NJ 8638</td>
<td>22-3559611</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>TREVOR DAY SCHOOL</td>
<td>312 E 95TH ST NEW YORK, NY 10128</td>
<td>13-1635261</td>
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<tr>
<td>TRi CITY VOLUNTEERS INC</td>
<td>37350 JOSEPH ST FREMONT, CA 94536</td>
<td>94-2217681</td>
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<td>6,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRi COUNTY HUMANE SOCIETY</td>
<td>21287 BOCA RIO RD BOCA RATON, FL 33433</td>
<td>65-0719233</td>
<td>501 (C) 3</td>
<td>10,500</td>
<td>FMV</td>
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<tr>
<td>TRi COUNTY SENIOR NUTRITION PROJECT INCORPO</td>
<td>4114 AIRPORT DR DENISON, TX 75020</td>
<td>75-1691230</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRi STATE FOOD BANK INC</td>
<td>2504 LYNCH RD EVANSVILLE, IN 47711</td>
<td>35-1539870</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) TRIANGLE CLUB OF PRINCETON UNIVERSITY</td>
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<td>501 (c) 3</td>
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<td>91 UNIVERSITY PL PRINCETON, NJ 8540</td>
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<td>(2) TRIANGLE COMMUNITY CHURCH</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<tr>
<td>4216 KILDAIRE FARM RD APEX, NC 27539</td>
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<td>(3) TRIANGLE COMMUNITY FOUNDATION</td>
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<td>FMV</td>
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<td>PO BOX 12729 DURHAM, NC 27709</td>
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<td>(4) TRIANGLE LAND CONSERVANCY INC</td>
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<td>501 (c) 3</td>
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<td>FMV</td>
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<td>514 S DUKE ST DURHAM, NC 27701</td>
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<td>(5) TRINITY RESIDENTIAL OPTIONS FOR SUBSTANCE</td>
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<td>1820 JAMES ST DURHAM, NC 27707</td>
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<td>(6) TRIBE CHURCH</td>
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<td>2606 DWIGHT WAY BERKELEY, CA 94704</td>
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<td>(7) TRI-BORO VOLUNTEER AMBULANCE CORPS INC</td>
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<td>PO BOX 204 PARK RIDGE, NJ 7656</td>
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<td>(8) TRI-CITIES CHINESE CHRISTIAN AND MISSIONARY</td>
<td>81-1496733</td>
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<td>2004 GEORGE WASHINGTON WAY RICHLAND, WA 993</td>
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<td>(9) TRI-CITIES FOOD BANK</td>
<td>91-1011971</td>
<td>501 (c) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>420 W DESCHUTES AVE RENNEWICK, WA 99336</td>
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<td>(10) TRI-CITY BAPTIST CHURCH</td>
<td>86-0257221</td>
<td>501 (c) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2211 W GERMANN RD CHANDLER, AZ 85286</td>
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<tr>
<td>(11) TRICKLE UP PROGRAM INC</td>
<td>06-1043042</td>
<td>501 (c) 3</td>
<td>28,550.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>104 W 27TH ST NEW YORK, NY 10001</td>
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<tr>
<td>(12) TRI-COUNTY COOPERATIVE MINISTRIES</td>
<td>75-3131961</td>
<td>501 (c) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<tr>
<td>615 S EAGLE ST WEIMAR, TX 78962</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a)</th>
<th>2 (b)</th>
<th>3 (c)</th>
<th>4 (d)</th>
<th>5 (e)</th>
<th>6 (f)</th>
<th>7 (g)</th>
<th>8 (h)</th>
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<tbody>
<tr>
<td>Name and address of organization or government</td>
<td>EIN</td>
<td>IRC section (if applicable)</td>
<td>Amount of cash grant</td>
<td>Amount of non-cash assistance</td>
<td>Method of valuation</td>
<td>Description of noncash assistance</td>
<td>Purpose of grant or assistance</td>
</tr>
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<td>1) TRI-COUNTY SCHOLARSHIP FUND</td>
<td>22-2354475</td>
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<td>57,000.</td>
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<td>FMV</td>
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<tr>
<td>2) TRIDENT TECHNICAL COLLEGE FOUNDATION INCORP</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
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<td>FMV</td>
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<td>3) TRIDENT UNITED WAY INC</td>
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<td>4) TRIFORM ENTERPRISES LIMITED</td>
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<td>5) TRIGG-C M RUSSELL FOUNDATION INC</td>
<td>81-6003526</td>
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<td>25,000.</td>
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<td>6) TRILLIUM KIDS INC</td>
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<tr>
<td>7) TRINITARIAN CONGREGATIONAL CHURCH</td>
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<td>FMV</td>
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<td>10) TRINITY AVENUE PRESBYTERIAN CHURCH</td>
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<td>11) TRINITY BAPTIST CHURCH</td>
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<td>12) TRINITY BAPTIST CHURCH</td>
<td>75-6004228</td>
<td>501 (C) 3</td>
<td>14,000.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 

3. Enter total number of other organizations listed in the line 1 table:

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) TRINITY BAPTIST CHURCH OF YUKON</td>
<td>73-1109213</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(2) TRINITY BIBLE CHURCH</td>
<td>86-0215940</td>
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<td>N/A</td>
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<tr>
<td>(3) TRINITY BIBLE CHURCH AT RIVER OAKS</td>
<td>64-0690622</td>
<td>501 (c) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(4) TRINITY BOSTON CONNECTS</td>
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<td>FMV</td>
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<tr>
<td>(5) TRINITY CATHEDRAL</td>
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<td>(6) TRINITY CENTER WALNUT CREEK</td>
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<td>75-1324332</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>(2) TRINITY CHURCH CONGREGATIONAL</td>
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<td>(3) TRINITY CHURCH OF SUNNYVALE</td>
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<td>(7) TRINITY COMMUNITY CHURCH OF APEX</td>
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<td>(9) TRINITY EPISCOPAL CHURCH</td>
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<td>(12) TRINITY EPISCOPAL CHURCH</td>
<td>73-0610890</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1)</td>
<td>TRINITY EPISCOPAL CHURCH 469 NW WALL ST BEND, OR 97703</td>
<td>93-0427371</td>
<td>501 (C) 3</td>
<td>5,800.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(2)</td>
<td>TRINITY EPISCOPAL CHURCH - HARTFORD, CT 120 SIGOURNEY STREET HARTFORD, CT 6105</td>
<td>06-0646776</td>
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<td>TRINITY EPISCOPAL CHURCH, MILTON, CT 536 MILTON ROAD LITCHFIELD, CT 6759</td>
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<td>7,500.</td>
<td>FMV</td>
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<td>(4)</td>
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<td>25-1271008</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>TRINITY EPISCOPAL SCHOOL INC 3850 PITTMAY DR RICHMOND, VA 23235</td>
<td>54-0891886</td>
<td>501 (C) 3</td>
<td>145,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>TRINITY EPISCOPAL SCHOOLS CORPORATION 139 W 91ST ST NEW YORK, NY 10024</td>
<td>13-5563003</td>
<td>501 (C) 3</td>
<td>380,227.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>TRINITY EVANGELICAL CHURCH INC 2685 STEVE TATE HWY MARBLE HILL, GA 30148</td>
<td>20-0459189</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>TRINITY EVANGELICAL LUTHERAN CHURCH 431 PHILADELPHIA AVE CHAMBERSBURG, PA 17201</td>
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<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>TRINITY EVANGELICAL LUTHERAN CHURCH 5969 BROCKTON AVE RIVERSIDE, PA 17201</td>
<td>95-1831115</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(10)</td>
<td>TRINITY HALL 101 CORREGIDOR RD EATONTOWN, NJ 7724</td>
<td>45-4641636</td>
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<td>60,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>TRINITY HIGH SCHOOL 7574 DIVISION ST RIVER FOREST, IL 60305</td>
<td>36-2174835</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>TRINITY LUTHERAN CHURCH 421 NORTH MAIN STREET GREENVILLE, SC 29601</td>
<td>57-0347503</td>
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<td>70,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. TRINITY LUTHERAN CHURCH 706 SW 6TH AVE CAPE CORAL, SD 57078 65-0077535 501 (C) 3 6,500. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>2. TRINITY LUTHERAN CHURCH 2060 COUNTY ROAD 6 LONG LAKE, MN 55356 41-1339425 501 (C) 3 17,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>3. TRINITY LUTHERAN CHURCH 2163 MAYHEW LAKE RD NE SAUK RAPIDS, TX 7737 41-0736259 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>4. TRINITY LUTHERAN CHURCH 403 BROADWAY AVE YANKTON, MN 56379 46-0235882 501 (C) 3 20,550. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>5. TRINITY LUTHERAN CHURCH 2201 ROLLINS RD COLUMBIA, TX 7707 23-7426726 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>6. TRINITY LUTHERAN CHURCH 800 HOUSTON AVE HOUSTON, FL 33991 74-1238451 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>7. TRINITY LUTHERAN CHURCH 5201 SPRING CYPRESS RD SPRING, MO 65203 74-6082112 501 (C) 3 10,560. FMV N/A FOR RECIPIENT'S EXEM</td>
<td>8. TRINITY LUTHERAN CHURCH ELCA 14088 CLAYTON RD CHESTERFIELD, MO 63017 43-6056753 501 (C) 3 14,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
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   - No  

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<td>Method of valuation</td>
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<td>501 (C) 3</td>
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<td>11</td>
<td>TRINITY PROTESTANT REFORMED CHURCH</td>
<td>3385 VAN BUREN ST HUDSONVILLE, MI 49426</td>
<td>38-3629652</td>
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<td>7,000.</td>
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<td>12</td>
<td>TRINITY REFORMED CHURCH</td>
<td>2401 S ENDWRIGHT RD BLOOMINGTON, IN 47403</td>
<td>35-1980237</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 
3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>TRINITY REFORMED CHURCH OF ORANGE CITY IOWA</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY REPERTORY COMPANY</td>
<td>201 WASHINGTON ST PROVIDENCE, RI 2903</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY SCHOOL</td>
<td>2650 SAND HILL RD MENLO PARK, CA 94025</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY SCHOOL OF MIDLAND TEXAS</td>
<td>3500 W MADLEY AVE MIDLAND, TX 7907</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY SCHOOLS INC</td>
<td>107 S GREENLAWN AVE SOUTH BEND, IN 46617</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY UNITED CHURCH OF CHRIST</td>
<td>760 NORTH AVENUE DEERFIELD, IL 60015</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TRINITY UNITED METHODIST CHURCH</td>
<td>903 FOREST AVE HENRICO, TX 76013</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TRINITY UNITED METHODIST CHURCH</td>
<td>4000 NW 53RD AVE GAINESVILLE, FL 32653</td>
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<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY UNITED METHODIST CHURCH</td>
<td>1200 W GREEN OAKS BLVD ARLINGTON, VA 23229</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY UNITED METHODIST CHURCH - SUNNYVALE</td>
<td>PO BOX 70199 SUNNYVALE, CA 94086-0199</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>TRINITY UNITED METHODIST CHURCH AND NURSERY</td>
<td>1024 LAKE AVE WILMETTE, IL 60091</td>
<td>501 (C) 3</td>
<td>5,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>TRINITY UNITED PRESBYTERIAN CHURCH</td>
<td>13922 PROSPECT AVE SANTA ANA, CA 92705</td>
<td>501 (C) 3</td>
<td>45,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

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**Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**

- Yes [ ]
- No [x]

**Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

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<td>2</td>
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<td>74-1109633</td>
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<td>3</td>
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<td>4</td>
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<td>36-3803526</td>
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<td>TRINITY VINEYARD INC</td>
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<td>FMV</td>
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<th>(g) Description of noncash assistance</th>
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<td>FMV</td>
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<td>7,000.</td>
<td>FMV</td>
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<td>TRUE CONCORD VOICES AND ORCHESTRA INC</td>
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<td>FMV</td>
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<td>FMV</td>
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<td>TRUFUND FINANCIAL SERVICES INC</td>
<td>59-3814814</td>
<td>501 (C) 3</td>
<td>500,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>TRUMAN MEDICAL CENTER CHARITABLE FOUNDATION</td>
<td>2310 HOLMES ST STE 735 KANSAS CITY, MO 6410</td>
<td>43-1194064 501 (C) 3</td>
<td>7,500.</td>
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<td>FOR RECIPIENT’S EXEM</td>
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<td>TRUST FOR PUBLIC LAND</td>
<td>101 MONTGOMERY ST STE 900 SAN FRANCISCO, CA</td>
<td>23-7222333 501 (C) 3</td>
<td>265,350.</td>
<td>FMV</td>
<td>N/A</td>
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<td>TRUST WOMEN FOUNDATION INC</td>
<td>5107 E KELLOGG DR WICHITA, KS 67218</td>
<td>27-324673 501 (C) 3</td>
<td>8,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TRUSTBRIDGE GLOBAL FOUNDATION USA INC</td>
<td>1901 ULMERTON RD STE 400 CLEARWATER, FL 337</td>
<td>59-3498416 501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TRUSTEES FOR HARVARD UNIVERSITY</td>
<td>1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA</td>
<td>53-0199180 501 (C) 3</td>
<td>24,082.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>TRUSTEES OF AMHERST COLLEGE</td>
<td>PO BOX 5000 AMHERST, MA 1002</td>
<td>04-2103542 501 (C) 3</td>
<td>329,707.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>TRUSTEES OF BOSTON UNIVERSITY</td>
<td>881 COMMONWEALTH AVE FL 4 BOSTON, MA 2215</td>
<td>04-2103547 501 (C) 3</td>
<td>1,113,150.</td>
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<td>TRUSTEES OF DARTMOUTH COLLEGE</td>
<td>7 LEBANON ST STE 302 HANOVER, NH 3755</td>
<td>02-0222111 501 (C) 3</td>
<td>2,469,560.</td>
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<td>TRUSTEES OF DARTMOUTH COLLEGE</td>
<td>20 N MAIN ST HANOVER, NH 3755</td>
<td>10-0066710 501 (C) 3</td>
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<td>TRUSTEES OF DARTMOUTH COLLEGE</td>
<td>10 N MAIN ST STE 103 HANOVER, NH 3755</td>
<td>02-0520828 501 (C) 3</td>
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<td>TRUSTEES OF DARTMOUTH COLLEGE</td>
<td>6068 BLUNT ALUMNI CTR HANOVER, NH 3755</td>
<td>36-4767215 501 (C) 3</td>
<td>5,625.</td>
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<td>TRUSTEES OF DEERFIELD ACADEMY</td>
<td>PO BOX 87 DEERFIELD, MA 1342</td>
<td>04-2103563 501 (C) 3</td>
<td>182,000.</td>
<td>FMV</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

JSA 0E1288 1.000

18674H 1467 V 20-7.21
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>(1) TRUSTEES OF GRINNELL COLLEGE</td>
<td>42-0680387</td>
<td>501 (C) 3</td>
<td>100,928.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) TRUSTEES OF HAMILTON COLLEGE</td>
<td>15-0532200</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3) TRUSTEES OF MOUNT HOLYOKE COLLEGE</td>
<td>04-2103578</td>
<td>501 (C) 3</td>
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<td>(4) TRUSTEES OF NEWARK ACADEMY</td>
<td>22-1487270</td>
<td>501 (C) 3</td>
<td>39,180.</td>
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<td>(5) TRUSTEES OF PHILLIPS ACADEMY</td>
<td>04-2103579</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(6) TRUSTEES OF PRINCETON UNIVERSITY</td>
<td>21-0634501</td>
<td>501 (C) 3</td>
<td>5,875,701.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(7) TRUSTEES OF RESERVATIONS</td>
<td>04-2105780</td>
<td>501 (C) 3</td>
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<tr>
<td>(8) TRUSTEES OF ROBERT COLLEGE OF ISTANBUL</td>
<td>13-5596877</td>
<td>501 (C) 3</td>
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<td>(9) TRUSTEES OF THAYER ACADEMY</td>
<td>04-2105781</td>
<td>501 (C) 3</td>
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<tr>
<td>(10) TRUSTEES OF THE COLLEGE OF THE HOLY CROSS</td>
<td>04-2103558</td>
<td>501 (C) 3</td>
<td>214,000.</td>
<td>FMV</td>
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<tr>
<td>(11) TRUSTEES OF THE CONGREGATION SHEARITH ISRAEL</td>
<td>13-1623870</td>
<td>501 (C) 3</td>
<td>12,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(12) TRUSTEES OF THE LAWRENCE ACADEMY AT GROTON</td>
<td>06-2105775</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<td>1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No</td>
</tr>
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<td>2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
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</tbody>
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<tr>
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<tr>
<td>Line</td>
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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>TRUTH IN NUMBERS INC</td>
<td>83-1499027</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>37 HIGHLAND AVE SHORT HILLS, NJ 7078</td>
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<td>TRYALL FUND</td>
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<td>1212 REISTERSTOWN RD PIKESVILLE, MD 21208</td>
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<td>TSINGHUA EDUCATION FOUNDATION N A INC</td>
<td>52-2073001</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<tr>
<td>2200 SAND HILL RD STE 160 MENLO PARK, CA 94</td>
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<td>TURMAN</td>
<td>41-1240048</td>
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<td>9,900.</td>
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<td>4432 CHICAGO AVE SOUTH MINNEAPOLIS, MN 5540</td>
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<td>TUCKER FIRST UNITED METHODIST CHURCH</td>
<td>58-6011835</td>
<td>501 (C) 3</td>
<td>18,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5095 LAVISTA RD TUCKER, GA 30084</td>
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<td>TUCKERNUCK LAND TR INC</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 1073 NANTUCKET, MA 2554</td>
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<td>TUCSON BOTANICAL GARDENS</td>
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<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2150 N ALVERNON WAY TUCSON, AZ 85712</td>
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<td>TUCSON CENTER FOR WOMEN AND CHILDREN</td>
<td>86-0312162</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>2545 E ADAMS ST TUCSON, AZ 85716</td>
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<td>TUCSON DESERT SONG FESTIVAL</td>
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<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>PO BOX 65866 TUCSON, AZ 8528</td>
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<td>TUCSON PARKS FOUNDATION</td>
<td>86-0462825</td>
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<tr>
<td>4927 E CECELIA ST TUCSON, AZ 85711</td>
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<td>TUCSON SYMPHONY SOCIETY</td>
<td>86-0107538</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>2175 N 6TH AVE TUCSON, AZ 85705</td>
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<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>PO BOX 18320 TUCSON, AZ 85731</td>
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   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>1</td>
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<td>68-0522325</td>
<td>501 (C) 3</td>
<td>11,700.</td>
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<td>2</td>
<td>TUMWATER SCHOOL DISTRICT</td>
<td>91-0936197</td>
<td>501 (C) 3</td>
<td>10,000.</td>
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<td>501 (C) 3</td>
<td>25,000.</td>
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<td>4</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>TURNER FARM INC</td>
<td>20-4055573</td>
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<td>TURNING POINT FOR GOD</td>
<td>33-0095805</td>
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<td>53,200.</td>
<td>FMV</td>
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<td>TURNOUT ACTIVISM</td>
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<td>FMV</td>
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<td>12</td>
<td>TUTWILER COMMUNITY EDUCATION CENTER INC</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Entry</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (f if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>TUXEDO PARK SCHOOL</td>
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<td>TWIN CITIES PUBLIC TELEVISION INC</td>
<td>41-0769851</td>
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<td>3</td>
<td>TWIN CITIES RISE</td>
<td>41-1761118</td>
<td>501 (C) 3</td>
<td>13,500</td>
<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>TWIN CITY AREA CATHOLIC SCHOOL FUND INC</td>
<td>23-7129409</td>
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<td>5</td>
<td>TWIN LAKES BAPTIST CHURCH, INC.</td>
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<td>9</td>
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<td>11</td>
<td>TWO RIVERS YMCA INC</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

Employer identification number

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>TX HILL COUNTRY SHOOTING CLUB INC</td>
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<tr>
<td>PO BOX 598 COMFORT, TX 78013</td>
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<tr>
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<tr>
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<tr>
<td>U S FRIEND OF YAD EZRAH</td>
<td>13-3887075</td>
<td>501 (C) 3</td>
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<tr>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) U S PROVINCE OF THE MISSIONARY OBLATES OF M</td>
<td>52-2133725</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(2) USPIRE INC</td>
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<td>(4) UCUAN</td>
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<td>(5) UCOF DALLAS</td>
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<td>(6) UIAF FEDERATION OF GREENWICH INC</td>
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<td>44,175.</td>
<td>FMV</td>
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<td>(7) UKRAINIAN CATHOLIC EDUCATION FOUNDATION</td>
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<tr>
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<td>(8) UKRAINIAN CATHOLIC METROPOLITAN ARCHDIOCES</td>
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<td>FMV</td>
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<tr>
<td>810 N FRANKLIN ST PHILADELPHIA, PA 19123</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
<tr>
<td>222 E 6TH ST NEW YORK, NY 10003</td>
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<td>(10) ULI FOUNDATION</td>
<td>23-7133957</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>P.O. BOX 418168 BOSTON, MA 02241-8168</td>
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<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>ULTIMATE IMPACT INC 1025 YERBA BUENA AVE OAKLAND, CA 94608</td>
<td>81-4505027</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
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<td>ULTRAVIOLET EDUCATION FUND PO BOX 92592 WASHINGTON, DC 20090</td>
<td>47-1872208</td>
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<td>UMMEED CHILD DEVELOPMENT FUND INC 218 HARVARD ST QUINCY, MA 2170</td>
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<td>UNOM NEW DAY CENTERS INC 3333 E VAN BUREN ST PHOENIX, AZ 85008</td>
<td>86-0521062</td>
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<td>FMV</td>
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<td>UMBC-WRIGHT CORPORATION 65 MOBILE ST MOBILE, AL 36607</td>
<td>63-0310782</td>
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<tr>
<td>UNACCOMPANIED STUDENTS INITIATIVE 386 PATTON AVE CHEYENNE, WY 82007</td>
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<td>127,549.</td>
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<tr>
<td>UNC ESHELMAN SCHOOL OF PHARMACY FOUNDATION 194 FINLEY GOLF COURSE RD # 10 CHAPEL HILL,</td>
<td>56-6037918</td>
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<td>UNC HEALTH FOUNDATION 123 W FRANKLIN ST., SUITE 510 CH#7565 CHAPE</td>
<td>56-6057494</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table:  

3. Enter total number of other organizations listed in the line 1 table:  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>UNC LINEBERGER COMPREHENSIVE CANCER CENTER</td>
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<td>FMV</td>
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<td>UNCOMMON GOOD</td>
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<td>UND ALUMNI ASSOCIATION AND FOUNDATION</td>
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</tr>
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3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
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<td>2. UNIFIED SCHOOL DISTRICT 248 EDUCATION FOUND</td>
<td>48-1081125</td>
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<td>3. UNIFIED SCHOOL DISTRICT OF ANTIGO***</td>
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<td>4. UNIFORM FUNDING FOUNDATION</td>
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<td>7. UNION CHURCH OF LAHARPE</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...
## Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>PO BOX 306 MISSOULA, MT 59806</td>
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<tr>
<td>PO BOX 1957 FORT WORTH, TX 76101</td>
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<td>38 E 37TH ST NEW YORK, NY 10016</td>
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<td>PO BOX 3203 NORFOLK, VA 23514</td>
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<td>UNION MISSION INC</td>
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<td>FMV</td>
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<td>UNION OF CONCERNED SCIENTISTS INC</td>
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<td>UNION OF MINORITY NEIGHBORHOODS INC</td>
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<td>FMV</td>
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<tr>
<td>42 SEAVENRS AVENUE JAMAICA PLAIN, MA 2130</td>
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<tr>
<td>UNION OF ORTHODOX JEWISH CONGREGATIONS OF A</td>
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<td>930,100.</td>
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<td>11 BROADWAY FL 13 NEW YORK, NY 10004</td>
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<td>UNION PRESBYTERIAN SEMINARY</td>
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<td>11,000.</td>
<td>FMV</td>
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<tr>
<td>2800 N HILLSIDE AVE WICHITA, KS 67219</td>
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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

⚠ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☒, No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<td>1</td>
<td>UNION SETTLEMENT ASSOC 237 E 104TH ST NEW YORK, NY 10029 13-1632530 501 (C) 3</td>
<td>214,000.</td>
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<td>2</td>
<td>UNION STATION HOMELESS SERVICES 825 E ORANGE GROVE BLVD PASADENA, CA 91104 95-3958741 501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>UNION TEMPLE OF BROOKLYN 17 EASTERN PKWY BROOKLYN, NY 11238 11-1672824 501 (C) 3</td>
<td>15,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>UNION THEOLOGICAL SEMINARY 3041 BROADWAY NEW YORK, NY 10027 13-1624238 501 (C) 3</td>
<td>29,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>UNIONTOWN AREA SCHOOL DISTRICT 205 WILSON AVENUE UNINTOWN, PA 15401 25-1158498 501 (C) 3</td>
<td>9,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>UNI-PRES KINDERCOTTAGE 564 VERONICA AVE EAST SAINT LOUIS, IL 62205 37-0867415 501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>UNIQUE PROJECT INC 75 BROAD ST NEW YORK, NY 10004 13-3085289 501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tr>
<tr>
<td>8</td>
<td>UNITARIAN CHURCH OF ALL SOULS 1157 LEXINGTON AVE NEW YORK, NY 10075 13-1782493 501 (C) 3</td>
<td>85,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>9</td>
<td>UNITARIAN CHURCH OF BARNSTABLE PO BOX 285 BARNSTABLE, MA 02630-0285 04-2105791 501 (C) 3</td>
<td>20,564.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>UNITARIAN UNIVERSALIST ASSOCIATION 24 FARNSWORTH ST BOSTON, MA 2210 04-2103733 501 (C) 3</td>
<td>61,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>UNITARIAN UNIVERSALIST CHURCH AT WASHINGTON 268 WASHINGTON CROSSING-PENINGTON ROAD TIT 21-0731158 501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF ARLINGTON 4444 ARLINGTON BLVD ARLINGTON, VA 22204 56-0519587 501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF BIRMINGHAM</td>
<td>303-0586537</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF ROANOKE</td>
<td>2015 GRANDIN RD SW ROANOKE, VA 24015</td>
<td>20-3612007</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF SARASOTA I</td>
<td>3975 FRUITVILLE RD SARASOTA, FL 34232</td>
<td>59-0954128</td>
<td>27,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF THE RESTOR</td>
<td>6900 STENTON AVE PHILADELPHIA, PA 19150</td>
<td>23-6001852</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>5</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF TUCSON</td>
<td>4831 E 22ND ST TUCSON, AZ 85711</td>
<td>86-6006433</td>
<td>56,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>UNITARIAN UNIVERSALIST CHURCH OF URBANA-CHA</td>
<td>309 WEST GREET STREET URBANA, IL 61801</td>
<td>37-6018315</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>7</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION AT MONT</td>
<td>67 CHURCH ST MONTCLAIR, NJ 7042</td>
<td>22-1526651</td>
<td>28,950</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION OF COLO</td>
<td>PO BOX 1416 COLUMBUS, IN 47202</td>
<td>30-0252252</td>
<td>5,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION OF PRIN</td>
<td>50 CHERRY HILL RD PRINCETON, NJ 8540</td>
<td>21-0694751</td>
<td>9,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION OF SOME</td>
<td>123 EAST CLIFF ST. SOMERVILLE, NJ 8876</td>
<td>22-3532354</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION OF THE</td>
<td>1301 GLADEWOOD DR BLACKSBURG, VA 24060</td>
<td>54-1016564</td>
<td>10,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>UNITARIAN UNIVERSALIST CONGREGATION OF THE</td>
<td>977 BRIDGEMAN-ONE HARBOR TURNPIKE PO BOX 11-3435902</td>
<td>11-3435902</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| UNITARIAN UNIVERSALIST FELLOWSHIP OF CHARLO  
1532 FORREST NELSON BLVD PORT CHARLOTTE, FL  
65-0188421  
501 (C) 3  
10,750.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST FELLOWSHIP OF FALMOUTH  
840 SANDWICH RD EAST FALMOUTH, MA 2536  
04-6086238  
501 (C) 3  
6,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST FELLOWSHIP OF MONTGO  
2810 ATLANTA AVE MONTGOMERY, AL 36109  
63-0886312  
501 (C) 3  
18,200.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST FELLOWSHIP OF PLATTS  
4 PALMER STREET PLATTSBURGH, NY 12901  
02-0801775  
501 (C) 3  
11,700.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST FELLOWSHIP OF VERO B  
1590 27TH AVE VERO BEACH, FL 32960  
59-2191367  
501 (C) 3  
7,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST JUSTICE MINISTRY OF  
225 N TRYON ST HILLSBOROUGH, NC 27278  
82-2653685  
501 (C) 3  
15,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST SERVICE COMMITTEE IN  
689 MASSACHUSETTS AVE CAMBRIDGE, MA 2139  
04-6186012  
501 (C) 3  
432,800.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST SOCIETY  
ATTN: TREASURER 20 FOREST STREET STAMFORD, CT 6901  
06-0772460  
501 (C) 3  
7,300.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN UNIVERSALIST SOCIETY  
579 POLLY DRUMMOND HILL RD NEWARK, CT 6901  
51-0318965  
501 (C) 3  
10,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN-UNIVERSALIST FELLOWSHIP OF WELLESLEY  
309 WASHINGTON STREET WELLESLEY HILLS, MA 2  
04-2105784  
501 (C) 3  
18,300.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITARIAN-UNIVERSALIST FELLOWSHIP OF CENTRA  
61980 SKYLINE RANCH RD BEND, OR 97703  
93-0853359  
501 (C) 3  
17,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| UNITE AMERICA INSTITUTE INC  
1580 N LINCOLN ST STE 520 DENVER, CO 80203  
27-3001286  
501 (C) 3  
66,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1. UNITE FOR HER</td>
<td>127 E CHESTNUT ST WEST CHESTER, PA 19380</td>
<td>26-4444438</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. UNITED AGAINST POVERTY INC</td>
<td>2050 40TH AVE STE 9 VERO BEACH, FL 32960</td>
<td>11-3697936</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. UNITED ARTS OF CENTRAL FLORIDA INC</td>
<td>218 PASADENA PL ORLANDO, FL 32803</td>
<td>59-1166446</td>
<td>501 (C) 3</td>
<td>48,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4. UNITED BOYS AND GIRLS CLUBS OF GREATER SANT</td>
<td>PO BOX 1485 SANTA BARBARA, CA 93102</td>
<td>23-7087814</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5. UNITED CEREBRAL PALSY OF CENTRAL FLORIDA IN</td>
<td>4780 DATA CT ORLANDO, OR 32817</td>
<td>59-0799925</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. UNITED CEREBRAL PALSY SEGUIN OF GREATER CHI</td>
<td>3100 S CENTRAL AVE CICERO, IL 60804</td>
<td>36-2894174</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7. UNITED CHARITABLE</td>
<td>8201 GREENSBORO DR STE 702 MC LEAN, VA 22110</td>
<td>20-4286082</td>
<td>501 (C) 3</td>
<td>9,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. UNITED CHURCH OF CHRIST</td>
<td>PO BOX 501 NORWELL, MA 2061</td>
<td>04-6136963</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. UNITED CHURCH OF CHRIST MEDFIELD</td>
<td>496 MAIN ST MEDFIELD, OR 2025</td>
<td>22-2505163</td>
<td>501 (C) 3</td>
<td>8,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10. UNITED CHURCH OF DORSET AND EAST RUPERT</td>
<td>PO BOX 263 DORSET, VT 5251</td>
<td>03-6006444</td>
<td>501 (C) 3</td>
<td>176,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. UNITED CHURCH OF OVID</td>
<td>PO BOX 106 OVID, MI 48866</td>
<td>38-1674861</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>12. UNITED COMMUNITY BUILDERS COMMUNITY DEVELOP</td>
<td>617 N PROVIDENCE RD COLUMBIA, MD 65203</td>
<td>27-0829884</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>UNITED COMMUNITY CENTER INC</td>
<td>1028 S 9TH ST MILWAUKEE, WI 53204</td>
<td>39-1146191</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>UNITED COMMUNITY MINISTRIES INC</td>
<td>130 W 59TH ST NEW YORK, NY 10022</td>
<td>51-0172429</td>
<td>501 (C) 3</td>
<td>1,256,847.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>UNITED COUNSELING SERVICE OF BENNINGTON COUN</td>
<td>284 N HERITAGE BLVD RICHMOND, VA 23220</td>
<td>54-0631483</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>UNITED DAUGHTERS OF THE CONFEDERACY</td>
<td>184 HIGH ST STE 603 BOSTON, MA 2110</td>
<td>04-3286118</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>UNITED FOOD BANK</td>
<td>245 S NINA DR MESA, AZ 85210</td>
<td>86-0505273</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>UNITED FOR A FAIR ECONOMY INC</td>
<td>184 HIGH ST STE 603 BOSTON, MA 2110</td>
<td>04-3286118</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>UNITED FRIENDS OF THE CHILDREN</td>
<td>1055 WILSHIRE BLVD LOS ANGELES, CA 90017</td>
<td>95-3665186</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>UNITED FUND OF WESTFIELD NJ</td>
<td>301 NORTH AVE W WESTFIELD, NJ 7090</td>
<td>22-1616758</td>
<td>501 (C) 3</td>
<td>17,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>9</td>
<td>UNITED HOSPITAL FUND OF NEW YORK</td>
<td>141 W 59TH ST NEW YORK, NY 10022</td>
<td>51-0172429</td>
<td>501 (C) 3</td>
<td>1,256,847.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>10</td>
<td>UNITED JEWISH APPEAL FEDERATION OF JEWISH P</td>
<td>5507 PROVIDENCE RD CHARLOTTE, NC 28226</td>
<td>51-0967823</td>
<td>501 (C) 3</td>
<td>1,000,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED JEWISH FED ENDOW FD TR REV 63418202</td>
<td>5000 CORPORATE WOODS DR STE 200 VIRGINIA BE</td>
<td>54-0535603</td>
<td>501 (C) 3</td>
<td>11,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED JEWISH FEDERATION OF NORTHEASTERN NY</td>
<td>184 WASH AVE EXT ALBANY, N</td>
<td>22-2805163</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED JEWISH FEDERATION OF STAMFORD</td>
<td>1035 NEWFIELD AVE STAMFORD, CT 6903</td>
<td>06-0923384</td>
<td>501 (C) 3</td>
<td>103,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED LUTHERAN SEMINARY</td>
<td>61 SEMINARY RDG GETTYSBURG, PA 17325</td>
<td>23-1365169</td>
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<td>13,600.</td>
<td>FMV</td>
<td>N/A</td>
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<td>UNITED LUTHERAN SEMINARY ENDOWMENT FOUNDATI</td>
<td>61 SEMINARY RDG GETTYSBURG, PA 17325</td>
<td>20-8096718</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>UNITED MARRIAGE ENCOUNTER</td>
<td>2610 PARK AVE MUSCATINE, IA 52761</td>
<td>22-2164348</td>
<td>501 (C) 3</td>
<td>9,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED MASHADI JEWISH COMMUNITY OF AMERICA</td>
<td>130 STEAMBOAT RD GREAT NECK, NY 11024</td>
<td>11-3216392</td>
<td>501 (C) 3</td>
<td>47,285.</td>
<td>FMV</td>
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<tr>
<td>UNITED METHODIST CHILDRENS HOME</td>
<td>431 E BROAD ST COLUMBUS, OH 43215</td>
<td>31-4380047</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED METHODIST CHURCH &amp; ITS AFFILIATED OR</td>
<td>475 RIVERSIDE DR NEW YORK, NY 10115</td>
<td>13-5562279</td>
<td>501 (C) 3</td>
<td>61,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED METHODIST CHURCH AND ITS AFFILIATED</td>
<td>1050 EAST AVE ROCHESTER, NY 14607</td>
<td>16-0755728</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED METHODIST CHURCH AND ITS AFFILIATED</td>
<td>1620 ANDERSON RD DAVIS, CA 95619</td>
<td>68-0008750</td>
<td>501 (C) 3</td>
<td>6,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED METHODIST CHURCH AND ITS AFFILIATED</td>
<td>5255 H ST SACRAMENTO, CA 95616</td>
<td>68-0003355</td>
<td>501 (C) 3</td>
<td>7,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.

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

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**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Name of the organization**

**Employer identification number**

**20-7.21**
**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>(1) UNITED METHODIST CHURCH AND ITS AFFILIATED 700 WATERFIELD RIDGE PL GARNER, NC 27529</td>
<td>56-0727845</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) UNITED METHODIST CHURCH OF EAGLE VALLEY PO BOX 546 EAGLE, CO 81631-0546</td>
<td>84-0940771</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) UNITED METHODIST CHURCH OF ESTES PARK 1509 FISH RATCHERY ROAD ESTES PARK, CO 8051</td>
<td>84-0915905</td>
<td>501 (C) 3</td>
<td>5,004.</td>
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<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) UNITED METHODIST CHURCH OF HYDE PARK 1 CHURCH ST HYDE PARK, NY 12538</td>
<td>14-1469705</td>
<td>501 (C) 3</td>
<td>7,400.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) UNITED METHODIST CHURCH OF MACEDONIA 1280 E AURORA RD MACEDONIA, OH 44056</td>
<td>34-6006913</td>
<td>501 (C) 3</td>
<td>9,600.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) UNITED METHODIST CHURCH OF NEW CANAAN 165 SOUTH AVENUE NEW CANAAN, CT 6840</td>
<td>06-0726339</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7) UNITED METHODIST CHURCH OF STEAMBOAT SPRING PO BOX 773748 STEAMBOAT SPRINGS, CO 80477-3</td>
<td>84-0763437</td>
<td>501 (C) 3</td>
<td>7,500.</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(8) UNITED METHODIST CHURCH OF THE PINES PO BOX 144 415 CHIPPENDALE ST, MINOCQUA, WI 54</td>
<td>39-6097978</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9) UNITED METHODIST FAMILY SERVICES OF VIRGINI 3900 W BROAD ST RICHMOND, VA 23230</td>
<td>54-0505969</td>
<td>501 (C) 3</td>
<td>19,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) UNITED METHODIST FOUNDATION OF ARKANSAS 601 WELLINGTON VILLAGE RD LITTLE ROCK, AR 7</td>
<td>71-0525462</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11) UNITED METHODIST FOUNDATION OF NEW ENGLAND 34 ROUTE 111 STE 102 DERRY, NH 3038</td>
<td>04-3127193</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12) UNITED MID-COAST CHARITIES INC PO BOX 205 CAMDEN, ME 4843</td>
<td>01-6009240</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td></td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  ................................................................. Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED MIGRANT OPPORTUNITY SERVICES INCORPO</td>
<td>2701 S CHASE AVE MILWAUKEE, WI 53207</td>
<td>501 (c) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNITED MINISTRIES</td>
<td>606 PENDLETON ST GREENVILLE, SC 29601</td>
<td>501 (c) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNITED MISSION FOR RELIEF AND DEVELOPMENT U</td>
<td>1990 K ST NW STE 425 WASHINGTON, DC 20006</td>
<td>501 (c) 3</td>
<td>12,041.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNITED MISSION TO INDIA INTERNATIONAL NFP</td>
<td>3009 W MONTROSE AVE CHICAGO, IL 60618</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNITED MOMS CHARITY ASSOCIATION INC</td>
<td>6 HARDLEY DR CRANBURY, NJ 8512</td>
<td>501 (c) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNITED NATIONS FOUNDATION INC</td>
<td>1750 PENNSYLVANIA AVE NW STE 300 WASHINGTON</td>
<td>501 (c) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNITED NATIONS INTERNATIONAL SCHOOL</td>
<td>2450 FDR DR NEW YORK, NY 10010</td>
<td>501 (c) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNITED NATIONS WATCH - USA</td>
<td>1201 PENNSYLVANIA AVE NW WASHINGTON, DC 200</td>
<td>501 (c) 3</td>
<td>178,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNITED NEGRO COLLEGE FUND INC</td>
<td>1805 7TH ST NW WASHINGTON, DC 20001</td>
<td>501 (c) 3</td>
<td>1,362,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED NEIGHBORHOOD HOUSES OF NEW YORK INC</td>
<td>45 BROADWAY STE 2210 NEW YORK, NY 10006</td>
<td>501 (c) 3</td>
<td>1,040,625.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED PARISH IN BROOKLINE</td>
<td>210 HARVARD ST BROOKLINE, MA 2446</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED PEGASUS FOUNDATION</td>
<td>PO BOX 2477 TEHACHAPI, CA 93551</td>
<td>501 (c) 3</td>
<td>6,848.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>UNITED PERFORMING ARTS FUND INC</td>
<td>929 N WATER ST MILWAUKEE, WI 53202</td>
<td>39-6100399</td>
<td>501 (C) 3</td>
<td>16,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED PET FUND</td>
<td>9401 TOWNE SQUARE AVE BLUE ASH, OH 45242</td>
<td>27-2582105</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED PRESBYTERIAN CHURCH</td>
<td>330 5TH AVE SW ALBANY, OR 97321</td>
<td>93-0454774</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED PRESBYTERIAN CHURCH IN THE USA WESTM</td>
<td>1200 MARQUETTE AVE MINNEAPOLIS, MN 55403</td>
<td>41-0695506</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED SERVICE ORGANIZATIONS INC</td>
<td>2111 WILSON BLVD STE 1200 ARLINGTON, VA 222</td>
<td>13-1610451</td>
<td>501 (C) 3</td>
<td>103,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED SIKHS IN SERVICE OF AMERICA</td>
<td>10105 LEFFTERTS BLVD STE 207 SOUTH RICHMOND</td>
<td>11-3483921</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED STATES ASSOCIATION FOR UNHCR</td>
<td>1310 L ST NW WASHINGTON, DC 20005</td>
<td>52-1662800</td>
<td>501 (C) 3</td>
<td>288,640.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED STATES CATHOLIC CONFERENCE</td>
<td>66 BROOKS DR BRAINTRIE, PA 19066</td>
<td>04-3071454</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED STATES CATHOLIC CONFERENCE</td>
<td>142 S ELM ST WATERBURY, PA 19611</td>
<td>06-0646798</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED STATES CATHOLIC CONFERENCE</td>
<td>PO BOX 306 MARYKNOLL, NY 11209</td>
<td>22-2866411</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED STATES CATHOLIC CONFERENCE</td>
<td>7100 SHORE RD BROOKLYN, NY 11201</td>
<td>11-1637740</td>
<td>501 (C) 3</td>
<td>70,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>UNITED STATES CATHOLIC CONFERENCE</td>
<td>513 MONTGOMERY AVE MERION STATION, PA 19066</td>
<td>23-1598123</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe inPart IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. UNITED STATES CATHOLIC CONFERENCE</td>
<td>46-2673757</td>
<td>501 (c) 3</td>
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<td>2. UNITED STATES CATHOLIC CONFERENCE</td>
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<tr>
<td>8. UNITED STATES COAST GUARD ACADEMY ALUMNI AS</td>
<td>47 MOHEGAN AVE NEW LONDON, CT 6320</td>
<td>06-1354978</td>
<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>9. UNITED STATES CONFERENCE OF CATHOLIC BISHOP</td>
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<td>FMV</td>
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<td>10. UNITED STATES CONFERENCE OF CATHOLIC BISHOP</td>
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<tr>
<td>11. UNITED STATES EQUESTRIAN TEAM FOUNDATION IN</td>
<td>22-1668879</td>
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<td>12. UNITED STATES FENCING FOUNDATION</td>
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<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ........................................................................................................................................................................... Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(2) UNITED STATES HOLOCAUST MEMORIAL COUNCIL</td>
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<tr>
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<td>(4) UNITED STATES NAVAL ACADEMY ASSOC</td>
<td>52-0548411</td>
<td>501 (C) 3</td>
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<td>(5) UNITED STATES NAVAL ACADEMY FOUNDATION INC</td>
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<td>(6) UNITED STATES NAVAL INSTITUTE</td>
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<tr>
<td>291 WOOD RO ANNAPOlis, MD 21402</td>
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<tr>
<td>(7) UNITED STATES OLYMPIC AND PARALYMPIC Founda</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>1 OLYMPIC PLAZA COLORADO SPRINGS CO 80909-</td>
<td></td>
<td></td>
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<td>(8) UNITED STATES SAILING CENTER OF MARTIN COUN</td>
<td>65-0377617</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
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<td>1955 NE INDIAN RIVER DR JENSEN BEACH, FL 34</td>
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<td>(9) UNITED STATES SKI TEAM FOUNDATION</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 100 PARK CITY, UT 84060</td>
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<td>(10) UNITED STATES SOCCER FEDERATION INC</td>
<td>13-5591991</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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<td>1801 S PRAIRIE AVE CHICAGO, IL 60616</td>
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<td>(11) UNITED STATES SQUASH RACQUETS ASSOCIATION I</td>
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<td>(12) UNITED STATES TABLE TENNIS ASSOCIATION</td>
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<tr>
<td>4065 SINTON RD STE 120 COLORADO SPRINGS, CO</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .........................................................................................................................

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

Schedule I (Form 990) 2020
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) UNITED TO LEARN</th>
<th>(2) UNITED TO PROTECT THE PLATEAU</th>
<th>(3) UNITED WAY BLACKHAWK REGION INC</th>
<th>(4) UNITED WAY CALIFORNIA CAPITAL REGION</th>
<th>(5) UNITED WAY FOR GREATER AUSTIN</th>
<th>(6) UNITED WAY FOR SOUTHEASTERN MICHIGAN</th>
<th>(7) UNITED WAY FOX CITIES INC</th>
<th>(8) UNITED WAY INC</th>
<th>(9) UNITED WAY INC</th>
<th>(10) UNITED WAY INC</th>
<th>(11) UNITED WAY OF ABILENE</th>
<th>(12) UNITED WAY OF ACTON-BOXBOROUGH INC</th>
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<tbody>
<tr>
<td><strong>Name and address of organization</strong></td>
<td><strong>EIN</strong></td>
<td><strong>IRC section (if applicable)</strong></td>
<td><strong>Amount of cash grant</strong></td>
<td><strong>Amount of non-cash assistance</strong></td>
<td><strong>Method of valuation (book, FMV, appraisal, other)</strong></td>
<td><strong>Description of noncash assistance</strong></td>
<td><strong>Purpose of grant or assistance</strong></td>
<td><strong>Name and address of organization</strong></td>
<td><strong>EIN</strong></td>
<td><strong>IRC section (if applicable)</strong></td>
<td><strong>Amount of cash grant</strong></td>
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<tr>
<td>5310 HARVEST HILL RD STE 190 DALLAS, TX 75220</td>
<td>82-2121965</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>PO BOX 1511 MONTEAGLE, TN 37356</td>
<td>85-3451802</td>
<td>501 (C) 3</td>
<td>55,000.</td>
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## SCHEDULE I  
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I**

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<th>Name of the organization</th>
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<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑  
   - No ❌

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>UNITED WAY OF ASHEVILLE &amp; BUNCOMBE COUNTY INC</td>
<td>56-0576515</td>
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<tr>
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<td>FMV</td>
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<tr>
<td>UNITED WAY OF BARTHOLOMEW COUNTY INC</td>
<td>35-1132860</td>
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<td>UNITED WAY OF BERKS COUNTY</td>
<td>23-1655375</td>
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<td>UNITED WAY OF BLOUNT COUNTY</td>
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<td>FMV</td>
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<td>UNITED WAY OF BREVARD COUNTY INC</td>
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<td>208,500</td>
<td>FMV</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

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

**Schedule I (Form 990) 2020**

[JSA 0E1288 1.000]

18674H 1467  V 20-7.21
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<tr>
<td>1999 WABASH AVE STE 107 SPRINGFIELD, IL 627</td>
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<td></td>
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<tr>
<td>(2) UNITED WAY OF CENTRAL INDIANA INC</td>
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<td>501 (C) 3</td>
<td>152,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2955 N MERIDIAN ST STE 300 INDIANAPOLIS, IN</td>
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<td>(3) UNITED WAY OF CENTRAL IOWA</td>
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<td>501 (C) 3</td>
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<tr>
<td>1111 5TH ST DES MOINES, IA 50314</td>
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<tr>
<td>(4) UNITED WAY OF CENTRAL MASSACHUSETTS INC</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>484 MAIN ST STE 300 WORCESTER, MA 1608</td>
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<td>(12) UNITED WAY OF COLLIER AND THE KEYS INC</td>
<td>59-1026096</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

*Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.*

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................................................
   - Yes ☒
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

*Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.*

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) UNITED WAY OF DANE COUNTY INC</td>
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<td>(3) UNITED WAY OF EAST MISSISSIPPI INC</td>
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<tr>
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<td>801 W 47TH ST STE 500 KANSAS CITY, MO 64112</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

JSA

OE:1288 1,000

18674H 1467 V 20-7.21
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>FMV</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>UNITED WAY OF LEE COUNTY INC</td>
<td>59-1005169</td>
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<td>FMV</td>
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<td>100,500.</td>
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<td>5</td>
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<td>30-0200478</td>
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<td>1,090,550.</td>
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<td>75-6005352</td>
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<td>59-0830840</td>
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<td>62-0533104</td>
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<td>9</td>
<td>UNITED WAY OF MONMOUTH AND OCEAN COUNTIES I</td>
<td>22-1828435</td>
<td>501 (C) 3</td>
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<td>10</td>
<td>UNITED WAY OF MOORE COUNTY INC</td>
<td>23-7016427</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11</td>
<td>UNITED WAY OF NEW YORK CITY</td>
<td>13-2617681</td>
<td>501 (C) 3</td>
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<td>12</td>
<td>UNITED WAY OF NORTH CENTRAL FLORIDA INC</td>
<td>59-0808855</td>
<td>501 (C) 3</td>
<td>82,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

### Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
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<th>(h) Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>UNITED WAY OF NORTH CENTRAL MASS INC</td>
<td>649 JOHN FITCH HWY FITCHBURG, MA 1420</td>
<td>04-2233021</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>UNITED WAY OF NORTHERN ARIZONA</td>
<td>1515 E CEDAR AVE STE D-1 FLAGSTAFF, AZ 8600</td>
<td>86-0211666</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>UNITED WAY OF NORTHERN NEW JERSEY INC</td>
<td>222 RIDGEDALE AVE CEDAR KNOLLS, NJ 7927</td>
<td>22-1487247</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
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<td>4</td>
<td>UNITED WAY OF OLMSTED COUNTY INC</td>
<td>903 CENTER ST W STE 100 ROCHESTER, MN 55902</td>
<td>41-0695594</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>5</td>
<td>UNITED WAY OF PALM BEACH COUNTY INC</td>
<td>477 S ROSEMARY AVE STE 230 WEST PALM BEACH,</td>
<td>59-0683258</td>
<td>501 (C) 3</td>
<td>45,350</td>
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<td>6</td>
<td>UNITED WAY OF PEKIN</td>
<td>PO BOX 324 PEKIN, IL 61555</td>
<td>37-0735365</td>
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<td>47,000</td>
<td>FMV</td>
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<td>20 PERFECTA DR STE 215 LEMOYNE, PA 17043</td>
<td>23-1672348</td>
<td>501 (C) 3</td>
<td>26,703</td>
<td>FMV</td>
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<td>8</td>
<td>UNITED WAY OF RACINE COUNTY INC</td>
<td>2000 DOMANIK DR RACINE, WI 53404</td>
<td>39-0806349</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>UNITED WAY OF RHODE ISLAND INC</td>
<td>50 VALLEY ST PROVIDENCE, RI 2909</td>
<td>05-0276059</td>
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<td>15,000</td>
<td>FMV</td>
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<td>UNITED WAY OF ROANOKE VALLEY INC</td>
<td>325 CAMPBELL AVE SW ROANOKE, VA 24016</td>
<td>54-0535302</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
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<td>11</td>
<td>UNITED WAY OF RUTHERFORD COUNTY</td>
<td>3050 MEDICAL CTR PMW FL 2 MURFREESBORO, TN</td>
<td>58-1341880</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>UNITED WAY OF SAN ANTONIO &amp; BEXAR COUNTY</td>
<td>700 S ALAMO ST SAN ANTONIO, TX 78205</td>
<td>74-1272381</td>
<td>501 (C) 3</td>
<td>21,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>(a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED WAY OF SAN DIEGO COUNTY</td>
<td>4699 MURPHY CANYON RD SAN DIEGO, CA 92123</td>
<td>95-2213995</td>
<td>501 (C) 3</td>
<td>10,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED WAY OF SANTA BARBARA COUNTY INC</td>
<td>320 E GUTIERREZ ST SANTA BARBARA, CA 93101</td>
<td>95-1641968</td>
<td>501 (C) 3</td>
<td>58,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNITED WAY OF SOUTHEASTERN PENNSYLVANIA</td>
<td>1709 BENJAMIN FRANKLIN PKWY PHILADELPHIA, PA</td>
<td>65-1241811</td>
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<td>62,000.</td>
<td>FMV</td>
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<tr>
<td>UNITED WAY OF SOUTHERN NEVADA</td>
<td>5830 W. FLAMINGO ROAD LAS VEGAS, NV 89103</td>
<td>88-0071328</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

**Total number of section 501(c)(3) and government organizations listed in the line 1 table:**

**Total number of other organizations listed in the line 1 table:**
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>550 KEARNY ST STE 1000 SAN FRANCISCO, CA 94</td>
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<td>651 PERIMETER DR STE 510 LEXINGTON, KY 4051</td>
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<td>PO BOX 23169 JACKSON, MS 39225</td>
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<td>2235 MILLENNIUM WAY ENOLA, PA 17025</td>
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<tr>
<td>UNITED WAY OF THE COASTAL EMPIRE INC</td>
<td>58-0623603</td>
<td>501 (C) 3</td>
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<td>UNITED WAY OF THE COLOMBIA- WILLAMETTE</td>
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<td>619 SW 11TH AVE PORTLAND, OR 97205</td>
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<td>955 TURNER ST SAN ANGELO, TX 76903</td>
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<tr>
<td>1110 AMERICAN PARKWAY NE ALLENTOWN, PA 1810</td>
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<tr>
<td>UNITED WAY OF THE LEWIS AND CLARK AREA</td>
<td>81-6017354</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>75 E LYNDALE AVE HELENA, MT 59601</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
Schedule I (Form 990) 2020
## Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>UNITED WAY OF THE MIDLANDS</td>
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<td>FMV</td>
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<td>93-0395586</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td></td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>UNITED WAY OF THE NATIONAL CAPITAL AREA</td>
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<td>501 (C) 3</td>
<td>54,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6)</td>
<td>UNITED WAY OF THE NEW RIVER VALLEY</td>
<td>54-0739250</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(7)</td>
<td>UNITED WAY OF THE OCOEE REGION</td>
<td>62-0548418</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>UNITED WAY OF THE OHIO VALLEY INC</td>
<td>61-0435444</td>
<td>501 (C) 3</td>
<td>11,600.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>UNITED WAY OF THE PLAINS</td>
<td>48-0547688</td>
<td>501 (C) 3</td>
<td>33,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>UNITED WAY OF THE SOUTHERN TIER INC</td>
<td>16-1451041</td>
<td>501 (C) 3</td>
<td>7,750.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11)</td>
<td>UNITED WAY OF THE VALLEY &amp; GREATER UTICA AR</td>
<td>15-0532074</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12)</td>
<td>UNITED WAY OF THURSTON COUNTY</td>
<td>91-0713462</td>
<td>501 (C) 3</td>
<td>5,300.</td>
<td></td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| UNITED WAY OF TRI COUNTY INC  
46 PARK ST FRAMINGHAM, MA 1702 | 04-2104231 | 501 (c) 3 | 9,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF WASHTENAW COUNTY  
2305 PLATT RD ANN ARBOR, MI 48104 | 38-1951024 | 501 (c) 3 | 18,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF WESTCHESTER AND PUTNAM INC  
336 CENTRAL PARK AVE WHITE PLAINS, NY 10606 | 13-1997636 | 501 (c) 3 | 64,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF WHATCOM COUNTY  
1500 CORNWALL AVE STE 203 BELLINGHAM, WA 98 | 91-0570788 | 501 (c) 3 | 15,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF WINDHAM COUNTY  
1 HOLSTEIN PL PO BOX 617 BRATTLEBORO, VT 53 | 03-6003074 | 501 (c) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF YORK COUNTY  
800 E KING ST YORK, PA 17403 | 23-1352588 | 501 (c) 3 | 37,700. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY OF YORK COUNTY SC  
226 NORTHFORK DR STE 100 ROCK HILL, SC 2973 | 57-0360058 | 501 (c) 3 | 25,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY SUNCOAST INC  
5201 W KENNEDY BLVD STE 600 TAMPA, FL 33609 | 59-3725701 | 501 (c) 3 | 51,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY WORLDWIDE  
701 N FAIRFAX ST ALEXANDRIA, VA 22314 | 13-1635294 | 501 (c) 3 | 95,824. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WAY--THOMAS JEFFERSON AREA  
806 E HIGH ST CHARLOTTESVILLE, VA 22902 | 54-0505882 | 501 (c) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WE DREAM NETWORK INC  
1201 16TH ST NW 714 WASHINGTON, DC 2003 | 46-2216565 | 501 (c) 3 | 19,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| UNITED WORLD MISSION INC  
205 REGNCR EX FK DR STE 430 CHARLOTTE, NC 2 | 59-6045867 | 501 (c) 3 | 65,100. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>UNITY CHRISTIAN PARTNER SOCIETY</td>
<td>81-0864984</td>
<td>501 (C) 3</td>
<td>5,160.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>UNITY CHURCH OF CHRISTIANITY</td>
<td>74-1285099</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>UNITY CHURCH OF FORT WORTH</td>
<td>90-0149783</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>UNITY OF AUBURN</td>
<td>94-2821189</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>UNITY OF BOULDER</td>
<td>74-2196671</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>6</td>
<td>UNITY PALO ALTO COMMUNITY CHURCH</td>
<td>94-6091915</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>UNITY PRESBYTERIAN CHURCH</td>
<td>57-0360709</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>8</td>
<td>UNITY PRODUCTIONS FOUNDATION</td>
<td>77-0519274</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>9</td>
<td>UNITY SCHOOL OF CHRISTIANITY</td>
<td>44-0546000</td>
<td>501 (C) 3</td>
<td>32,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>UNITY SHOPPE INC</td>
<td>77-0391064</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>UNITY THEATRE COMPANY</td>
<td>74-2763040</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>THE PHILIPPINES ALUMNI ASSOC OF WAS</td>
<td>36-4594815</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................................................…

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>(a) VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>(1)</td>
<td>UNIVERSITY AT ALBANY FOUNDATION</td>
<td>1400 WASHINGTON AVE ALBANY, NY 12222</td>
<td>14-1503972</td>
<td>501 (C) 3</td>
<td>28,850.</td>
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<td>(2)</td>
<td>UNIVERSITY AT BUFFALO FOUNDATION INC</td>
<td>PO BOX 900 BUFFALO, NY 14226</td>
<td>16-0865182</td>
<td>501 (C) 3</td>
<td>76,833.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(3)</td>
<td>UNIVERSITY BAPTIST CHURCH</td>
<td>624 ANASTASIA AVE CORAL GABLES, FL 33134</td>
<td>59-2159443</td>
<td>501 (C) 3</td>
<td>13,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>UNIVERSITY CHILD DEVELOPMENT SCHOOL</td>
<td>5062 9TH AVE NE SEATTLE, WA 98105</td>
<td>91-1176120</td>
<td>501 (C) 3</td>
<td>25,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>UNIVERSITY CHRISTIAN CHURCH</td>
<td>1506 BROWNING PL STE 101 MANHATTAN, CA 9210</td>
<td>48-0791644</td>
<td>501 (C) 3</td>
<td>10,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(6)</td>
<td>UNIVERSITY CHRISTIAN CHURCH</td>
<td>3900 CLEVELAND AVE SAN DIEGO, KS 66502</td>
<td>95-1765176</td>
<td>501 (C) 3</td>
<td>172,280.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>UNIVERSITY CHRISTIAN MINISTRIES INC</td>
<td>128 CHANCELLOR ST CHARLOTTEVILLE, VA 22903</td>
<td>51-0192618</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(8)</td>
<td>UNIVERSITY CHURCH OF CHRIST</td>
<td>733 E NORTHE 16TH ST ABILENE, TX 79601</td>
<td>75-0859661</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>UNIVERSITY CITY PUBLIC SCHOOLS EDUCATION PO</td>
<td>8136 GROBY RD SAINT LOUIS, MO 63130</td>
<td>43-1748519</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10)</td>
<td>UNIVERSITY DISTRICT SERVICE LEAGUE</td>
<td>5017 ROOSEVELT WAY NE SEATTLE, WA 98105</td>
<td>91-1224884</td>
<td>501 (C) 3</td>
<td>46,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(11)</td>
<td>UNIVERSITY HEALTH SYSTEM INC</td>
<td>9000 EXECUTIVE PARK DR STE D240 KNOXVILLE,</td>
<td>31-1626179</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(12)</td>
<td>UNIVERSITY HOSPITALS HEALTH SYSTEM INC</td>
<td>3605 WARRENSVILLE CENTER RD BEACHWOOD, OR 4</td>
<td>34-0714775</td>
<td>501 (C) 3</td>
<td>274,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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

Schedule I (Form 990) 2020
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNIVERSITY LUTHERAN ASSOCIATION OF GREATER 66 WINTHROP ST CAMBRIDGE, MA 2138</td>
<td>04-2212163</td>
<td>501 (C) 3</td>
<td>40,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNIVERSITY LUTHERAN CHAPEL 1511 WASHTENAW AVENUE ANN ARBOR, MI 48104</td>
<td>81-0732847</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNIVERSITY LUTHERAN CHURCH 1611 STANFORD AVE PALO ALTO, CA 94306</td>
<td>94-1631842</td>
<td>501 (C) 3</td>
<td>10,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNIVERSITY LUTHERAN CHURCH AND STUDENT CENTER 925 M JEFFERSON ST TALLAHASSEE, FL 32304</td>
<td>59-3611639</td>
<td>501 (C) 3</td>
<td>33,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>UNIVERSITY MUSICAL SOCIETY 881 N UNIVERSITY AVE ANN ARBOR, MI 48109</td>
<td>38-1545881</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNIVERSITY OF ACRON FOUNDATION 302 BUCHTEL MALL AKRON, OH 44325</td>
<td>34-66575496</td>
<td>501 (C) 3</td>
<td>81,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNIVERSITY OF ALASKA FOUNDATION PO BOX 755080 FAIRBANKS, AK 99775</td>
<td>23-7394620</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF ARIZONA FOUNDATION 1111 N CHERRY AVE TUCSON, AZ 85721</td>
<td>86-6050388</td>
<td>501 (C) 3</td>
<td>308,351.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNIVERSITY OF ARKANSAS FOUNDATION INC 535 W RESEARCH CENTER BLVD STE 120 FAYETTEVILLE</td>
<td>71-6056774</td>
<td>501 (C) 3</td>
<td>257,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>UNIVERSITY OF BALTIMORE FOUNDATION INC 1130 N CHARLES ST BALTIMORE, MD 21201</td>
<td>23-7036780</td>
<td>501 (C) 3</td>
<td>7,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION 1995 UNIVERSITY AVE STE 401 BERKELEY, CA 94720</td>
<td>94-6090626</td>
<td>501 (C) 3</td>
<td>4,692,370.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF CALIFORNIA IRVINE FOUNDATION 100 THEOLOGY ST 250 IRVINE, CA 92617</td>
<td>95-2541117</td>
<td>501 (C) 3</td>
<td>939,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Schedule I**
(Form 990)

**Department of the Treasury**
Internal Revenue Service

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

*Attach to Form 990.*

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ............................. [ ] Yes  [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNIVERSITY OF CALIFORNIA MERCED FOUNDATION</td>
<td>5200 N LAKE RD MERCED, CA 95343</td>
<td>94-3250114</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF CALIFORNIA SAN FRANCISCO</td>
<td>UCSF BOX 0815 SUITE 425 SAN FRANCISCO, CA 9</td>
<td>94-6036493</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF CALIFORNIA SANTA BARBARA</td>
<td>3201 SAASB BUILDING PAYROLL OFFICE SANTA BARBARA</td>
<td>95-6006145</td>
<td>501 (C) 3</td>
<td>536,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF CENTRAL FLORIDA FOUNDATION IN 12424</td>
<td>12424 RESEARCH PKWY STE 140 ORLANDO, FL 328</td>
<td>59-6211832</td>
<td>501 (C) 3</td>
<td>44,200.</td>
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<td>N/A</td>
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<td>UNIVERSITY OF CENTRAL MISSOURI FOUNDATION</td>
<td>SMISER ALUMNI CENTER UCM WARRENSBURG, MO 64</td>
<td>43-1181566</td>
<td>501 (C) 3</td>
<td>24,500.</td>
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<td>UNIVERSITY OF CENTRAL OKLAHOMA FDN</td>
<td>100 N UNIVERSITY DR EDMOND, OK 73034</td>
<td>73-6108032</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>UNIVERSITY OF CHATTANOOGA FOUNDATION INC</td>
<td>615 MCCALLIE AVE DEPT 6806 CHATTANOOGA, TN</td>
<td>62-0476521</td>
<td>501 (C) 3</td>
<td>8,010.</td>
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<td>UNIVERSITY OF CHICAGO</td>
<td>6054 S DREXEL AVE SUITE 300 CHICAGO, IL 606</td>
<td>36-2177139</td>
<td>501 (C) 3</td>
<td>11,190,600.</td>
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<td>UNIVERSITY OF CHICAGO MEDICAL CENTER</td>
<td>5841 S MARYLAND AVE CHICAGO, IL 60637</td>
<td>36-3488183</td>
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<tr>
<td>UNIVERSITY OF CINCINNATI FOUNDATION</td>
<td>PO BOX 19970 CINCINNATI, OH 45219</td>
<td>31-0896555</td>
<td>501 (C) 3</td>
<td>800,002.</td>
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<tr>
<td>UNIVERSITY OF COLORADO FOUNDATION</td>
<td>1800 N GRANT ST STE 725 DENVER, CO 80203</td>
<td>84-6049811</td>
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<td>349,149.</td>
<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>UNIVERSITY OF COLORADO HOSPITAL FOUNDATION</td>
<td>20-8575263</td>
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<tr>
<td>7901 E LOWRY BLVD STE 300 DENVER, CO 80230</td>
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<td>UNIVERSITY OF CONNECTICUT FOUNDATION INCORP</td>
<td>06-6070722</td>
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<td>2390 ALUMNI DR # U3206 STORRS MANSFIELD, CT</td>
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<tr>
<td>1845 E NORTHGATE DR IRVING, TX 75062</td>
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<tr>
<td>300 COLLEGE PARK AVE DAYTON, OH 45469</td>
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<td>413 ACADEMY ST RM 250 NEWARK, DE 19716</td>
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<td>2199 S UNIVERSITY BLVD DENVER, CO 80210</td>
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<tr>
<td>UNIVERSITY OF DETROIT JESUIT HIGH SCHOOL AN</td>
<td>38-1360587</td>
<td>501 (c) 3</td>
<td>62,377.</td>
<td>FMV</td>
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<tr>
<td>8400 S CAMBRIDGE AVE DETROIT, MI 48221</td>
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<td>UNIVERSITY OF DUBUQUE</td>
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<tr>
<td>2000 UNIVERSITY AVE DUBUQUE, IA 52001</td>
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<td>UNIVERSITY OF EDINBURGH USA DEVELOPMENT TRU</td>
<td>52-1802057</td>
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<td>20,500.</td>
<td>FMV</td>
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<tr>
<td>45 ROCKEFELLER PLZ STE 2000 NEW YORK, NY 10</td>
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<td>1800 LINCOLN AVE EVANSVILLE, IN 47722</td>
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<td>PO BOX 14425 GAINESVILLE, FL 32604</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ] No [X]  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) UNIVERSITY OF GEORGIA ATHLETIC ASSOCIATION</th>
<th>(b) EIN</th>
<th>(c) IRC section</th>
<th>(d) Amount of cash</th>
<th>(e) Amount of non-cash</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>456 E BROAD ST RM 225 ATHENS, GA 30602</td>
<td>58-0652518</td>
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<td>(2) UNIVERSITY OF GEORGIA FOUNDATION</td>
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<td>200 BLOOMFIELD AVE WEST HARTFORD, CT 6117</td>
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<td>57,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(4) UNIVERSITY OF HAWAII FOUNDATION</td>
<td>99-0085260</td>
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<td>(5) UNIVERSITY OF HOUSTON FOUNDATION</td>
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<td>(6) UNIVERSITY OF IDAHO FOUNDATION INC</td>
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<td>FMV</td>
<td>N/A</td>
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<td>(7) UNIVERSITY OF ILLINOIS FOUNDATION</td>
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<td>(8) UNIVERSITY OF KENTUCKY STURGILL DEVELOPMENT BUILDING LEXINGTON, KY</td>
<td>61-6001218</td>
<td>501 (C) 3</td>
<td>1,101,500.</td>
<td>FMV</td>
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<tr>
<td>(9) UNIVERSITY OF LOUISIANA AT MONROE FOUNDATION</td>
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<td>501 (C) 3</td>
<td>10,000.</td>
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<td>(10) UNIVERSITY OF LOUISVILLE FOUNDATION INC</td>
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<td>FMV</td>
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<td>(11) UNIVERSITY OF LYNCHBURG</td>
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<td>(12) UNIVERSITY OF MAINE FOUNDATION</td>
<td>01-6011501</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Line</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>UNIVERSITY OF MAINE SYSTEM INC</td>
<td>5703 ALUMNI HALL STE 101 ORONO, ME 04469</td>
<td>01-6000769</td>
<td>501 (C) 3</td>
<td>14,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>UNIVERSITY OF MARY WASHINGTON FOUNDATION</td>
<td>1125 JEFFERSON DAVIS HWY # 2 FREDERICKSBURG</td>
<td>54-0169627</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION</td>
<td>220 ARCH ST BALTIMORE, MD 21201</td>
<td>31-1678679</td>
<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDAT</td>
<td>4603 CALVERT RD COLLEGE PARK, MD 20740</td>
<td>52-2197313</td>
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<td>317,724</td>
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<td>5</td>
<td>UNIVERSITY OF MARYLAND FOUNDATION INC</td>
<td>3300 METZEROTT RD ADELPHI, MD 20783</td>
<td>52-1125663</td>
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<td>7,000</td>
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<td>6</td>
<td>UNIVERSITY OF MASSACHUSETTS</td>
<td>333 SOUTH ST STE 450 SHREWSBURY, MA 1545</td>
<td>04-3167352</td>
<td>501 (C) 3</td>
<td>921,812</td>
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<td>7</td>
<td>UNIVERSITY OF MASSACHUSETTS AMHERST FOUNDAT</td>
<td>134 HICKS WAY AMHERST, MA 1003</td>
<td>54-2084125</td>
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<td>58,500</td>
<td>FMV</td>
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<td>8</td>
<td>UNIVERSITY OF MASSACHUSETTS FOUNDATION INC</td>
<td>ONE BEACON STREET 31ST FLOOR BOSTON, MA 02109</td>
<td>04-6013152</td>
<td>501 (C) 3</td>
<td>71,000</td>
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<td>9</td>
<td>UNIVERSITY OF MELBOURNE USA FOUNDATION</td>
<td>155 E 44TH ST STE 34 NEW YORK, NY 10017</td>
<td>31-1624600</td>
<td>501 (C) 3</td>
<td>19,500</td>
<td>FMV</td>
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<td>62-6048540</td>
<td>501 (C) 3</td>
<td>7,400</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>UNIVERSITY OF MIAMI</td>
<td>6363 S FIDDLERS GREEN CIR GREENWOOD VILLAGE</td>
<td>59-0624458</td>
<td>501 (C) 3</td>
<td>2,297,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>UNIVERSITY OF MINNESOTA FOUNDATION</td>
<td>ATTN: DEVELOPMENT OFFICE P.O. BOX 860266</td>
<td>41-6042488</td>
<td>501 (C) 3</td>
<td>1,217,966</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>406 UNIVERSITY AVE OXFORD, MS 38655</td>
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<tr>
<td>1 UNIVERSITY BLVD SAINT LOUIS, MO 63121</td>
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<td>UNIVERSITY OF MISSOURI MEDICAL SCHOOL FOUND</td>
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<td>MA 212 MEDICAL SCIENCES BUILDING COLUMBIA,</td>
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<tr>
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<tr>
<td>1010 LINCOLN MALL STE 300 LINCOLN, NE 68508</td>
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<tr>
<td>700 LOMAS BLVD NE SUITE 108 ALBUQUERQUE, NM</td>
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3. Enter total number of other organizations listed in the line 1 table.
PART I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................. X Yes     [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

PART II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>1</td>
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<td>2</td>
<td>UNIVERSITY OF NORTH CAROLINA AT ASHEVILLE F</td>
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<td>3</td>
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<td>8</td>
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<td>501 (C) 3</td>
<td>6,977,791.</td>
<td>FMV</td>
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SCHEDULE I
(2020 Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes ☑  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>UNIVERSITY OF OKLAHOMA FOUNDATION INC</td>
<td>100 W TIMBERDELL RD NORMAN, OK 73019</td>
<td>73-6091755</td>
<td>501 (C) 3</td>
<td>101,500</td>
<td>FMV</td>
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<td>UNIVERSITY OF OREGON FOUNDATION</td>
<td>1720 E 13TH AVE EUGENE, OR 97403</td>
<td>93-6015767</td>
<td>501 (C) 3</td>
<td>357,140</td>
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<td>UNIVERSITY OF PITTSBURGH</td>
<td>115 ATWODG ST STE 201 PITTSBURGH, PA 15213</td>
<td>25-0965591</td>
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<td>FMV</td>
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<td>UNIVERSITY OF PORTLAND</td>
<td>5000 N WILLAMETTE BLVD PORTLAND, OR 97203</td>
<td>93-0401259</td>
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<td>32,000</td>
<td>FMV</td>
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<td>UNIVERSITY OF PUGET SOUND</td>
<td>1500 N WARNER ST STOP 1075 TACOMA, WA 98416</td>
<td>91-0564961</td>
<td>501 (C) 3</td>
<td>25,850</td>
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<td>59,279</td>
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<td>218 N COLLEGE AVE F34 BOX 500 RIO GRANDE, D</td>
<td>31-4379537</td>
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<td>8,000</td>
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<td>UNIVERSITY OF ROCHESTER</td>
<td>PO BOX 27893 ROCHESTER, NY 14627</td>
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<td>326,784</td>
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<td>95-2544535</td>
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<td>3632 MORGAN TRAIL BOURBONNAIS, IL 60914</td>
<td>36-3746051</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
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<td>FMV</td>
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Schedule I (Form 990) 2020

JSA
GE1288 1.000

18674H 1467 V 20-7.21
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>UNIVERSITY OF SOUTH ALABAMA 307 N UNIVERSITY BLVD MOBILE, AL 36688</td>
<td>63-0477348</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF SOUTH CAROLINA BUSINESS PARTN 1014 GREENE ST COLUMBIA, SC 29208</td>
<td>23-7042391</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF SOUTH CAROLINA EDUCATIONAL FO 1027 BARNWELL ST COLUMBIA, SC 29208</td>
<td>57-6017985</td>
<td>501 (C) 3</td>
<td>208,851.</td>
<td>FMV</td>
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<td>4</td>
<td>UNIVERSITY OF SOUTH DAKOTA FOUNDATION 1110 N DAKOTA ST VERNILLION, SD 57069</td>
<td>46-6018891</td>
<td>501 (C) 3</td>
<td>38,200.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>UNIVERSITY OF SOUTH FLORIDA FOUNDATION INC 4202 E FOWLER AVE TAMPA, FL 33620</td>
<td>59-0879015</td>
<td>501 (C) 3</td>
<td>43,400.</td>
<td>FMV</td>
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<td>UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA 90089</td>
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<td>7</td>
<td>UNIVERSITY OF SOUTHERN INDIANA FOUNDATION I 8600 UNIVERSITY BLVD EVANSVILLE, IN 47712</td>
<td>23-7042320</td>
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<td>10,500.</td>
<td>FMV</td>
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<td>16,500.</td>
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<td>9</td>
<td>UNIVERSITY OF ST ANDREWS AMERICAN FOUNDATIO ALSTONBIRD 1201 W PEACHTREE ST 490 ATLANTA 58-1662222</td>
<td>501 (C) 3</td>
<td>20,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>UNIVERSITY OF ST THOMAS 2115 SUMMIT AVE SAINT PAUL, MN 55105</td>
<td>41-0693970</td>
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<td>97,000.</td>
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<td>11</td>
<td>UNIVERSITY OF SYDNEY USA FOUNDATION PO BOX 30 PRINCETON, NJ 8542</td>
<td>25-1727809</td>
<td>501 (C) 3</td>
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<td>12</td>
<td>UNIVERSITY OF TEXAS AT DALLAS 800 W CAMPBELL RD # AD13 RICHARDSON, TX 750</td>
<td>75-1305566</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

Enter total number of other organizations listed in the line 1 table ........................................................................................................................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. [Attach to Form 990.]

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ] No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>OFFICE OF DEVELOPMENT ONE UTSA CIRCLE SAN A</td>
<td>74-1587488</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER A</td>
<td>7703 FLOYD CURL DR SAN ANTONIO, TX 78229</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF TEXAS LAW SCHOOL FOUNDATION</td>
<td>727 E DEAN KEETON ST AUSTIN, TX 78705</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF TEXAS MEDICAL BRANCH</td>
<td>301 UNIVERSITY BOULEVARD GALVESTON, TX 7755</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CE</td>
<td>OFFICE OF DEVELOPMENT &amp; ALUMNI RELATIONS PO</td>
<td>75-6002868</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF TEXAS MEDICAL BRANCH</td>
<td>210 W 6TH ST RM 1.200 AUSTIN, TX 78701</td>
<td>30-0710145</td>
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<td>FMV</td>
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<tr>
<td>UNIVERSITY OF THE INCARNATE WORD</td>
<td>4301 BROADWAY CPO 315 SAN ANTONIO, TX 78209</td>
<td>74-1109661</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>UNIVERSITY OF THE NATIONS KONA INC</td>
<td>75-5851 KUAKINI HWY # 433 KAILUA KONA, HI 9</td>
<td>99-0240539</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF THE PACIFIC</td>
<td>3601 PACIFIC AVE STOCKTON, CA 95211</td>
<td>94-1156266</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>UNIVERSITY OF THE PEOPLE</td>
<td>595 E COLORADO BLVD PASADENA, CA 91101</td>
<td>26-4078735</td>
<td>501 (C) 3</td>
<td>25,000.</td>
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<tr>
<td>UNIVERSITY OF THE SCIENCES IN PHILADELPHIA</td>
<td>600 S 43RD ST PHILADELPHIA, PA 19104</td>
<td>23-1352668</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

־ Attach to Form 990.
cerpt from www.irs.gov/Form990 for the latest information.

**Name of the organization**

**VANGUARD CHARITABLE ENDOWMENT PROGRAM**

**Employer identification number**

23-2888152

#### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................................

   - [x] Yes
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tr>
<td>UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVE SEWANEE, TN 37383</td>
<td>62-0475697</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF TULSA 800 S TUCKER DR TULSA, OK 74104</td>
<td>73-0579298</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF UTAH 201 PRESIDENTS CTR RM 411 SALT LAKE CITY, UT</td>
<td>87-6000525</td>
<td>501 (C) 3</td>
<td>54,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF VERMONT AND STATE AGRICULTURAL 85 S PROSPCT ST ROOM 3 BURLINGTON, VT 5405</td>
<td>03-0179440</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>UNIVERSITY OF VIRGINIA AGRICULTURAL COLLEGE FOUNDATION 411 MAIN BURLING</td>
<td>45-1556038</td>
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<td>563,300.</td>
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<td>N/A</td>
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<td>UNIVERSITY OF VIRGINIA ALUMNI ASSOCIATION 211 BROMBT ST S CHARLOTTESVILLE, VA 22903</td>
<td>54-0485595</td>
<td>501 (C) 3</td>
<td>111,700.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>UNIVERSITY OF VIRGINIA DARDEN SCHOOL FOUNDATION PO BOX 7263 CHARLOTTESVILLE, VA 22906</td>
<td>54-6046419</td>
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<td>UNIVERSITY OF VIRGINIA ENGINEERING FOUNDATION PO BOX 400256 CHARLOTTESVILLE, VA 22904</td>
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<td>UNIVERSITY OF VIRGINIA HALET FOUNDATION PO BOX 800773 CHARLOTTESVILLE, VA 22908</td>
<td>41-2097394</td>
<td>501 (C) 3</td>
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<td>54-0838566</td>
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<td>UNIVERSITY OF VIRGINIA McINTIRE SCHOOL OF C PO BOX 400173 CHARLOTTESVILLE, VA 22904</td>
<td>51-0159775</td>
<td>501 (C) 3</td>
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<td>UNIVERSITY OF VIRGINIA MEDICAL SCHOOL FOUNDATION 1111 W MAIN ST CHARLOTTESVILLE, VA 22903</td>
<td>23-7173411</td>
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<td>29,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<td>UNIVERSITY OF WASHINGTON FOUNDATION</td>
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<td>407 GERBERING HALL SEATTLE, WA 98195</td>
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<td>UNIVERSITY OF WEST FLORIDA FOUNDATION INC</td>
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<td>FMV</td>
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<td>11000 UNIVERSITY PKWY BLDG 12 PENSACOLA, FL</td>
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<td>615 EAST AVE N LA CROSSE, WI 54601</td>
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<td>105 GARFIELD AVE EAU CLAIRE, WI 54701</td>
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<td>UNIVERSITY OF WISCONSIN-SHEBOYGAN COUNTY FO</td>
<td>39-1307126</td>
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<td>50,000.</td>
<td>FMV</td>
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<td>1 UNIVERSITY DR SHEBOYGAN, WI 53081</td>
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<td>1000 E UNIVERSITY AVE DEPT 3314 LARAMIE, WY</td>
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<td>FMV</td>
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<td>222 S 22ND ST LARAMIE, WY 82070</td>
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<td>FMV</td>
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<tr>
<td>4340 N LOMBARD ST. PORTLAND, OR 97203</td>
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<td>UNIVERSITY PLACE PRESBYTERIAN CHURCH</td>
<td>91-0827689</td>
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<td>FMV</td>
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<tr>
<td>8101 27TH STREET W. UNIVERSITY PLACE, WA 98</td>
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<tr>
<td>UNIVERSITY PREPARATORY ACADEMY</td>
<td>91-0974344</td>
<td>501 (C) 3</td>
<td>119,000.</td>
<td>FMV</td>
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<tr>
<td>8000 25TH AVE NE SEATTLE, WA 98115</td>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.
**Part I: General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes [X] No [ ]

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>UNLEASHED PRODUCTIONS INC 7 TEAL RD BELVEDERE TIBURON, CA 94920</td>
<td>36-4823629</td>
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<tr>
<td>UNWRA USA NATIONAL COMMITTEE INC 1875 K ST NW FL 4 WASHINGTON, DC 20006</td>
<td>20-2714426</td>
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<tr>
<td>UP VALLEY FAMILY CENTERS OF NAPA COUNTY 1440 SPRING ST SAINT HELENA, CA 94574</td>
<td>80-0023012</td>
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<td>UPAYA SOCIAL VENTURES 500 YALE AVE N STE 202 SEATTLE, WA 98109</td>
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<td>UPLIFT CENTER FOR GRIEVING CHILDREN 3300 HENRY AVE STE 110 PHILADELPHIA, PA 191</td>
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<td>75-2659683</td>
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<td>UPPER HUDSON PLANNED PARENTHOOD INC 855 CENTRAL AVE ALBANY, NY 12206</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990)
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
#### Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**
VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**
23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1.</th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) 2020
**SCHEDULE I**
(form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes [X] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1637 N ASHLAND AVE CHICAGO, IL 60622</td>
<td>36-6083080</td>
<td>501 (C) 3</td>
<td>401,000.</td>
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<td>URBAN IMPACT</td>
<td>7728 RAINIER AVE S SEATTLE, WA 98118</td>
<td>91-1368333</td>
<td>501 (C) 3</td>
<td>20,500.</td>
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<td>4</td>
<td>URBAN INITIATIVES INC</td>
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<td>5</td>
<td>URBAN INSTITUTE</td>
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<td>52-0880375</td>
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<td>16,500.</td>
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<td>6</td>
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<td>40 RECTOR ST FL 9 NEW YORK, NY 10006</td>
<td>13-3442022</td>
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<td>25,500.</td>
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<td>URBAN LAND INSTITUTE</td>
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<td>5,500.</td>
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<td>8</td>
<td>URBAN LEAGUE OF GREATER PITTSBURGH</td>
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<td>FMV</td>
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<td>105 14TH AVE STE 200 SEATTLE, WA 98122</td>
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<td>501 (C) 3</td>
<td>28,000.</td>
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<td>10</td>
<td>URBAN LEAGUE OF METROPOLITAN ST LOUIS</td>
<td>1408 N KINGSHIGHWAY BLVD STE 211 SAINT LOUIS</td>
<td>43-0653605</td>
<td>501 (C) 3</td>
<td>53,750.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11</td>
<td>URBAN LEAGUE OF PHILADELPHIA</td>
<td>121 S BROAD ST FL 6 PHILADELPHIA, PA 19107</td>
<td>23-1429810</td>
<td>501 (C) 3</td>
<td>405,862.</td>
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<tr>
<td>12</td>
<td>URBAN LIFE MINISTRIES INCORPORATED</td>
<td>4391 EL CAJON BLVD SAN DIEGO, CA 92105</td>
<td>27-2778158</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>URBAN MINISTRIES OF DURHAM INC</td>
<td>58-1505891</td>
<td>501 (C) 3</td>
<td>83,000.</td>
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<td>URBAN PATHWAYS INC</td>
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<td>501 (C) 3</td>
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<td>N/A</td>
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<td>URBAN PEAK DENVER</td>
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<td>N/A</td>
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<td>URBAN RENEWAL CENTER</td>
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<td>URBAN SPECIALISTS ENTERPRISES INC</td>
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<td>51-0607378</td>
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<tr>
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<td>46-5055513</td>
<td>501 (C) 3</td>
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<td>URBAN TILTH</td>
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<td>URBAN VENTURES LEADERSHIP FOUNDATION</td>
<td>36-3558710</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td></td>
</tr>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>1</td>
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<tr>
<td>2</td>
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<td>37-6000512</td>
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<td>3</td>
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<td>N/A</td>
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<td>5</td>
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<td>6</td>
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<td>8</td>
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<td>20-3210212</td>
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<td>9</td>
<td>URGINUS COLLEGE</td>
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<td>10</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   
   - Yes [X] No

2. **Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.**

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>URSULINE HIGH SCHOOL ENDOWMENT FUND</td>
<td>81-2509971</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>URSULINE PROVINCIALATE-- EASTERN PROVINCE</td>
<td>13-2728523</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>3</td>
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<td>N/A</td>
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<tr>
<td>5</td>
<td>URSULINE SOCIETY AND ACADEMY OF EDUCATION</td>
<td>61-0449662</td>
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<td>10</td>
<td>US INDIA FRIENDSHIP ALLIANCE INC</td>
<td>303 5TH AVE NEW YORK, NY 10016</td>
<td>501 (C) 3</td>
<td>875,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>US THRIVE FOR GOOD FOUNDATION</td>
<td>4730 UNIVERSITY WAY NE STE 104 FMB SEATTLE, WA 98105</td>
<td>501 (C) 3</td>
<td>50,000.</td>
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<tr>
<td>12</td>
<td>US TOGETHER INC</td>
<td>1415 E DUBLIN GRANVILLE RD STE 100 COLUMBUS, OH 43205</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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### Schedule I (Form 990) 2020

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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➤ Attach to Form 990.

➤ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

---

**Part I** General Information on Grants and Assistance

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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<tr>
<td>USA NORTHEAST PROVINCE OF THE SOCIETY OF JESUS</td>
<td>47-2184310</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>USA WATER POLO INC</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>PO BOX 519 LOS GATOS, CA 95031</td>
<td>94-1156486</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>USS FORT WORTH LCS-3 SUPPORT COMMITTEE INC</td>
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<td>501 (C) 3</td>
<td>51,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
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## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(3) UTILITY EMERGENCY SERVICES FUND</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

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Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>VALLEY HOSPITAL FOUNDATION</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY LIFE CHURCH</td>
<td>27-4830143</td>
<td>501 (C) 3</td>
<td>36,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY LIFE GRACE BRETHREN CHURCH</td>
<td>86-0763768</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
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<tr>
<td>VALLEY OF THE SUN UNITED WAY</td>
<td>86-0104419</td>
<td>501 (C) 3</td>
<td>14,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY OF THE SUN YOUNG MENS CHRISTIAN ASSO</td>
<td>86-0096799</td>
<td>501 (C) 3</td>
<td>12,959.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY PRESBYTERIAN CHURCH</td>
<td>86-0173410</td>
<td>501 (C) 3</td>
<td>29,650.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY PRESCHOOL INC</td>
<td>42-1359549</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY RANCH BAPTIST CHURCH</td>
<td>75-2173781</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VALLEY REAL LIFE</td>
<td>65-1237735</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VALLEY VIEW COMMUNITY CHURCH INC</td>
<td>23-2835487</td>
<td>501 (C) 3</td>
<td>6,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>PO BOX 338 NORTH BROOKFIELD, MA 1535</td>
<td>04-2859592</td>
<td>501 (C) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2901 E CAMELBACK RD STE 202 PHOENIX, AZ 850</td>
<td>86-0777567</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>VALOR COLLEGIATE ACADEMIES</td>
<td>46-1413472</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>99 PLEASANT ST CAMBRIDGE, MA 2139</td>
<td>27-1608970</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1821 FLORIDA AVE NW WASHINGTON, DC 20009</td>
<td>26-4716045</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>80 VAN CORTLANDT PARK S APT E1 BRONX, NY 10</td>
<td>13-3843182</td>
<td>501 (C) 3</td>
<td>14,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>777 N TAMiami TRL FL 3 SARASOTA, FL 34236</td>
<td>59-2807055</td>
<td>501 (C) 3</td>
<td>6,900.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>1801 DANIELS ST VANCOUVER, WA 98660</td>
<td>91-0841721</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>2456 NE Stapleton RD VANCOUVER, WA 98661</td>
<td>91-1312923</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VANCOUVER UNIVERSITY</td>
<td>2301 VANDERBILT PL PMB 407 NASHVILLE, TN 37203</td>
<td>62-0476822</td>
<td>556,350.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VANCOUVER UNIVERSITY MEDICAL CENTER</td>
<td>1161 21ST AVE S NASHVILLE, TN 37232</td>
<td>35-2528741</td>
<td>326,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tbody>
<tr>
<td>1</td>
<td>VANGUARD UNIVERSITY OF SO CA</td>
<td>95-6002998</td>
<td>501 (C) 3</td>
<td>5,667.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>VARIETY THE CHILDREN'S CHARITY OF IOWA</td>
<td>42-6077108</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>VASCULITIS FOUNDATION</td>
<td>43-1492959</td>
<td>501 (C) 3</td>
<td>92,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>VASHTON ALLIED ARTS INC</td>
<td>51-0183051</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>VASHTON-MAURY ISLAND TRUST</td>
<td>94-3123021</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>VASSAR COLLEGE</td>
<td>14-1138587</td>
<td>501 (C) 3</td>
<td>367,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>7</td>
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<tr>
<td>8</td>
<td>V-DAY</td>
<td>94-3389430</td>
<td>501 (C) 3</td>
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<tr>
<td>9</td>
<td>VEHAVTA</td>
<td>77-0577817</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>10</td>
<td>VEAP INC</td>
<td>41-6157999</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>VED VIGNAN MAHAVIDYAPEETH</td>
<td>9600 ALDRICH AVE S MINNEAPOLIS, MN 55420</td>
<td>501 (C) 3</td>
<td>286,001.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>12</td>
<td>VEDANTA CULTURAL FOUNDATION USA INC</td>
<td>500 CROSSFIELDS LN SOMERSET, NJ 8873</td>
<td>501 (C) 3</td>
<td>11,002.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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3 Enter total number of other organizations listed in the line 1 table
## Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>VEDANTA SOCIETY OF ST LOUIS</td>
<td>43-6053079</td>
<td>501 (C) 3</td>
<td>19,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>VEERAYATAN INTERNATIONAL INC</td>
<td>52-1956271</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>VEGETARIAN OUTREACH INC</td>
<td>86-0736818</td>
<td>501 (C) 3</td>
<td>37,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>VEGGIES TO TABLE</td>
<td>83-4627715</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>VEGVOYAGES FOUNDATION</td>
<td>82-1948673</td>
<td>501 (C) 3</td>
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<tr>
<td>6</td>
<td>VENICE COMMUNITY HOUSING CORPORATION</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>VENICE FAMILY CLINIC</td>
<td>95-2769432</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>VENUE FOUNDATION</td>
<td>47-2572054</td>
<td>501 (C) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>VENTANA WILDLIFE SOCIETY</td>
<td>94-2795935</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>VENTURA COUNTY CRISIS PREGNANCY CENTER</td>
<td>77-0187322</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>VENTURE CHURCH OF ENCINITAS</td>
<td>82-4204224</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>VENTURE FOR AMERICA INC</td>
<td>27-2987904</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
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</table>

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.**

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</tr>
</thead>
<tbody>
<tr>
<td>1 VENTURE FREE FOUNDATION</td>
<td>81-4844464</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 VERA COURT NEIGHBORHOOD CENTER INC</td>
<td>39-1945609</td>
<td>501 (C) 3</td>
<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 VERA INSTITUTE OF JUSTICE INC</td>
<td>13-1941627</td>
<td>501 (C) 3</td>
<td>43,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4 VERBUM DEI HIGH SCHOOL</td>
<td>95-2225787</td>
<td>501 (C) 3</td>
<td>97,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5 VERIFIED VOTING FOUNDATION</td>
<td>20-0765743</td>
<td>501 (C) 3</td>
<td>45,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 VERITAS CHRISTIAN ACADEMY OF HOUSTON</td>
<td>14-1854212</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>7 VERITAS CLASSICAL CHRISTIAN SCHOOL</td>
<td>55-0770184</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>8 VERITAS PREPARATORY SCHOOL INC</td>
<td>46-1289382</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9 VERMONT ACADEMY</td>
<td>03-0179460</td>
<td>501 (C) 3</td>
<td>5,277.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10 VERMONT COLLEGE OF FINE ARTS INC</td>
<td>20-8384273</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11 VERMONT COMMUNITY FOUNDATION</td>
<td>22-2712160</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12 VERMONT COMMUNITY LOAN FUND INC</td>
<td>22-2864900</td>
<td>501 (C) 3</td>
<td>62,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>VERMONT FOLKLIFE CENTER</td>
<td>88 MAIN ST MIDDLEBURY, VT 5753</td>
<td>22-2550951</td>
<td>501 (C) 3</td>
<td>59,700.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT FOODBANK</td>
<td>33 PARKER RD BARRE, VT 5641</td>
<td>22-3021942</td>
<td>501 (C) 3</td>
<td>60,750.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT HISTORICAL SOCIETY</td>
<td>60 WASHINGTON ST BARRE, VT 5641</td>
<td>03-0179602</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT HUMANITIES COUNCIL</td>
<td>11 LOOMIS ST MONTPELIER, VT 5602</td>
<td>51-0187809</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>VERMONT INTERFAITH ACTION INC</td>
<td>152 PEARL ST BURLINGTON, VT 5401</td>
<td>03-0223222</td>
<td>501 (C) 3</td>
<td>51,142.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT JOURNALISM TRUST</td>
<td>26 STATE ST STE 8 MONTPELIER, VT 5602</td>
<td>27-1553931</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT LAND TRUST INC</td>
<td>8 BAILEY AVE MONTPELIER, VT 5602</td>
<td>03-0264836</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT LAW SCHOOL INC</td>
<td>PO BOX 96 SOUTH ROYALTON, VT 5608</td>
<td>23-7251952</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT PUBLIC RADIO</td>
<td>365 TROY AVE COLCHESTER, VT 5446</td>
<td>03-0259051</td>
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<td>94,650.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT STAGE COMPANY INC</td>
<td>110 MAIN ST BURLINGTON, VT 5401</td>
<td>03-0342411</td>
<td>501 (C) 3</td>
<td>7,250.</td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>VERMONT STUDENT ASSISTANCE CORP</td>
<td>PO BOX 2000 WINOOSKI, VT 5404</td>
<td>03-0216589</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td></td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VERMONT YOUTH CONSERVATION CORPS INC</td>
<td>1949 E MAIN ST RICHMOND, VT 5477</td>
<td>03-03288834</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▲ Attach to Form 990.

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

**Schedule I (Form 990)**

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VERO BEACH MUSEUM OF ART INC</td>
<td>3001 RIVERSIDE PARK DR VERO BEACH, FL 32963</td>
<td>59-1867408</td>
<td>501 (C) 3</td>
<td>19,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VERSITI BLOOD RESEARCH INSTITUTE FOUNDATION</td>
<td>PO BOX 2178 MILWAUKEE, WI 53201</td>
<td>39-1372542</td>
<td>501 (C) 3</td>
<td>23,333</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
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<tr>
<td>VERTICAL ADRENALINE MOTOCROSS MINISTRIES</td>
<td>925 E MAIN ST EASTLAND, TX 76448</td>
<td>27-5430545</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
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<tr>
<td>VERTICAL CHURCH ST. PAUL</td>
<td>1898 CARROLL AVE ST. PAUL, MN 55104</td>
<td>82-3566606</td>
<td>501 (C) 3</td>
<td>6,962</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VERTUELAB</td>
<td>PO BOX 212 PORTLAND, OR 97207</td>
<td>26-1652936</td>
<td>501 (C) 3</td>
<td>100,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
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<tr>
<td>VESTAL UNITED METHODIST CHURCH</td>
<td>328 MAIN ST VESTAL, NY 13850</td>
<td>15-0585879</td>
<td>501 (C) 3</td>
<td>7,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
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<tr>
<td>VETERANS AIRLIFT COMMAND</td>
<td>7825 WASHINGTON AVE S STE 500 MINNEAPOLIS, MN 55415</td>
<td>20-4567769</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VETERANS COMMUNITY PROJECT</td>
<td>8900 TROOST AVE KANSAS CITY, MO 64131</td>
<td>47-4960735</td>
<td>501 (C) 3</td>
<td>13,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VETERANS HERITAGE PROJECT</td>
<td>PO BOX 22058 PHOENIX, AZ 85028</td>
<td>26-4572636</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VETERANS OF FOREIGN WARS FOUNDATION</td>
<td>406 W 34TH ST KANSAS CITY, MO 64111</td>
<td>43-1758998</td>
<td>501 (C) 3</td>
<td>66,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
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<tr>
<td>VHL ALLIANCE INC</td>
<td>1208 VFW PKWY STE 303 WEST ROXBURY, MA 2132</td>
<td>04-3180414</td>
<td>501 (C) 3</td>
<td>18,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
<tr>
<td>VIA ART FUND INC</td>
<td>7TH FLOOR BOSTON, MA 2116</td>
<td>46-1396192</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EDUCATION</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>VIA REHABILITATION SERVICES INC</td>
<td>94-1212130</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VIATOR HOUSE OF HOSPITALITY</td>
<td>83-0884521</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VIBHA INC HELP THEM GROW</td>
<td>22-3122761</td>
<td>501 (C) 3</td>
<td>23,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VICKERY MEADOW LEARNING CENTER</td>
<td>75-2708992</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VICTIM OFFENDER RECONCILIATION PROGRAM INC</td>
<td>33-0570564</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>VICTORY ATHLETIC MINISTRIES</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VICTORY CHRISTIAN CENTER INC</td>
<td>73-1118610</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VICTORY JUNCTION GANG CAMP INC</td>
<td>56-2215292</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>VICTORY PROJECT</td>
<td>26-2243366</td>
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<td>VIDA NUEVA MINISTRIES INC</td>
<td>58-2187403</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VIETNAM VETERANS WORKSHOP INC</td>
<td>04-3007211</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VIEWPOINT EDUCATIONAL FOUNDATION</td>
<td>95-2242261</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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

Schedule I (Form 990) 2020
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VIKING ROWING FOUNDATION INC 2006 CORNWALL AVE NORTHFIELD, NJ 8225</td>
<td>22-2544535</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) VILLA MARIA ACADEMY 370 OLD LINCOLN HWY MALVERN, PA 19355</td>
<td>23-1355130</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(3) VILLA ST BENEDICT 1920 MAPLE AVE LISLE, IL 60532</td>
<td>36-4343235</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) VILLAGE ACADEMIES INC 35 W 124TH ST NEW YORK, NY 10027</td>
<td>13-4186070</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) VILLAGE BAPTIST CHURCH 330 SW MURRAY BLVD BEAVERTON, OR 97005</td>
<td>93-6035652</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) VILLAGE BICYCLE PROJECT INC 1915 11TH AVE E SEATTLE, WA 98102</td>
<td>26-3547300</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(7) VILLAGE CHAPEL INC 10 AZALEA RD PINEHURST, NC 28374</td>
<td>56-0529992</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(8) VILLAGE CHURCH 736 MCCOURRY BLVD INCLINE VILLAGE, NV 89451</td>
<td>46-3163892</td>
<td>501 (C) 3</td>
<td>18,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(9) VILLAGE CHURCH OF WEST GREENVILLE I NC 9 CHARLES ST GREENVILLE, SC 29611</td>
<td>46-3806167</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(10) VILLAGE COMMUNITY PRESBYTERIAN CHURCH PO BOX 704 RANCHO SANTA FE, CA 92067</td>
<td>95-6006164</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(11) VILLAGE COMMUNITY SCHOOL 272 W 10TH ST NEW YORK, NY 10014</td>
<td>13-2663331</td>
<td>501 (C) 3</td>
<td>156,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(12) VILLAGE ENTERPRISE FUND INC 751 LAUREL ST 222 SAN CARLOS, CA 94070</td>
<td>22-2852248</td>
<td>501 (C) 3</td>
<td>243,493.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. VILLAGE ENTERPRISES  
   PO BOX 83749 PORTLAND, OR 97283  
   91-1828496  
   501 (c) 3  
   10,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 2. VILLAGE FOUNDATION OF BLOWING ROCK  
   PO BOX 406 BLOWING ROCK, NC 28605  
   27-1826991  
   501 (c) 3  
   35,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 3. VILLAGE GROUP  
   7 PLANTERSVILLE RD GEORGETOWN, SC 29440  
   06-1749252  
   501 (c) 3  
   7,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 4. VILLAGE HEALTH WORKS  
   45 W 36TH ST FL 8 NEW YORK, NY 10018  
   45-0545435  
   501 (c) 3  
   13,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 5. VILLAGE OF BRANDON  
   PO BOX 385 BRANDON, WI 53919  
   39-6006217  
   501 (c) 3  
   43,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 6. VILLAGE PARTNERS INTERNATIONAL INC  
   2516 W SUNSET DR FL 33609 TAMPA, FL 33629  
   26-1124148  
   501 (c) 3  
   10,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 7. VILLAGE PRESBYTERIAN CHURCH  
   13115 S VILLAGE DR TAMPA, FL 33618  
   59-1582660  
   501 (c) 3  
   9,510.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 8. VILLAGE PRESBYTERIAN CHURCH ENDOWMENT TRUST  
   6641 MISSION RD PRAIRIE VILLAGE, KS 66208  
   48-1203912  
   501 (c) 3  
   25,279.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 9. VILLAGE PRESBYTERIAN CHURCH OF NORTHBROOK  
   1300 SHERMER ROAD NORTHBROOK, IL 60062  
   36-2276994  
   501 (c) 3  
   28,500.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 10. VILLAGE PROJECT AFRICA INC  
   PO BOX 382 NOBLESVILLE, IN 46061  
   27-1484750  
   501 (c) 3  
   7,410.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 11. VILLAGE SCHOLARSHIP BOARD  
   2200 W ACACIA AVE APT C413 HEMET, CA 92545  
   33-0818213  
   501 (c) 3  
   10,000.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM
| 12. VILLAGE TEMPLE  
   33 E 12TH ST NEW YORK, NY 10003  
   13-1967326  
   501 (c) 3  
   68,621.  
   FMV  
   N/A  
   FOR RECIPIENT'S EXEM

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  

Enter total number of other organizations listed in the line 1 table.
**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. X Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. <strong>VILLAGE THEATER COMPANY</strong></td>
<td>45-3563211</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>2. <strong>VILLAGES OF INDIANA, INC.</strong></td>
<td>35-1708240</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3. <strong>VILLAGES REGIONAL HOSPITAL AUXILIARY INC</strong></td>
<td>55-0818419</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>4. <strong>VILLANOVA UNIVERSITY</strong></td>
<td>23-1352688</td>
<td>501 (C) 3</td>
<td>831,231.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>5. <strong>VIVA SHUL BOSTON CENTER FOR JEWISH CULTURE</strong></td>
<td>04-3109546</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>6. <strong>VINE FOUNDATION</strong></td>
<td>20-1890163</td>
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<td>12,500.</td>
<td>FMV</td>
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<td>7. <strong>VINALHAVEN ELDERCARE SERVICES- RESOURCES</strong></td>
<td>04-3380438</td>
<td>501 (C) 3</td>
<td>5,750.</td>
<td>FMV</td>
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<td>8. <strong>VINCARE SERVICES OF AUSTIN FOUNDATION</strong></td>
<td>74-2968167</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>9. <strong>VINE MAPLE PLACE</strong></td>
<td>91-2082308</td>
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<td>15,000.</td>
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<td>10. <strong>VINEYARD CHRISTIAN FELLOWSHIP KING OF PRUSS</strong></td>
<td>23-2770279</td>
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<td>60,000.</td>
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<td>11. <strong>VINEYARD CHRISTIAN FELLOWSHIP OF THE PENINS</strong></td>
<td>77-0179227</td>
<td>501 (C) 3</td>
<td>80,000.</td>
<td>FMV</td>
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<td>12. <strong>VINEYARD CHRISTIAN FELLOWSHIP OF YAKIMA</strong></td>
<td>91-1533692</td>
<td>501 (C) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .........................................................

3. Enter total number of other organizations listed in the line 1 table .........................................................

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

Schedule I (Form 990) 2020

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JSA

OE 1288 1.000

18674H 1467

V 20-7.21
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1(b) EIN</th>
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<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>VINEYARD COMMUNITY CHURCH OF MISHAWAKA INC</td>
<td>16219</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>PO BOX 2189 VINEYARD HAVEN, MA 2568</td>
<td>06-2439882</td>
<td>501 (C) 3</td>
<td>8,800</td>
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<td>VINEYARD THEATRE AND WORKSHOP CENTER INC</td>
<td>13-2981292</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VINTAGE CHURCH OF LOS ANGELES</td>
<td>1015 CALIFORNIA AVE SANTA MONICA, CA 90403</td>
<td>501 (C) 3</td>
<td>48,900</td>
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<tr>
<td>VINTAGE FAITH CHURCH</td>
<td>350 MISSION ST SANTA CRUZ, CA 95060</td>
<td>501 (C) 3</td>
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<td>PO BOX 1188 KULA, HI 96790</td>
<td>99-0321706</td>
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<td>2900 AMBOY RD STATEN ISLAND, NY 10306</td>
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<td>VIRGINIA LEAGUE OF CONSERVATION VOTERS EDUCATION</td>
<td>100 W FRANKLIN ST RICHMOND, VA 23220</td>
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<td>VIRGINIA BEACH CHRISTIAN CHURCH</td>
<td>2225 ROSE HALL DR VIRGINIA BEACH, VA 23454</td>
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<td>VIRGINIA BEACH UNITED METHODIST CHURCH</td>
<td>212 19TH ST VIRGINIA BEACH, VA 23451</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>VIRGINIA COMMONWEALTH UNIVERSITY FOUNDATION</td>
<td>940375 RICHMOND, VA 23284</td>
<td>501 (C) 3</td>
<td>32,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**

(Form 990)  

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization  
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number  
23-2888152

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>VIRGINIA DEPARTMENT OF HUMAN RESOURCE MANAGEMENT</td>
<td>54-6024817</td>
<td>501 (C) 3</td>
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<td>COMMONWEALTH OF VIRGINIA CAMPAIGN DEPARTMENT</td>
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<td>2</td>
<td>VIRGINIA EPISCOPAL SCHOOL</td>
<td>54-0506431</td>
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<td>FMV</td>
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<td>3</td>
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<td>54-0554396</td>
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<td>4</td>
<td>VIRGINIA HISTORICAL SOCIETY</td>
<td>54-0419452</td>
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<td>FMV</td>
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<td>5</td>
<td>VIRGINIA HOSPITAL CENTER MEDICAL BRIGADE IN</td>
<td>37-1659721</td>
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<td>6</td>
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<td>54-1362857</td>
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<td>9</td>
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<td>11</td>
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<td>91-1351110</td>
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<td>12</td>
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<td>51-0205333</td>
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<td>FMV</td>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>PO BOX 2580 NORFOLK, VA 23501</td>
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<td>703 CONCORD AVE CHARLOTTESVILLE, VA 22903</td>
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<td>VIRGINIA PENINSULA FOODBANK</td>
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<td>VIRGINIA SYMPHONY ORCHESTRA</td>
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<td>150 BOUSH ST STE 201 NORFOLK, VA 23510</td>
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<td>54-0721690</td>
<td>501 (c) 3</td>
<td>315,667. FMV N/A</td>
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<td>902 PRICES FORK RD STE 4400 BLACKSBURG, VA</td>
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<td>VIRGINIA UNITED METHODIST HOMES INC</td>
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<td>5101 COX RD STE 225 GLEN ALLEN, VA 23060</td>
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<td>VIRGINIANS ORGANIZED FOR INTERFAITH COMMUNI</td>
<td>54-1207254</td>
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<td>7,000. FMV N/A</td>
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<td>20 W STOW RD STE 8 MARLTON, NJ 8053</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>VISION ADVOCACY INC 33920 US HWY 19 N STE 250 PALM HARBOR, FL 3 86-1433327 501 (C) 3 15,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  

**Attach to Form 990.**  

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

---

**Part I**  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>VISITATION ACADEMY OF ST LOUIS COUNTY</td>
<td>3020 N BALLAS RD SAINT LOUIS, MO 63131</td>
<td>43-1583573</td>
<td>501 (C) 3</td>
<td>32,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>VISITING NURSE &amp; HOSPICE OF FAIRFIELD COUNT</td>
<td>22 DANBURY RD WILTON, CT 6897</td>
<td>06-1062903</td>
<td>501 (C) 3</td>
<td>10,500.</td>
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<tr>
<td>VISITING NURSE ASSOCIATION &amp; HOSPICE FOUNDATION</td>
<td>1110 35TH LN VERO BEACH, FL 32960</td>
<td>59-2804739</td>
<td>501 (C) 3</td>
<td>23,500.</td>
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<tr>
<td>VISITING NURSE ASSOCIATION OF CENTRAL JERSEY</td>
<td>23 MAIN STREET SUITE D1 HOLMDEL, NJ 7733</td>
<td>22-2500031</td>
<td>501 (C) 3</td>
<td>55,000.</td>
<td>FMV</td>
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<td>VISITING NURSE ASSOCIATION OF TEXAS</td>
<td>1420 W MOCKINGBIRD LN STE 700 DALLAS, TX 75</td>
<td>75-0800692</td>
<td>501 (C) 3</td>
<td>68,900.</td>
<td>FMV</td>
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<tr>
<td>VISITING NURSE SERVICE OF NEW YORK</td>
<td>220 E 42ND ST NEW YORK, NY 10017</td>
<td>13-3189926</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>VISITING NURSE SERVICE OF NEW YORK HOSPICE</td>
<td>220 E 42ND ST NEW YORK, NY 10017</td>
<td>30-0006817</td>
<td>501 (C) 3</td>
<td>60,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VISTA CENTER FOR THE BLIND AND VISUALLY IMP</td>
<td>2500 EL CAMINO REAL PALO ALTO, CA 94306</td>
<td>94-1196206</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VISTA COLLEGE PREPARATORY INC</td>
<td>812 S 6TH AVE PHOENIX, AZ 85003</td>
<td>45-4825961</td>
<td>501 (C) 3</td>
<td>65,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VISTA DE LA MONTANA UNITED METHODIST CHURCH</td>
<td>3001 E MIRAVISTA LN TUCSON, AZ 85739</td>
<td>86-0678980</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
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<tr>
<td>VISTA MARIA</td>
<td>20651 W WARREN ST DEARBORN HEIGHTS, MI 4812</td>
<td>38-1359262</td>
<td>501 (C) 3</td>
<td>6,214.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VISTA MARIA's ARTS EXCHANGE</td>
<td>PO BOX 1840 RALEIGH, NC 27602</td>
<td>56-1287429</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

---

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tr>
<td>VISUALLY IMPAIRED PRESCHOOLERS SERVICES OF 1906 GOLDSMITH LN LOUISVILLE, KY 40218</td>
<td>1061973</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>VITAE FOUNDATION 1731 SOUTHRIDGE DR STE D JEFFERSON CTY, MO</td>
<td>1138252</td>
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<tr>
<td>VITERBO COLLEGE INC 900 VITERBO DR LA CROSSE, WI 54601</td>
<td>0978445</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>VIVALON 930 TAMALPAIS AVE SAN RAFAEL, CA 94901</td>
<td>1422463</td>
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<tr>
<td>VIVENT HEALTH INC PO BOX 510498 MILWAUKEE, WI 53203</td>
<td>1534049</td>
<td>501 (C) 3</td>
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<td>VIVIAN BEAUMONT THEATER INC 150 W 65TH ST NEW YORK, NY 10023</td>
<td>3004747</td>
<td>501 (C) 3</td>
<td>53,500.</td>
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<td>VISCAYA MUSEUM AND GARDENS TRUST INC 3251 S MIAMI AVE MIAMI, FL 33129</td>
<td>1711491</td>
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<td>VMC FOUNDATION 2400 CLOVE DR SAN JOSE, CA 95128</td>
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<td>VMI KEYDET CLUB INCORPORATED PO BOX 932 LEXINGTON, VA 24450</td>
<td>130039</td>
<td>501 (C) 3</td>
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<td>VMCL CHARITIES 1024 W PAMPA AVE MESA, AZ 85210</td>
<td>4658030</td>
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<td>FMV</td>
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<td>VNA HOME &amp; HOSPICE 50 FODEN RD STE 1 SOUTH PORTLAND, ME 4106</td>
<td>0246804</td>
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<td>VOCATIONAL GUIDANCE SERVICES 2339 E 55TH ST CLEVELAND, OH 44103</td>
<td>0714650</td>
<td>501 (C) 3</td>
<td>17,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
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Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>(g) Description of noncash assistance</td>
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<td>(h) Purpose of grant or assistance</td>
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<td>VOICE OF MY PEOPLE FOUNDATION</td>
<td>42-1582027</td>
<td>501 (C) 3</td>
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<td></td>
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<td>5</td>
<td>VOICE OF PROPHECY</td>
<td>95-2414749</td>
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<td>6</td>
<td>VOICE OF SAN DIEGO</td>
<td>20-1585919</td>
<td>501 (C) 3</td>
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<td>2223 AVENIDA DE LA PLAYA LA JOLLA, CA 92037</td>
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<td>7</td>
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<td>02-0631760</td>
<td>501 (C) 3</td>
<td>7,050.</td>
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<td></td>
<td>PO BOX 423 NEWTON UPPER FALLS, MA 2464</td>
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<tr>
<td>8</td>
<td>VOICE OF THE MARTYRS INC</td>
<td>73-1395057</td>
<td>501 (C) 3</td>
<td>214,900.</td>
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<td>1815 SE BISON RD BARTLESVILLE, OK 74006</td>
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<td>9</td>
<td>VOICES 4 FREEDOM</td>
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<tr>
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<td>5007 REESE RD TARRANT, CA 90505</td>
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<td>95-3786047</td>
<td>501 (C) 3</td>
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<td>2851 MEADOW LARK DR SAN DIEGO, CA 92123</td>
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<td>VOICES FOR VERMONT'S CHILDREN INC</td>
<td>22-2611535</td>
<td>501 (C) 3</td>
<td>60,000.</td>
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<td>PO BOX 261 MONTPELIER, VT 5601</td>
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<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>VOICES OF ASCENSION INC</td>
<td>13-3688472</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td></td>
<td>12 W 11TH ST NEW YORK, NY 10011</td>
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<td>N/A FOR RECIPIENT'S EXEM</td>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VOICES OF COMMUNITY ACTIVISTS &amp; LEADERS-VOC 80 4TH AVE BROOKLYN, NY 11217</td>
<td>13-4094385</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(2) VOICES OF THE CHILDREN 407 S 1ST ST MOUNT VERNON, WA 98273</td>
<td>47-5524012</td>
<td>501 (C) 3</td>
<td>19,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(3) VOLUNTARY ACTION CENTER OF Dekalb COUNTY 1606 BETHANY RD SICAMORE, IL 60178</td>
<td>36-2798257</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(4) VOLUNTEER ENGLISH PROGRAM IN CHESTER COUNTY 790 E MARKET ST STE 215 WEST CHESTER, PA 19</td>
<td>22-2685077</td>
<td>501 (C) 3</td>
<td>32,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(5) VOLUNTEER MINISTRY CENTER INC PO BOX 27406 KNOXVILLE, TN 37927</td>
<td>62-1338748</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>(6) VOLUNTEERS IN MEDICINE BERKSHIRE INC 777 MAIN ST STE 4 GREAT BARRINGTON, MA 1230</td>
<td>90-0140004</td>
<td>501 (C) 3</td>
<td>132,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) VOLUNTEERS IN MEDICINE CLINIC INC 417 SE BALBOA AVE STUART, FL 34994</td>
<td>65-1115793</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) VOLUNTEERS IN MEDICINE CLINIC OF THE CASCAD 2300 NE NEFF Rd BEND, OR 97701</td>
<td>92-1327847</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) VOLUNTEERS OF AMERICA INC 1309 W 51ST ST SIOUX FALLS, SD 57105</td>
<td>23-7353508</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) VOLUNTEERS OF AMERICA INC 2660 LARIMER ST DENVER, CO 80205</td>
<td>84-0430995</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(11) VOLUNTEERS OF AMERICA INC 3600 WILSHIRE BLVD LOS ANGELES, CA 90010</td>
<td>95-1691330</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tr>
<tr>
<td>(12) VOTE ORG 4096 FIELDMONT AVE # 368 OAKLAND, CA 94611</td>
<td>26-2094990</td>
<td>501 (C) 3</td>
<td>303,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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

Schedule I (Form 990) 2020
### Schedule I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>VOTE SOLAR</td>
<td>46-4396728</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>VOTEMERICA INC</td>
<td>84-3442002</td>
<td>501 (C) 3</td>
<td>90,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>VOTER REGISTRATION PROJECT</td>
<td>26-4802468</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td>VOTERIDERS</td>
<td>45-5081831</td>
<td>501 (C) 3</td>
<td>89,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>VOTERUNLEAD</td>
<td>46-4285577</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td>VOTINGWORKS</td>
<td>83-2910494</td>
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<td>125,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>VOTO LATINO FOUNDATION INC</td>
<td>20-1350252</td>
<td>501 (C) 3</td>
<td>166,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>VOX CHURCH INC</td>
<td>46-4397543</td>
<td>501 (C) 3</td>
<td>25,008.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>VF Media Corporation</td>
<td>54-0735782</td>
<td>501 (C) 3</td>
<td>17,700.</td>
<td>FMV</td>
<td>N/A</td>
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<td>10</td>
<td>VSI</td>
<td>26-1869032</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>11</td>
<td>VULCAN PARK FOUNDATION</td>
<td>63-1233997</td>
<td>501 (C) 3</td>
<td>124,080.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>W I N D OF GOD</td>
<td>40-8849229</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | WABASH COLLEGE  
301 W WABASH AVE CRAWFORDSVILLE, IN 47933 | 35-0868202 | 501 (C) 3 | 12,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2 | WABASH COUNTY HISTORICAL MUSEUM INC  
36 E MARKET ST WABASH, IN 46992 | 35-2087230 | 501 (C) 3 | 10,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3 | WACO FAMILY PRACTICE FOUNDATION  
1600 PROVIDENCE DR WACO, TX 76707 | 74-2446071 | 501 (C) 3 | 10,500 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4 | WACO FOUNDATION  
1227 N. VALLEY MILLS DRIVE SUITE 235 WACO, TX 76708 | 74-6054628 | 501 (C) 3 | 6,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5 | WADSWORTH LIBRARY  
24 CENTER ST GENESEO, NY 14454 | 26-3577281 | 501 (C) 3 | 7,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6 | WAGING NONVIOLENCE INC  
226 PROSPECT PARK WEST 146 BROOKLYN, NY 112 | 46-4615909 | 501 (C) 3 | 15,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7 | WAGNER COLLEGE  
1 CAMPUS RD STATEN ISLAND, NY 10301 | 13-5604699 | 501 (C) 3 | 50,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8 | WAGNER FREE INSTITUTE OF SCIENCE  
1700 W MONTGOMERY AVE PHILADELPHIA, PA 19112 | 23-1370509 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9 | WAGS AND WALKS  
2236 FEDERAL AVE LOS ANGELES, CA 90064 | 45-3749303 | 501 (C) 3 | 16,733 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10 | WAGS INN CANINE CHARITIES  
3190 CORSIVILLE RD SOUTH CAROLINA, OH 453 | 27-1980434 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11 | WAIMENA HAWAIIAN HOMESTEADERS ASSOCIATION IN  
PO BOX 126 KAMUELA, HI 96743 | 99-0317807 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12 | WAIKIKOLO CONGREGATIONAL CHURCH UCC  
4705 KILAUEA AVENUE HONOLULU, HI 96816 | 99-0089174 | 501 (C) 3 | 10,000 | FMV | N/A | FOR RECIPIENT'S EXEM |

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Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<td>23-2888152</td>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<td>WAIPA FOUNDATION</td>
<td>99-0313224</td>
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<td>FMV</td>
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<td>WAIT LIST ZERO</td>
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<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WAKE EDUCATION PARTNERSHIP</td>
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<td>FMV</td>
<td>N/A</td>
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<td>WAKE FOREST UNIVERSITY</td>
<td>56-0532138</td>
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<td>292,268</td>
<td>FMV</td>
<td>N/A</td>
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<td>MEDICAL CENTER BOULEVARD WINSTON SALEM, NC</td>
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<td>WAKE TECHNICAL COMMUNITY COLLEGE FOUNDATION</td>
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<td>FMV</td>
<td>N/A</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WAKEMAN MEMORIAL ASSOCIATION INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WALDENS PUDDLE INC</td>
<td>62-1471146</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>WALDO COUNTY YOUNG MENS CHRISTIAN ASSOCIATION</td>
<td>01-0493123</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>WALDORF EDUCATIONAL ASSOCIATION OF NC INC</td>
<td>56-1379068</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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<td>38-1790921</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
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### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  
   No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>WALES GOEBEL MINISTRY</td>
<td>1484 MCGUIRE RD VESTAVIA HILLS, AL 35216</td>
<td>63-0575967</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WALKER ART CENTER INC</td>
<td>725 VINELAND PL MINNEAPOLIS, MN 55403</td>
<td>41-0693299</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WALKER INC</td>
<td>1968 CENTRAL AVE NEEDHAM, MA 02492</td>
<td>04-2171186</td>
<td>501 (C) 3</td>
<td>28,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>700 COBB PKWY N MARIETTA, GA 30062</td>
<td>58-0940220</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WALKING MOUNTAINS</td>
<td>PO BOX 9469 AVON, CO 81620</td>
<td>84-1436731</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WALLA WALLA CHAMBER MUSIC FESTIVAL</td>
<td>PO BOX 119 WALLA WALLA, WA 99362</td>
<td>26-0869372</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WALLA WALLA COMMUNITY COLLEGE FOUNDATION</td>
<td>500 TAUSSIC WAY WALLA WALLA, WA 99362</td>
<td>91-1207033</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WALLACH BAPTIST CHURCH INC</td>
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<td>35-1472038</td>
<td>501 (C) 3</td>
<td>69,767.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WALLIN EDUCATION PARTNERS</td>
<td>5200 WILLSON RD STE 209 MINNEAPOLIS, MN 554</td>
<td>20-8505156</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WALLINGFORD COMMUNITY SENIOR CENTER</td>
<td>4649 SUNNYSIDE AVE N STE 140 SEATTLE, WA 98</td>
<td>91-1631962</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WALLINGFORD PRESBYTERIAN CHURCH</td>
<td>110 E BROOKHAVEN RD WALLINGFORD, PA 19086</td>
<td>23-1489833</td>
<td>501 (C) 3</td>
<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WALLIS ANNENBERG CENTER FOR THE PERFORMING</td>
<td>9390 SANTA MONICA BLVD BEVERLY HILLS, CA 90</td>
<td>95-4667830</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I - General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Method of valuation (book, FMV, appraisal, other)</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
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<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1. WARD MELVILLE HERITAGE ORGANIZATION LTD PO BOX 572 STONY BROOK, NY 11790 11-2440592 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
<td></td>
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<td>2. WARM BEACH CHRISTIAN CAMPS &amp; CONFERENCE CENTRE 20800 MARINE DR STANWOOD, WA 98292 91-1710210 501 (C) 3 9,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. WARM BLANKETS CHILDREN'S FOUNDATION INC 5105 TOLLVIEW DR STE 155 ROLLING MEADOWS, IL 60095 36-4395095 501 (C) 3 49,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>4. WARRIEN CENTER INC 320 CUSTER RD RICHARDSON, TX 75080 75-1282040 501 (C) 3 15,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>5. WARRIEN VILLAGE INC 1323 N GILPIN ST DENVER, CO 80218 84-0644270 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>6. WARRIEN WILSON COLLEGE  PO BOX 9000 ASHEVILLE, NC 28815 56-0767736 501 (C) 3 18,727. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>7. WARRIEN BAPTIST CHURCH 123 MAIN ST WARRENTON, VA 20186 54-058102 501 (C) 3 17,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>8. WARRIEN MEETING PLACE PO BOX 3103 WARRENTON, VA 20188 46-1889205 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. WARRIEN CARINE CONNECTION INC 14934 SCHAFFER RD BOYDS, MD 20841 45-2981579 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>10. WARRIEN DOG FOUNDATION 5930 ROYAL LN STE E355 DALLAS, TX 75230 46-2092762 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11. WARTBURG COLLEGE 100 WARTBURG BLVD WAVERLY, IA 50677 42-0680351 501 (C) 3 21,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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SCHEDULE I
(Form 990)

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Employer identification number

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<td>1</td>
<td>WARTBURG THEOLOGICAL SEMINARY</td>
<td>333 WARTBURG PL DUBUQUE, IA 52003</td>
<td>42-0681105</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WARWICK AREA FARMWORKER ORGANIZATION</td>
<td>PO BOX 607 GOSHEN, NY 10923</td>
<td>85-4221804</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WARWICK UNITED METHODIST CHURCH</td>
<td>135 FORESTER AVE WARWICK, NY 10990</td>
<td>14-6023201</td>
<td>501 (C) 3</td>
<td>11,050.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WASATCH KIDS CAMPS</td>
<td>2446 E EVERGREEN AVE SALT LAKE CITY, UT 841</td>
<td>41-2221212</td>
<td>501 (C) 3</td>
<td>8,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>WASATCH PRESBYTERIAN CHURCH</td>
<td>1626 SOUTH 1700 EAST SALT LAKE CITY, UT 841</td>
<td>87-0225633</td>
<td>501 (C) 3</td>
<td>12,150.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WASHBURN UNIVERSITY FOUNDATION</td>
<td>1729 SW MACVICAR AVE TOPEKA, KS 66604</td>
<td>48-6105561</td>
<td>501 (C) 3</td>
<td>16,500.</td>
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<td>WASHINGTON &amp; LEE UNIVERSITY</td>
<td>204 W WASHINGTON ST LEXINGTON, VA 24450</td>
<td>54-0505977</td>
<td>501 (C) 3</td>
<td>284,304.</td>
<td>FMV</td>
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<td>WASHINGTON AND JEFFERSON COLLEGE</td>
<td>60 S LINCOLN ST WASHINGTON, PA 15301</td>
<td>25-0965601</td>
<td>501 (C) 3</td>
<td>63,500.</td>
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<td>N/A</td>
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<td>WASHINGTON APPLE EDUCATION FOUNDATION</td>
<td>2900 EUCLID AVE WENATCHEE, WA 98801</td>
<td>91-1638890</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WASHINGTON AREA BICYCLIST ASSOCIATION</td>
<td>2599 ONTARIO RD NW WASHINGTON, DC 20009</td>
<td>23-7305477</td>
<td>501 (C) 3</td>
<td>7,000.</td>
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<td>11</td>
<td>WASHINGTON AREA HUMAN S SOCIETY</td>
<td>PO BOX 66 EIGHTY FOUR, PA 15330</td>
<td>25-0995781</td>
<td>501 (C) 3</td>
<td>16,000.</td>
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<td>12</td>
<td>WASHINGTON AREA WOMENS FOUNDATION INC</td>
<td>1331 H ST NW STE 1000 WASHINGTON, DC 20005</td>
<td>52-2028612</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(1)</td>
<td>WASHINGTON CITY MISSION INC</td>
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<td>25-1051749</td>
<td>501 (C) 3</td>
<td>173,494.</td>
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<td>WASHINGTON COLLEGE</td>
<td>300 WASHINGTON AVE CHESTERTOWN, MD 21620</td>
<td>52-0591691</td>
<td>501 (C) 3</td>
<td>14,800.</td>
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<td>400 S UNIVERSITY DR WEST BEND, WI 53095</td>
<td>39-1248660</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>WASHINGTON COUNTY COMMUNITY FOUNDATION INC</td>
<td>PO BOX 308 EIGHTY FOUR, PA 15330</td>
<td>25-1726013</td>
<td>501 (C) 3</td>
<td>135,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(5)</td>
<td>WASHINGTON CROSSING UNITED METHODIST CHURCH</td>
<td>1895 WRIGHTSTOWN ROAD WASHINGTON CROSSING</td>
<td>23-7321325</td>
<td>501 (C) 3</td>
<td>58,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WASHINGTON DC MEALS ON WHEELS INC</td>
<td>7410 NEW HAMPSHIRE AVE TAKOMA PARK, MD 2091</td>
<td>52-0943628</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>WASHINGTON DRAMA SOCIETY INC</td>
<td>1101 6TH ST SW WASHINGTON, DC 20024</td>
<td>53-0246894</td>
<td>501 (C) 3</td>
<td>39,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WASHINGTON ENVIRONMENTAL COUNCIL</td>
<td>1402 3RD AVE STE 1400 SEATTLE, WA 98101</td>
<td>81-0839385</td>
<td>501 (C) 3</td>
<td>24,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WASHINGTON GREEN SCHOOLS</td>
<td>4649 SUNNYSIDE AVE N STE 3 SEATTLE, WA 9810</td>
<td>27-5411173</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>WASHINGTON HEBREW CONGREGATION</td>
<td>3935 MACOMB STREET NORTHWEST WASHINGTON, DC</td>
<td>53-0196646</td>
<td>501 (C) 3</td>
<td>9,875.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>WASHINGTON HEIGHTS INWOOD PRESERVATION AND</td>
<td>121 BENNETT AVE APT 11A NEW YORK, NY 10033</td>
<td>13-2944830</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(12)</td>
<td>WASHINGTON HOSPITAL FOUNDATION INC</td>
<td>155 WILSON AVE WASHINGTON, PA 15301</td>
<td>25-1708215</td>
<td>501 (C) 3</td>
<td>107,168.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
</tr>
</tbody>
</table>

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>(g) Description of non-cash assistance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WASHINGTON HUMANE SOCIETY THE SOCIETY FOR T</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>WASHINGTON INSTITUTE FOR NATURAL HISTORY</td>
<td>22-3888152</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>22-3888152</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
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<td>5</td>
<td>WASHINGTON LAWYERS COMMITTEE FOR CIVIL RIGHTS</td>
<td>22-3888152</td>
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<td>6</td>
<td>WASHINGTON MIDDLE SCHOOL PTSA N6 15 390</td>
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<td>7</td>
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<td>8</td>
<td>WASHINGTON POLICY CENTER</td>
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<td>FMV</td>
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</tr>
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<td>9</td>
<td>WASHINGTON PROGRESS FUND</td>
<td>22-3888152</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
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<td>10</td>
<td>WASHINGTON REGIONAL MEDICAL FOUNDATION</td>
<td>22-3888152</td>
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<td>17,000.</td>
<td>FMV</td>
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<td>11</td>
<td>WASHINGTON SQUARE MINYON</td>
<td>22-3888152</td>
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<td>5,150.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>WASHINGTON SQUARE PARK CONSERVANCY INC</td>
<td>22-3888152</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................................. **Yes**  **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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</tr>
</thead>
<tbody>
<tr>
<td>WASHINGTON STATE BOYS &amp; GIRLS CLUBS ASSOCIATION</td>
<td>35-2275325</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WASHINGTON STATE UNIVERSITY FOUNDATION</td>
<td>91-1075542</td>
<td>501 (c) 3</td>
<td>80,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WASHINGTON TENNIS &amp; EDUCATION</td>
<td>52-6046504</td>
<td>501 (c) 3</td>
<td>12,300.</td>
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<td>N/A</td>
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<tr>
<td>WASHINGTON TRAILS ASSOCIATION</td>
<td>91-0900134</td>
<td>501 (c) 3</td>
<td>152,050.</td>
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<td>WASHINGTON UNIVERSITY</td>
<td>43-0653611</td>
<td>501 (c) 3</td>
<td>999,802.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WASHINGTON WALDORF SCHOOL INC</td>
<td>23-7003486</td>
<td>501 (c) 3</td>
<td>13,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WASHINGTON WOMENS FOUNDATION</td>
<td>91-1754933</td>
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<td>75,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>01-0869799</td>
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<td>14,950.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WASHOE COUNTY SCHOOL DISTRICT</td>
<td>88-6000919</td>
<td>501 (c) 3</td>
<td>43,427.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATCHTOWER BIBLE AND TRACT SOCIETY OF NEW Y</td>
<td>11-1753577</td>
<td>501 (c) 3</td>
<td>74,248.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATER 4 INC</td>
<td>26-3260581</td>
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<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATER ACCESS            NOW</td>
<td>45-3246965</td>
<td>501 (c) 3</td>
<td>26,057.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table ................................................................. **18**

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

Schedule I (Form 990) 2020
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WATER COMPASS INC</td>
<td>505 TREMONT ST UNIT 411 BOSTON, MA 2116</td>
<td>81-2220537</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>WATER FIRST INTERNATIONAL</td>
<td>1904 3RD AVE STE 1012 SEATTLE, WA 98101</td>
<td>20-2601035</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>3</td>
<td>WATER FOR PEOPLE</td>
<td>100 E TENNESSEE AVE DENVER, CO 80209</td>
<td>84-1166148</td>
<td>501 (C) 3</td>
<td>88,683.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>WATER FOR SOUTH SUDAN INC</td>
<td>PO BOX 25551 ROCHESTER, NY 14625</td>
<td>20-0291592</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>WATER MISSIONS INTERNATIONAL</td>
<td>PO BOX 71489 NORTH CHARLESTON, SC 29415</td>
<td>57-1116978</td>
<td>501 (C) 3</td>
<td>214,269.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>WATER ORG INC</td>
<td>117 W 20TH ST STE 203 KANSAS CITY, MO 64108</td>
<td>58-2060131</td>
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<td>1,218,501.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td>WATER PROJECT INC</td>
<td>17 DEPOT ST STE 2 CONCORD, NH 3301</td>
<td>26-1455510</td>
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<td>202,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>WATER STREET MINISTRIES</td>
<td>210 S PRINCE ST LANCASTER, PA 17603</td>
<td>23-6004676</td>
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<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td>WATER TO THRIVE</td>
<td>8701 N MOPAC EXY STE 105 AUSTIN, TX 78759</td>
<td>26-2213782</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>WATER WELLS FOR AFRICA</td>
<td>PO BOX 635 MANHATTAN BEACH, CA 90267</td>
<td>36-4636718</td>
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<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>WATERAID AMERICA INC</td>
<td>233 BROADWAY RM 2705 NEW YORK, NY 10279</td>
<td>30-0181674</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>WATEREQUITY INC</td>
<td>117 W 20TH ST STE 204 KANSAS CITY, MO 64108</td>
<td>81-4109426</td>
<td>501 (C) 3</td>
<td>500,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I  General Information on Grants and Assistance**

| 1 | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | Yes | No |

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>WATERFORD MENNONITE CHURCH</td>
<td>65975 STATE ROAD 15 GOSHEN, IN 46526</td>
<td>501 (C) 3</td>
<td>13,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATERFORD SCHOOL HOLDING CORPORATION</td>
<td>1590 E 9400 S SANDY, UT 84593</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>WATERFRONT CHURCH DC</td>
<td>PO BOX 70666 WASHINGTON, DC 20024</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>WATERKEEPER ALLIANCE INC</td>
<td>180 MAIDEN LN STE 603 NEW YORK, NY 10038</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>WATERKEEPERS CHESAPEAKE INC</td>
<td>PO BOX 11075 TAKOMA PARK, MD 20913</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATERMARK COMMUNITY CHURCH</td>
<td>7540 LBJ FWY DALLAS, TX 75251</td>
<td>501 (C) 3</td>
<td>10,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATERMARK OF THE CHRISTIAN AND MISSIONARY A</td>
<td>6608 N CENTRAL AVE TAMPA, FL 33604</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATER'S EDGE COMMUNITY CHURCH</td>
<td>PO BOX 309 CLARKSVILLE, VA 23927</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>WATERSHED CENTER FOR THE CERAMIC ARTS INCOR</td>
<td>103 COCHRAN RD EDGECOMB, ME 4556</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WATERSHED INSTITUTE INC</td>
<td>ATTENTION: MEMBERSHIP AND ANNUAL GIVING 31</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATERSIDE SCHOOL INC</td>
<td>770 PACIFIC ST STAMFORD, CT 6902</td>
<td>501 (C) 3</td>
<td>122,054.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WATERTOWN COMMUNITY FOUNDATION INC</td>
<td>PO BOX 334 WATERTOWN, MA 2471</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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► Attach to Form 990.
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**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

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### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - [X] Yes
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</thead>
<tbody>
<tr>
<td>WATSI</td>
<td>45-3236734</td>
<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WAVE FARM INC</td>
<td>83-0346659</td>
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<td>WAXAHACHIE C A R E SERVICES</td>
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<td>WAY TO GROW</td>
<td>71-0956749</td>
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<td>WAYLAND ACADEMY</td>
<td>39-0806363</td>
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<td>WAYNE HILLS FOOTBALL INC</td>
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<td>WAYNE UNITED METHODIST CHURCH</td>
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<td>WAYNESBURG FIRST CHURCH OF THE NAZARENE</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1</td>
<td>WAYNFLETE SCHOOL</td>
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<td>WAYSIDE YOUTH &amp; FAMILY SUPPORT NETWORK</td>
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<td>7</td>
<td>WE ARE &amp;MOTHER</td>
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<td>8</td>
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<td>82-2548437</td>
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<td>9</td>
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<td>10</td>
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<td>11</td>
<td>WE HOPE</td>
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<td>12</td>
<td>WE MAKE NOISE INC</td>
<td>47-2596330</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>WE PLAYERS</td>
<td>54 PIER PIER 54 SAN FRANCISCO, CA 94158</td>
<td>45-4054832</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WE STAND WITH CHRIST INC</td>
<td>238 JEWETT AVE BRIDGEPORT, CT 6606</td>
<td>82-3779115</td>
<td>501 (C) 3</td>
<td>71,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WE THE PROTESTERS INC</td>
<td>30 E 125TH ST # 132 NEW YORK, NY 10035</td>
<td>81-3764408</td>
<td>501 (C) 3</td>
<td>33,451.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WEANTINOGE HERITAGE LAND TRUST INC</td>
<td>5 MAPLE ST KENT, CT 6757</td>
<td>06-6082034</td>
<td>501 (C) 3</td>
<td>115,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WEATHERVANE MUSIC ORGANIZATION</td>
<td>2424 E YORK ST STE 3010 PHILADELPHIA, PA 19</td>
<td>27-4824232</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>WEBB INSTITUTE</td>
<td>298 CRESCENT BEACH RD GLEN COVE, NY 11542</td>
<td>11-1630912</td>
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<td>WEBB SCHOOL OF KNOXVILLE</td>
<td>9800 WEBB SCHOOL LN KNOXVILLE, TN 37923</td>
<td>62-0550980</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
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<tr>
<td>WEBER STATE UNIVERSITY</td>
<td>3850 DIXON Fwy DEPT 1021 OGDEN, UT 84408</td>
<td>87-6000535</td>
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<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WEBSTER GROVES PRESBYTERIAN CHURCH</td>
<td>45 W LOCKWOOD AVE SAINT LOUIS, MO 63119</td>
<td>43-0662530</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WEC INTERNATIONAL</td>
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<td>23-6396212</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WEDGE ENTOMOLOGICAL RESEARCH FOUNDATION</td>
<td>9417 CARVALHO CT BAKERSFIELD, CA 93311</td>
<td>23-7348134</td>
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<td>FMV</td>
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<td>WEDGWOOD CIRCLE INSTITUTE</td>
<td>6506 LOISDALE RD STE 203 SPRINGFIELD, VA 22</td>
<td>26-3899171</td>
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<td>35,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>1</td>
<td>WEEKAPAUG FOUNDATION FOR CONSERVATION</td>
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<td>22-3018145</td>
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<td>11,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WELBORNE UNITED METHODIST CHURCH</td>
<td>920 MAYBEURY DR HENRICO, VA 23229</td>
<td>54-0799727</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td>WELCOME HOME HAITI INC</td>
<td>PO BOX 9 GRIDLEY, IL 61704</td>
<td>27-0976196</td>
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<td>131,400.</td>
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<td>4</td>
<td>WELCOME HOME INC</td>
<td>33 IRVING ST NEWTON CENTER, MA 2459</td>
<td>32-0609377</td>
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<td>6,500.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WELD FOOD BANK</td>
<td>1108 H ST GREELEY, CO 80631</td>
<td>74-2244826</td>
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<td>13,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WELL AWARE INC</td>
<td>3571 FAR WEST BLVD PMB 229 AUSTIN, TX 78731</td>
<td>20-5025148</td>
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<td>17,500.</td>
<td>FMV N/A</td>
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<td>7</td>
<td>WELL CHURCH</td>
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<td>45-5542861</td>
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<td>7,300.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>WELLESLEY ABC PROGRAM INC</td>
<td>396 WASHINGTON ST WELLESLEY HILLS, MA 2481</td>
<td>04-2503812</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WELLESLEY COLLEGE</td>
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<td>04-2103637</td>
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<td>1,199,000.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WELLESLEY CONGREGATIONAL CHURCH UCC</td>
<td>2 CENTRAL STREET WELLESLEY, MA 2482</td>
<td>04-2173417</td>
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<td>12,300.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>11</td>
<td>WELLESLEY SCHOLARSHIP FOUNDATION INC</td>
<td>PO BOX 81207 WELLESLEY HILLS, MA 2481</td>
<td>04-2392419</td>
<td>501 (C) 3</td>
<td>27,500.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>WELLINGTON MANAGEMENT FOUNDATION</td>
<td>280 CONGRESS ST BOSTON, MA 2210</td>
<td>06-6700836</td>
<td>501 (C) 3</td>
<td>764,500.</td>
<td>FMV N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
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<tr>
<td>1. WELLNESS HOUSE</td>
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<td>2. WELLNEST EMOTIONAL HEALTH &amp; WELLNESS</td>
<td>95-1690974</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>3. WELLS BRING HOPE</td>
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<td>4. WELLS COLLEGE</td>
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<td>5. WELLS COUNTY</td>
<td>45-6000229</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6. WELLS MOUNTAIN INITIATIVE INC</td>
<td>20-3823604</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7. WELSPRING CHURCH</td>
<td>06-1049319</td>
<td>501 (C) 3</td>
<td>11,040.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. WELSPRING CHURCH</td>
<td>84-1583125</td>
<td>501 (C) 3</td>
<td>27,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. WELSPRING FAMILY SERVICES</td>
<td>91-0567261</td>
<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10. WELSPRING FOUNDATION INC</td>
<td>06-1014227</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>11. WELSPRING INC</td>
<td>04-2969215</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<tr>
<td>12. WELSPRING LIVING INC</td>
<td>04-2969215</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [x] No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No</th>
<th>Name of the organization or government</th>
<th>Employer identification number</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>WENATCHEE VALLEY COLLEGE FOUNDATION INC</td>
<td>23-7319272</td>
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<td>2</td>
<td>WENATCHEE VALLEY HUMANE SOCIETY INC</td>
<td>91-0838299</td>
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<td>N/A</td>
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<tr>
<td>3</td>
<td>WENDELL GILLEY MUSEUM OF BIRD CARVING THE</td>
<td>01-0368574</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
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<tr>
<td>4</td>
<td>WENDYS SUBWAY INC</td>
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<td>5</td>
<td>WESLEY CHAPEL MISSION CENTER</td>
<td>31-6059871</td>
<td>501 (C) 3</td>
<td>6,000</td>
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<tr>
<td>6</td>
<td>WESLEY COMMUNITY CENTER INC</td>
<td>1410 LEE ST HOUSTON, TX 77009</td>
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<tr>
<td>7</td>
<td>WESLEY MONUMENTAL UNITED METHODIST CHURCH</td>
<td>429 ABERCORN ST SAVANNAH, GA 31401</td>
<td>501 (C) 3</td>
<td>31,000</td>
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<td>8</td>
<td>WESLEY SAN JOSE UNITED METHODIST CHURCH</td>
<td>566 N 5TH ST SAN JOSE, CA 95112</td>
<td>501 (C) 3</td>
<td>20,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>WESLEY THEOLOGICAL SEMINARY OF THE METHODIS</td>
<td>4500 MASSACHUSETTS AVE NW WASHINGTON, DC 20</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>10</td>
<td>WESLEY UNITED METHODIST</td>
<td>P.O. BOX 864 GREENVILLE, TX 75403</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>WESLEYAN SCHOOL INC</td>
<td>5405 SPALDING DR PEAHTREE CORNERS, GA 3009</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>WESLEYAN UNIVERSITY</td>
<td>291 MAIN ST MIDDLETOWN, CT 6457</td>
<td>501 (C) 3</td>
<td>864,702</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee's eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) WEST 9TH STREET BLOCK ASSOCIATION INC</td>
<td>69-2240306</td>
<td>501 (C) 3</td>
<td>11,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) WEST CENTRAL WISCONSIN COMMUNITY ACTION AGE</td>
<td>39-1076125</td>
<td>501 (C) 3</td>
<td>21,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) WEST CHESTER CHURCH OF THE NAZARENE</td>
<td>31-0929680</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) WEST CHESTER FOOD CUPBOARD</td>
<td>46-1420690</td>
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<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) WEST CHESTER UNIVERSITY FOUNDATION</td>
<td>23-3054174</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) WEST CLERMONT</td>
<td>42-1102069</td>
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<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) WEST COAST LACROSSE FOUNDATION</td>
<td>83-3243421</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) WEST COLUMBIA GORGE HUMANE SOCIETY A NON-PR</td>
<td>81-1634652</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>(9) WEST END PRESBYTERIAN CHURCH</td>
<td>54-1678374</td>
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<tr>
<td>(10) WEST HARLEM ENVIRONMENTAL ACTION INC</td>
<td>13-3800068</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
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<tr>
<td>(11) WEST HILL'S COVENANT CHURCH OR</td>
<td>93-0638917</td>
<td>501 (C) 3</td>
<td>17,900.</td>
<td>FMV</td>
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<td>(12) WEST HILL'S PRESBYTERIAN CHURCH</td>
<td>62-0933362</td>
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<td>FMV</td>
<td>N/A</td>
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</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.

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<thead>
<tr>
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<th>Employer Identification Number</th>
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<tbody>
<tr>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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</table>

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>WEST HOUSTON ASSISTANCE MINISTRIES INC 10501 MEADOWGLEN LN HOUSTON, TX 77042</td>
<td>76-0001309</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
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<td>WEST HOUSTON CHINESE CHURCH 10638 RIFFMAY BLVD HOUSTON, TX 77043</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<tr>
<td>WEST LUTHERAN HIGH SCHOOL 3350 HARBOR LN N MINNEAPOLIS, MN 55447</td>
<td>41-1336777</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WEST MARIN COMMUNITY SERVICES PO BOX 1093 POINT REYES STATION, CA 94956</td>
<td>68-0197586</td>
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<td>13,500.</td>
<td>FMV</td>
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<td>WEST MARIN SENIOR SERVICES PO BOX 791 POINT REYES STATION, CA 94956</td>
<td>51-0192320</td>
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<td>8,000.</td>
<td>FMV</td>
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<tr>
<td>WEST MARKET STREET METHODIST CHURCH PO BOX 870 GREENSBORO, NC 27402</td>
<td>56-0543248</td>
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<td>WEST MEADE FELLOWSHIP CHURCH 277 OLD HICKORY BLVD BELLEVUE, TN 37221</td>
<td>85-1483699</td>
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<td>FMV</td>
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<td>WEST METRO CHINESE CHURCH 14720 COUNTY ROAD 6 MINNEAPOLIS, MN 55447</td>
<td>81-2512434</td>
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<td>6,000.</td>
<td>FMV</td>
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<tr>
<td>WEST NOTTINGHAM ACADEMY 1079 FIRETOWER RD COLORA, MD 21917</td>
<td>52-0591493</td>
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<td>36,000.</td>
<td>FMV</td>
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<td>WEST OHIO FOOD BANK PO BOX 1566 LIMA, OH 45802</td>
<td>34-1587528</td>
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<td>FMV</td>
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<tr>
<td>WEST PALM BEACH LIBRARY FOUNDATION INC 411 CLEMATIS ST FL 3 WEST PALM BEACH, FL 33401</td>
<td>65-1068311</td>
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<td>10,000.</td>
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<td>WEST POINT FIRST UNITED METHODIST CHURCH 306 E 7TH STREET WEST POINT, GA 31833</td>
<td>58-0648679</td>
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<td>8,000.</td>
<td>FMV</td>
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
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<tr>
<td>(1) WEST POINT JEWISH CHAPEL FUND</td>
<td>1010 NORTHERN BLVD STE 400 GREAT NECK, NY 1</td>
<td>13-2625611</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(2) WEST READING COMMUNITY REVITALIZATION FOUND</td>
<td>20 W 6TH AVE FL 2 READING, PA 19611</td>
<td>23-2959713</td>
<td>501 (C) 3</td>
<td>250,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) WEST SEATTLE FOOD BANK</td>
<td>3419 SW MORGAN ST SEATTLE, WA 98126</td>
<td>91-1464412</td>
<td>501 (C) 3</td>
<td>9,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) WEST SIDE CATHOLIC CENTER</td>
<td>3135 LORAIN AVE CLEVELAND, OH 44113</td>
<td>34-1244687</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5) WEST SIDE CENTER FOR COMMUNITY LIFE INC</td>
<td>263 W 86TH ST NEW YORK, NY 10024</td>
<td>71-0908184</td>
<td>501 (C) 3</td>
<td>52,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) WEST SIDE FOOD BANK A NON-PROFIT CORPORATION</td>
<td>1710 22ND ST SANTA MONICA, CA 90404</td>
<td>95-3685875</td>
<td>501 (C) 3</td>
<td>9,470.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) WEST SIDE PRESBYTERIAN CHURCH OF RIDGWOOD</td>
<td>6 S MONROE ST RIDGWOOD, NJ 7450</td>
<td>22-1494455</td>
<td>501 (C) 3</td>
<td>10,150.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) WEST SUBURBAN Y M C A</td>
<td>276 CHURCH ST NEWTON, MA 2458</td>
<td>04-2104783</td>
<td>501 (C) 3</td>
<td>6,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) WEST TENNESSEE HEALTHCARE FOUNDATION</td>
<td>620 SKYLINE DR JACKSON, TN 38301</td>
<td>58-1671241</td>
<td>501 (C) 3</td>
<td>300,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(10) WEST TEXAS FOOD BANK</td>
<td>411 S PAGEWOOD AVE ODESSA, TX 79761</td>
<td>75-205762</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) WEST UNIVERSITY UNITED METHODIST CHURCH</td>
<td>3611 UNIVERSITY BOULEVARD HOUSTON, TX 77005</td>
<td>74-6601408</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12) WEST VALLEY BOYS &amp; GIRLS CLUB</td>
<td>7245 RENMET AVE CANOGA PARK, CA 91303</td>
<td>95-4419365</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
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# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 
   
   [ ] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
<td>WEST VALLEY COMMUNITY SERVICES OF SANTA CLA</td>
<td>94-2211685</td>
<td>501 (c) 3</td>
<td>36,500.</td>
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<td>19,450.</td>
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</table>
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
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<td>06-1086725</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................

3. Enter total number of other organizations listed in the line 1 table ...........................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# SCHEDULE I
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

## General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments
Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td></td>
<td>(h) Purpose of grant or assistance</td>
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<td>1. (1)</td>
<td>WESTERN DIOCESE OF THE ARMENIAN CHURCH OF N</td>
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<td>1. (8)</td>
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<tr>
<td>1. (10)</td>
<td>WESTERN NEW YORK LAND CONSERVANCY INC</td>
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<td>PO BOX 471 EAST AURORA, NY 14052</td>
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<td>FMV</td>
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<td>1. (11)</td>
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<td>140 LOWER TERRACE ST BUFFALO, NY 14202</td>
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<td>FMV</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
223-2888152

Part I General Information on Grants and Assistance
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .................
   Yes [x] No

2 Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government
(b) EIN
(c) IRC section (if applicable)
(d) Amount of cash grant
(e) Amount of non-cash assistance
(f) Method of valuation (book, FMV, appraisal, other)
(g) Description of noncash assistance
(h) Purpose of grant or assistance

| (1) WESTERN OKLAHOMA STATE COLLEGE FOUNDATION A 2801 NORTH MAIN ALTUS, OK 73521 | 23-7409802 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (2) WESTERN PENNSYLVANIA CONSERVANCY 800 WATERFRONT DR PITTSBURGH, PA 15222 | 25-1053485 | 501 (C) 3 | 107,555. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (3) WESTERN PENNSYLVANIA SCHOOL FOR THE DEAF 300 E SWISSVALE AVE PITTSBURGH, PA 15218 | 25-1095386 | 501 (C) 3 | 17,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (4) WESTERN PENNSYLVANIA SCHOOL FOR BLIND CHILD 201 N BELLEFIELD AVE PITTSBURGH, PA 15213 | 25-1095385 | 501 (C) 3 | 17,250. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (5) WESTERN RESERVE LAND CONSERVANCY 3850 CHAGRIN RIVER RD CHAGRIN FALLS, OH 44109 | 34-1571233 | 501 (C) 3 | 33,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (6) WESTERN RIVERS CONSERVANCY 71 SW OAK ST PORTLAND, OR 97204 | 99-1326405 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (7) WESTERN STOCK SHOW ASSOCIATION 4655 HUMBOLDT ST DENVER, CO 80216 | 84-0517361 | 501 (C) 3 | 8,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (8) WESTERN TIDEWATER FREE CLINIC INC 2019 MEADE PFWY SUFFOLK, VA 23434 | 26-3302837 | 501 (C) 3 | 20,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (9) WESTERN WAKE CRISIS MINISTRY INC 1600 OLIVE CHAPEL RD STE 408 AFEX, NC 27502 | 56-1585440 | 501 (C) 3 | 10,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (10) WESTERN WASH CORPORATION OF SEVENTH DAY ADV 32229 WEYERHAEUSER WAY S FEDERAL WAY, WA 98034 | 91-0644803 | 501 (C) 3 | 9,412. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (11) WESTERVILLE PARKS FOUNDATION 350 N CLEVELAND AVE WESTERVILLE, OH 43082 | 31-1719247 | 501 (C) 3 | 80,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| (12) WESTGATE CHRISTIAN SCHOOL 1990 OLD REIDSVILLE RD SPARTANBURG, SC 29301 | 81-2757370 | 501 (C) 3 | 15,752. | FMV | N/A | FOR RECIPIENT'S EXEM |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................

3 Enter total number of other organizations listed in the line 1 table ................................................................................

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

Schedule I (Form 990) 2020
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [ ] Yes  
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>1. VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
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<tr>
<td>2. WESTHAB INC</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>3. WESTHAMPTON SYNAGOGUE INC</td>
<td>11-3048031</td>
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<td>FMV</td>
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<td>5. WESTLAKE BIBLE CHURCH</td>
<td>74-2132967</td>
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<td>48,500.</td>
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<td>7. WESTMINSTER PRESBYTERIAN CHURCH</td>
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<td>9. WESTMINSTER COLLEGE</td>
<td>25-0981156</td>
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<td>FMV</td>
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<td>10. WESTMINSTER COLLEGE</td>
<td>43-0652617</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>11. WESTMINSTER PRESBYTERIAN CHURCH</td>
<td>25-1017603</td>
<td>501 (C) 3</td>
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<td>12. WESTMINSTER PRESBYTERIAN CHURCH</td>
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<td>13. WESTMINSTER PRESBYTERIAN CHURCH</td>
<td>23-1702657</td>
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<td>FMV</td>
<td>N/A</td>
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3. Enter total number of other organizations listed in the line 1 table. ...........................................................................................................
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   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>WESTMINSTER PRESBYTERIAN CHURCH 10 W PLEASANT GROVE RD WEST CHESTER, VA 223</td>
<td>23-1370437</td>
<td>501 (C) 3</td>
<td>7,080.00 FMV</td>
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<td>WESTMINSTER PRESBYTERIAN CHURCH 2701 CAMERON MILLS ROAD ALEXANDRIA, PA 1938</td>
<td>56-0613947</td>
<td>501 (C) 3</td>
<td>8,000.00 FMV</td>
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<td>WESTMINSTER PRESBYTERIAN CHURCH 101 COLVILLE ROAD CHARLOTTE, NC 28261</td>
<td>56-0634130</td>
<td>501 (C) 3</td>
<td>11,000.00 FMV</td>
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<td>WESTMINSTER PRESBYTERIAN CHURCH 32111 WATERGATE RD WESTLACE VILLAGE, PA 165</td>
<td>95-2630023</td>
<td>501 (C) 3</td>
<td>14,000.00 FMV</td>
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<tr>
<td>WESTMINSTER PRESBYTERIAN CHURCH 240 TIBURON BLVD BELVEDERE TIBURON, CA 1524</td>
<td>94-1518619</td>
<td>501 (C) 3</td>
<td>26,250.00 FMV</td>
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<td>62-0481470</td>
<td>501 (C) 3</td>
<td>20,800.00 FMV</td>
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<td>WESTMINSTER RETIREMENT COMMUNITIES FOUNDATION 80 W LUCERNE CIR ORLANDO, FL 32801</td>
<td>23-7414048</td>
<td>501 (C) 3</td>
<td>25,000.00 FMV</td>
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<td>WESTMINSTER SCHOOLS INC 1424 W PACES FERRY RD NW ATLANTA, GA 30327</td>
<td>58-0566206</td>
<td>501 (C) 3</td>
<td>14,000.00 FMV</td>
<td>N/A</td>
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<tr>
<td>WESTMINSTER THEOLOGICAL SEMINARY 2960 CHURCH RD GLENSIDE, PA 19038</td>
<td>23-1352689</td>
<td>501 (C) 3</td>
<td>14,320.00 FMV</td>
<td>N/A</td>
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<tr>
<td>WESTMINSTER THEOLOGICAL SEMINARY IN CALIFORNIA 1725 BEAR VALLEY FMW ESCONDIDO, CA 92027</td>
<td>95-3457731</td>
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<td>14,000.00 FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WESTMINSTER-CANTERBURY OF THE BLUE RIDGE FOUNDATION 250 PANTOPS MTN RD CHARLOTTESVILLE, VA 22911</td>
<td>54-1882970</td>
<td>501 (C) 3</td>
<td>11,600.00 FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WESTMONT COLLEGE 955 LA PAZ RD SANTA BARBARA, CA 93108</td>
<td>95-1684793</td>
<td>501 (C) 3</td>
<td>66,750.00 FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

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</thead>
<tbody>
<tr>
<td>1 WESTMORELAND CONGREGATIONAL UNITED CHURCH O</td>
<td>53-0196852</td>
<td>501 (c) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2 WESTOVER CHURCH</td>
<td>56-0629347</td>
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<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3 WESTOVER HILLS CHURCH OF CHRIST</td>
<td>74-1803846</td>
<td>501 (c) 3</td>
<td>9,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4 WESTOVER SCHOOL INC</td>
<td>06-0646961</td>
<td>501 (c) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>5 WESTPORT COUNTRY PLAYHOUSE INC</td>
<td>23-7357943</td>
<td>501 (c) 3</td>
<td>26,968.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6 WESTPORT LIBRARY ASSOC</td>
<td>06-0672978</td>
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<td>5,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7 WESTPORT VOLUNTEER EMERGENCY MEDICAL SERVIC</td>
<td>06-1018202</td>
<td>501 (c) 3</td>
<td>7,500.</td>
<td>FMV</td>
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<td>8 WESTRIDGE SCHOOL FOR GIRLS</td>
<td>95-1644047</td>
<td>501 (c) 3</td>
<td>18,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>9 WESTSIDE ASSOCIATION FOR YOUTH VOCATIONAL A</td>
<td>84-3154699</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10 WESTSIDE BABY</td>
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<td>33,000.</td>
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<td>11 WESTSIDE NEIGHBORHOOD SCHOOL</td>
<td>95-3551091</td>
<td>501 (c) 3</td>
<td>35,000.</td>
<td>FMV</td>
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<td>12 WESTSIDE SHEPHERD RESCUE OF LOS ANGELES INC</td>
<td>41-2078176</td>
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<td>31,250.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

Attach to Form 990.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888512

### Part I General Information on Grants and Assistance

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<tbody>
<tr>
<td>WESTSIDE UNITARIAN UNIVERSALIST CHURCH</td>
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<td>WESTTOWN SCHOOL</td>
<td>20-5073581</td>
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<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WESTVIEW CONGREGATION OF JEHOVAH'S WITNESSE</td>
<td>04-8104318</td>
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<td>12,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WESTWOOD BAPTIST CHURCH, INC. - ROXBORO, NC</td>
<td>56-1253691</td>
<td>501 (C) 3</td>
<td>16,400.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>FMV</td>
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<td>WESTWOOD UNITED METHODIST CHURCH</td>
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<td>WGBS INC</td>
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<td>501 (C) 3</td>
<td>11,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WHALE AND DOLPHIN CONSERVATION INC</td>
<td>02-0749188</td>
<td>501 (C) 3</td>
<td>150,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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Schedule I (Form 990) 2020

JSA

18674H 1467 V 20-7.21
## Part I  General Information on Grants and Assistance

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   ![Yes](image)

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<td>2</td>
<td>WHATCOM HOSPICE FOUNDATION</td>
<td>94-3146369</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WHATCOM LAND TRUST</td>
<td>91-1246994</td>
<td>501 (C) 3</td>
<td>47,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>4</td>
<td>WHEAT RIDGE CONGREGATION OF THE UNITED CHURCH</td>
<td>84-0538736</td>
<td>501 (C) 3</td>
<td>7,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>WHEATON BIBLE CHURCH</td>
<td>36-2233546</td>
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<td>8</td>
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<td>46-1781467</td>
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<td>9</td>
<td>WHEELER MISSION MINISTRIES INC</td>
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<td>10</td>
<td>WHEN WE ALL VOTE</td>
<td>83-0996376</td>
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<td>11</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>WHIDBEY ENVIRONMENTAL ACTION NETWORK</td>
<td>91-1656410</td>
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<td>82-4562776</td>
<td>501 (C) 3</td>
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<td>6</td>
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<td>7</td>
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<td>12</td>
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<td>56-1031475</td>
<td>501 (C) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  .........................................................  ☒ Yes  ☐ No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
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<td>PO BOX 1060 WHITEFISH, MT 59937</td>
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<td>(2) WHITEHEAD INSTITUTE FOR BIOMEDICAL RESEARCH</td>
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<td>455 MAIN ST CAMBRIDGE, MA 2142</td>
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<td>(3) WHITEHOUSE BAND BOOSTERS</td>
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<td>501 E MAIN ST WHITEHOUSE, TX 75791</td>
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<td>(4) WHITEMARSH CONTINUING CARE RETIREMENT COMMU</td>
<td>83-0344521</td>
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<td>FMV</td>
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<td>(7) WHITESBURG BAPTIST CHURCH – HUNTSVILLE, AL</td>
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<td>(8) WHITESIDE PRESBYTERIAN CHURCH</td>
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<td>(9) WHITETAILS UNLIMITED INC</td>
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<td>FMV</td>
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<td>PO BOX 720 STURGEON BAY, WI 54235</td>
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<td>(10) WHITENWATER CROSSING CHRISTIAN CHURCH</td>
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<td>(11) WHITMAN COLLEGE BOARD OF TRUSTEES</td>
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<td>345 BOYER AVE WALLA WALLA, WA 99362</td>
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<td>(12) WHITMAN-WALKER CLINIC INC</td>
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<td>8,000.</td>
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</table>

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## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
<th>6(f) Method of valuation (book, FMV, appraisal, other)</th>
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<th>8(h) Purpose of grant or assistance</th>
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<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
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<td>WHY ME MINISTRY</td>
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<td>255,540. FMV</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>346,000. FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
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<td>33,000. FMV</td>
<td>N/A</td>
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<tr>
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<td>682,867. FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| WILD ANIMAL INITIATIVE INC  
115 ELM ST STE I FARMINGTON, MN 55024  
82-2281466  
501 (c) 3  
50,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILD ARIZONA  
PO BOX 40340 TUCSON, AZ 85717  
20-0412328  
501 (c) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILD EARTH ALLIES INC  
2 WISCONSIN CIR STE 900 CHEVY CHASE, MD 208  
04-2730954  
501 (c) 3  
9,100.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILD EARTH SOCIETY INCORPORATED  
329 W FIERFONT AVE STE 300 SALT LAKE CITY,  
16-1402497  
501 (c) 3  
23,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILD EARTH WILDERNESS SCHOOL  
2307 LUCAS TPKE HIGH FALLS, NY 12440  
20-1675636  
501 (c) 3  
40,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILD HOPE INC  
15187 HIGHWAY 66 ASHLAND, OR 97520  
93-0989382  
501 (c) 3  
25,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDSALMON CENTER  
721 NW 9TH AVE STE 300 PORTLAND, OR 97209  
94-3166095  
501 (c) 3  
64,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDAID INC  
333 PINE ST STE 300 SAN FRANCISCO, CA 94104  
20-3644441  
501 (c) 3  
48,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDEARTH GUARDIANS  
516 ALTO ST SANTA FE, NM 87501  
85-0406306  
501 (c) 3  
16,750.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDER PAGEANT COMMITTEE INC  
PO BOX 313 WALNUT GROVE, MN 56180  
41-1402147  
501 (c) 3  
10,000.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDERNESS SOCIETY  
1801 PENNSYLVANIA AVE NW WASHINGTON, DC 200  
53-0167933  
501 (c) 3  
197,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |
| WILDERNESS YOUTH PROJECT INCORPORATED  
5386 HOLLISTER AVE STE D SANTA BARBARA, CA  
77-0526117  
501 (c) 3  
102,500.  
FMV  
N/A  
FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

#### 1. Name and address of organization or government  
<table>
<thead>
<tr>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) WILDLANDS CONSERVANCY INC</td>
<td>3701 ORCHID PL EMAUS, PA 18049</td>
<td>23-7401326</td>
<td>501 (C) 3</td>
<td>42,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(2) WILDLANDS RESTORATION VOLUNTEERS</td>
<td>2100 COLLYER ST LONGMONT, CO 80501</td>
<td>46-0505155</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3) WILDLANDS TRUST INC</td>
<td>675 LONG POND RD PLYMOUTH, MA 2360</td>
<td>04-2973205</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(4) WILDLIFE CONSERVATION NETWORK INC</td>
<td>209 MISSISSIPPI ST SAN FRANCISCO, CA 94107</td>
<td>30-0108469</td>
<td>501 (C) 3</td>
<td>285,830.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) WILDLIFE CONSERVATION SOCIETY</td>
<td>2300 SOUTHERN BLVD BRONX, NY 10460</td>
<td>13-1740011</td>
<td>501 (C) 3</td>
<td>114,096.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(6) WILDLIFE IN CRISIS INC</td>
<td>PO BOX 1246 WESTON, CT 6883</td>
<td>22-3020105</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) WILDLIFE REHABILITATION CENTER</td>
<td>2530 DALE ST N SAINT PAUL, MN 55113</td>
<td>41-1588791</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8) WILDLIFE S O S</td>
<td>406 E 300 S 302 SALT LAKE CITY, UT 84111</td>
<td>20-3274638</td>
<td>501 (C) 3</td>
<td>17,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) WILDLANDS RESTORATION VOLUNTEERS</td>
<td>6600 BLACKWELLS HOLLOW RD CROZET, VA 22932</td>
<td>47-5273299</td>
<td>501 (C) 3</td>
<td>33,800.</td>
<td>FMV</td>
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<tr>
<td>(10) WILDLIFE REHABILITATION CENTER</td>
<td>11811 W OLYMPIC BLVD LOS ANGELES, CA 90064</td>
<td>95-2921998</td>
<td>501 (C) 3</td>
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<tr>
<td>(11) WILDLIFE REHABILITATION CENTER</td>
<td>56-0689460</td>
<td>501 (C) 3</td>
<td>10,200.</td>
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</tr>
<tr>
<td>(12) WILDLIFE REHABILITATION CENTER</td>
<td>PO BOX 720248 DALLAS, TX 75372</td>
<td>75-2712117</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
**SCHEDULE I**  
(Form 990)  

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.  

**Part I** General Information on Grants and Assistance  
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.  

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.  

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>WILLAMETTE RIVERKEEPER</td>
<td>93-1212629</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>WILLAMETTE UNIVERSITY</td>
<td>93-0386972</td>
<td>501 (C) 3</td>
<td>52,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM &amp; MARY BUSINESS SCHOOL FOUNDATION</td>
<td>23-7079011</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM &amp; MARY FOUNDATION</td>
<td>54-0734117</td>
<td>501 (C) 3</td>
<td>180,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM AND MARY ATHLETIC EDUCATIONAL FOUND</td>
<td>54-6056480</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM BEAUMONT HOSPITAL</td>
<td>38-1459362</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM BREMEN JEWISH HERITAGE MUSEUM</td>
<td>02-0541872</td>
<td>501 (C) 3</td>
<td>18,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>WILLIAM F BUCKLEY JR PROGRAM AT YALE</td>
<td>27-5131268</td>
<td>501 (C) 3</td>
<td>74,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM J BRENNAN JR CENTER FOR JUSTICE INC</td>
<td>13-3839293</td>
<td>501 (C) 3</td>
<td>791,650.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WILLIAM J GOULD ASSOCIATES INC</td>
<td>04-2134819</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WILLIAM JEWELL COLLEGE</td>
<td>44-0545914</td>
<td>501 (C) 3</td>
<td>5,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLIAM MARSH RICE UNIVERSITY</td>
<td>74-1109620</td>
<td>501 (C) 3</td>
<td>4,049,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.  

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
Schedule I (Form 990) 2020
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   - [ ] Yes
   - [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1)</th>
<th>Name and address of organization or government</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>WILLIAM PEACE UNIVERSITY</td>
<td>56-0529988</td>
<td>501 (C) 3</td>
<td>12,200</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>WILLIAM PENN CHARTER SCHOOL OVERSEERS OF PHILADELPHIA</td>
<td>23-0953760</td>
<td>501 (C) 3</td>
<td>60,250</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>WILLIAM WENDT CENTER FOR LOSS AND HEALING</td>
<td>52-1095105</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>WILLIAMS COLLEGE</td>
<td>100 SPRING ST STE 201 WILLIAMSTOWN, MA 1267</td>
<td>04-2104847</td>
<td>501 (C) 3</td>
<td>773,988</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5)</td>
<td>WILLIAMS SYNDROME ASSOCIATION INC</td>
<td>570 KIRTS BLVD STE 223 TROY, MI 48084</td>
<td>22-3305007</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>WILLIAMSBURG CHRISTIAN CHURCH</td>
<td>200 JOHN TYLER LANE WILLIAMSBURG, VA 23185</td>
<td>54-1135966</td>
<td>501 (C) 3</td>
<td>16,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(7)</td>
<td>WILLIAMSBURG CHRISTIAN RETREAT ASSOCIATION</td>
<td>9275 BARNES RD TOANO, VA 23168</td>
<td>54-1285092</td>
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<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(8)</td>
<td>WILLIAMSBURG COMMUNITY CHAPEL</td>
<td>3899 JOHN TYLER HWY WILLIAMSBURG, VA 23185</td>
<td>54-1162683</td>
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<td>50,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9)</td>
<td>WILLIAMSBURG HOUSE OF MERCY INC</td>
<td>10 HARRISON AVE WILLIAMSBURG, VA 23185</td>
<td>47-5347792</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>(10)</td>
<td>WILLIAMSBURG METHODIST CHURCH</td>
<td>500 JAMESTOWN RD WILLIAMSBURG, VA 23185</td>
<td>54-0538218</td>
<td>501 (C) 3</td>
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<td>(11)</td>
<td>WILLIAMSBURG PRESBYTERIAN CHURCH</td>
<td>215 RICHMOND RD WILLIAMSBURG, VA 23185</td>
<td>85-2255776</td>
<td>501 (C) 3</td>
<td>8,625</td>
<td>FMV</td>
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<tr>
<td>(12)</td>
<td>WILLIAMSON COLLEGE OF THE TRADES</td>
<td>106 S NEW MIDDLETOWN RD MEDIA, PA 19063</td>
<td>23-1352691</td>
<td>501 (C) 3</td>
<td>207,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>WILLING HANDS ENTERPRISES</td>
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<td>501 (C) 3</td>
<td>207,500</td>
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<td>WILLING SERVANT MINISTRIES INC</td>
<td>26-0464481</td>
<td>501 (C) 3</td>
<td>7,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WILLISTON FEDERATED CHURCH INC</td>
<td>03-6010331</td>
<td>501 (C) 3</td>
<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLISTON NORTHAMPTON SCHOOL</td>
<td>04-1975990</td>
<td>501 (C) 3</td>
<td>27,841</td>
<td>FMV</td>
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<td>WILLISTOWN CONSERVATION TRUST INC</td>
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<td>501 (C) 3</td>
<td>17,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WILLOW CREEK ASSOCIATION</td>
<td>36-3799040</td>
<td>501 (C) 3</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLOW CREEK COMMUNITY CHURCH INC</td>
<td>51-0164942</td>
<td>501 (C) 3</td>
<td>395,189</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLOW GLEN BIBLE CHURCH</td>
<td>46-5461307</td>
<td>501 (C) 3</td>
<td>109,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLOW INTERNATIONAL</td>
<td>35-2534804</td>
<td>501 (C) 3</td>
<td>35,000</td>
<td>FMV</td>
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<tr>
<td>WILLOW VALLEY COMMUNITIES</td>
<td>23-2226098</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILLOWBROOK BAPTIST CHURCH, INC.</td>
<td>63-0637002</td>
<td>501 (C) 3</td>
<td>27,200</td>
<td>FMV</td>
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<tr>
<td>WILLOWDALE CHAPEL</td>
<td>23-2174798</td>
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<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant 
or assistance |
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<th></th>
<th></th>
<th></th>
<th></th>
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<tbody>
<tr>
<td>WILLOWS COMMUNITY SCHOOL</td>
<td>8509 Higuera St Culver City, CA 90232</td>
<td>95-4466863</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WILMA THEATER INC</td>
<td>265 S Broad St Philadelphia, PA 19107</td>
<td>23-7425668</td>
<td>501 (C) 3</td>
<td>9,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WILMETTE ARTS GUILD</td>
<td>PO Box 902 Wilmette, IL 60091</td>
<td>36-3815111</td>
<td>501 (C) 3</td>
<td>54,300</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WILMINGTON JAYCEES FOUNDATION INC</td>
<td>1371 Eubank Ave Wilmington, CA 90744</td>
<td>95-3816879</td>
<td>501 (C) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>WILSHIRE BOULEVARD TEMPLE</td>
<td>3663 Wilshire Blvd Los Angeles, CA 90010</td>
<td>95-1691339</td>
<td>501 (C) 3</td>
<td>241,020</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WILSON COLLEGE</td>
<td>1015 Philadelphia Ave Chambersburg, PA 1720</td>
<td>23-1352692</td>
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<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WILSON HOUSE OF EAST DORSET</td>
<td>378 Village Street East Dorset, VT 5253</td>
<td>03-0317469</td>
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<td>10,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WILSON SCHOOL CORPORATION</td>
<td>400 De Mun Ave Clayton, MO 63105</td>
<td>43-6099964</td>
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<td>7,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WILTON CONGREGATIONAL CHURCH</td>
<td>70 Ridgefield Rd Wilton, CT 6897</td>
<td>06-0636714</td>
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<td>N/A</td>
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<tr>
<td>WILTON LIBRARY ASSOCIATION INCORPORATED</td>
<td>137 Old Ridgefield Rd Wilton, CT 6897</td>
<td>06-0662194</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WINCHESTER HOSPITAL FOUNDATION INC</td>
<td>41 Highland Ave Winchester, MA 1890</td>
<td>04-3399570</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
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<tr>
<td>WINCHESTER SCHOLARSHIP FOUNDATION</td>
<td>PO Box 174 Winchester, MA 1890</td>
<td>04-6038611</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the instructions for Form 990.
## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
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<tbody>
<tr>
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### Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>(1)</td>
<td>WINCHESTER-THURSTON SCHOOL</td>
<td>25-1030691</td>
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<tr>
<td>(2)</td>
<td>WIND BENEATH MY WINGS FOUNDATION</td>
<td>02-0549182</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3)</td>
<td>WINDHAM &amp; WINDSOR HOUSING TRUST INC</td>
<td>22-2878487</td>
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<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(4)</td>
<td>WINDMOOR FOUNDATION INC</td>
<td>01-0788484</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(5)</td>
<td>WINDOW TO THE WORLD COMMUNICATIONS INC</td>
<td>36-2246703</td>
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<td>99,025.</td>
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<tr>
<td>(6)</td>
<td>WINDWARD FUND</td>
<td>47-3522162</td>
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<td>(7)</td>
<td>WINDWARD SCHOOL</td>
<td>95-2701337</td>
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<td>(8)</td>
<td>WINDWOOD FARM HOME FOR CHILDREN INC</td>
<td>57-0807424</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>(9)</td>
<td>WINGS OF HOPE AND FALLIATIVE CARE INC</td>
<td>38-2453558</td>
<td>501 (C) 3</td>
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<td>(10)</td>
<td>WINGS SPECIAL NEEDS ADULT COMMUNITY</td>
<td>20-1141382</td>
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<td>N/A</td>
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<tr>
<td>(11)</td>
<td>WINGS WORLD QUEST INC</td>
<td>54-2137595</td>
<td>501 (C) 3</td>
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<tr>
<td>(12)</td>
<td>WINGSPAN LIFE RESOURCES</td>
<td>41-1742456</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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3 Enter total number of other organizations listed in the line 1 table .......................................................... □

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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

---

Part I  General Information on Grants and Assistance

1  Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tbody>
<tr>
<td>WINNETKA CONGREGATIONAL CHURCH 725 PINE ST WINNETKA, IL 60093</td>
<td>36-2193615</td>
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<td>14,000.</td>
<td>FMV</td>
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<tr>
<td>WINNETKA PRESBYTERIAN CHURCH 1255 WILLOW ROAD WINNETKA, IL 60093</td>
<td>36-2379648</td>
<td>501 (C) 3</td>
<td>41,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINN'S BAPTIST CHURCH 12320 WINN'S CHURCH ROAD GLEN ALLEN, VA 230</td>
<td>54-0960840</td>
<td>501 (C) 3</td>
<td>29,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WINN'S POINT MARSH CONSERVANCY 3500 S LATTIMORE RD PORT CLINTON, OH 43452</td>
<td>34-1900372</td>
<td>501 (C) 3</td>
<td>13,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINSOR SCHOOL INC 103 PILGRIM RD BOSTON, MA 2215</td>
<td>04-2105842</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINSTON PREPARATORY SCHOOL 50 BROAD ST STE 402 NEW YORK, NY 10004</td>
<td>13-3085860</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINSTON SALEM SYMPHONY ASSOC 201 N BROAD ST STE 200 WINSTON SALEM, NC 27</td>
<td>56-0692826</td>
<td>501 (C) 3</td>
<td>15,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WINSTON-SALEM INDUSTRIES FOR THE BLIND INC 7730 N POINT BLVD WINSTON SALEM, NC 27106</td>
<td>56-6001467</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WINTERBORO BAPTISH CHURCH 9553 DESOTO CAVERNS PARKWAY ALPINE, AL 3501</td>
<td>45-4688327</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINTERS CENTER FOR AUTISM INC 92 MAHAN ST WEST BABYLON, NY 11704</td>
<td>84-3731815</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WINTHROP UNIVERSITY FOUNDATION 302 TILLMAN HILL ROCK HILL, SC 29733</td>
<td>23-3780001</td>
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<td>36,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WIREPOINTS CORP 820 LAKE AVE WILMETTE, IL 60091</td>
<td>83-2750180</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

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**SCHEDULE I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [☐]
   - No [☐]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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4. (d) Amount of cash grant
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6. (f) Method of valuation (book, FMV, appraisal, other)
7. (g) Description of noncash assistance
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</tr>
</thead>
<tbody>
<tr>
<td>(1) WISCONSIN CHAMBER ORCHESTRA INC</td>
<td>321 E MAIN ST MADISON, WI 53703</td>
<td>39-6078526</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2) WISCONSIN EVANGELICAL LUTHERAN SYNOD</td>
<td>N16W23377 STONE RIDGE DR WAUKESHA, TX 75024</td>
<td>39-0842084</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(3) WISCONSIN EVANGELICAL LUTHERAN SYNOD</td>
<td>4412 LEGACY DR PLANO, WI 53188</td>
<td>75-1919213</td>
<td>501 (C) 3</td>
<td>68,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4) WISCONSIN EVANGELICAL LUTHERAN SYNOD KINDEL</td>
<td>N19W24075 RIVERW DR 200 WAUKESHA, WI 53188</td>
<td>39-1656073</td>
<td>501 (C) 3</td>
<td>52,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) WISCONSIN HISTORY FOUNDATION INC</td>
<td>816 STATE ST MADISON, WI 53706</td>
<td>39-0920993</td>
<td>501 (C) 3</td>
<td>23,200</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6) WISCONSIN HUMAN SOCIETY</td>
<td>4500 W WISCONSIN AVE MILWAUKEE, WI 53208</td>
<td>39-0810533</td>
<td>501 (C) 3</td>
<td>30,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) WISCONSIN INSTITUTE FOR LAW &amp; LIBERTY INC</td>
<td>330 E KILBOURN AVE STE 725 MILWAUKEE, WI 53202</td>
<td>45-1606079</td>
<td>501 (C) 3</td>
<td>90,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(8) WISCONSIN LUTHERAN SEMINARY</td>
<td>11831 N SEMINARY DR MEQUON, WI 53092</td>
<td>39-0901950</td>
<td>501 (C) 3</td>
<td>52,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) WISCONSIN POLICY FORUM INC</td>
<td>633 W WISCONSIN AVE STE 406 MILWAUKEE, WI 53202</td>
<td>39-0806182</td>
<td>501 (C) 3</td>
<td>5,800</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) WISCONSIN PUBLIC RADIO ASSOCIATION INC</td>
<td>821 UNIVERSITY AVE MADISON, WI 53706</td>
<td>23-7363536</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>(11) WISCONSIN RIGHT TO LIFE EDUCATION FUND</td>
<td>5317 N 118TH CT MILWAUKEE, WI 53225</td>
<td>39-1548867</td>
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<td>22,000</td>
<td>FMV</td>
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<tr>
<td>(12) WISCONSIN YOUTH SYMPHONY ORCHESTRA INC</td>
<td>455 N PARK ST RM 1675 MADISON, WI 53706</td>
<td>39-6101087</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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SCHEDULE I
(Form 990)

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance

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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>7 (g) Description of noncash assistance</th>
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<tbody>
<tr>
<td>WISH FOR OUR HEROES INC 164 S PARK BLVD GREENWOOD, IN 46143 27-0483869 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
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<td>WISSAHICKON FOUNDATION 4700 WISSAHICKON AVE PHILADELPHIA, PA 1914 65-1296027 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WITF INC 4801 LINDLE RD HARRISBURG, PA 17111 23-1629016 501 (C) 3 29,777. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WITH LOVE FROM JESUS MINISTRIES PO BOX 37713 RALEIGH, NC 27627 56-2271441 501 (C) 3 13,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WITHERSPOON INSTITUTE INC 16 STOCKTON ST PRINCETON, NJ 8540 55-0835528 501 (C) 3 21,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WITNESS INC 276 RICHMOND HL WEST HELENA, AR 72390 83-2306627 501 (C) 3 26,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WITNESS TO INNOCENCE 1501 CHERRY ST PHILADELPHIA, PA 19102 20-2394229 501 (C) 3 26,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WITTCHE COLLEGE BOARD OF DIRECTORS 200 W WARD ST SPRINGFIELD, OH 45504 31-0537177 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WJCT INC 100 FESTIVAL PARK AVE JACKSONVILLE, FL 3220 59-0711482 501 (C) 3 11,200. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>WMHT EDUCATIONAL TELECOMMUNICATIONS INC 4 GLOBAL VM TROY, NY 12180 14-1400177 501 (C) 3 9,670. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WNET 825 8TH AVE FL 14 NEW YORK, NY 10019 26-2810489 501 (C) 3 119,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOFFORD COLLEGE 429 N CHURCH ST SPARTANBURG, SC 29303 57-0314422 501 (C) 3 12,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WOLCOTT SCHOOL</td>
<td>524 N WOLCOTT AVE CHICAGO, IL 60622</td>
<td>36-4496852</td>
<td>501 (C) 3</td>
<td>40,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2</td>
<td>WOLF HAVEN INTERNATIONAL</td>
<td>3111 OFFUT LAKE RD SE TENINO, WA 98589</td>
<td>91-1185727</td>
<td>501 (C) 3</td>
<td>16,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>WOLF RIDGE ENVIRONMENTAL LEARNING CENTER</td>
<td>6282 CRANBERRY RD FINLAND, MN 55603</td>
<td>41-1251705</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>WOLF TRAP FOUNDATION FOR THE PERFORMING ART</td>
<td>1645 TRAP RD VIENNA, VA 22182</td>
<td>23-7011544</td>
<td>501 (C) 3</td>
<td>8,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>5</td>
<td>WOLFEBORO AREA CHILDREN CENTER INC</td>
<td>180 S MAIN ST WOLFEBORO, NH 3894</td>
<td>02-0314542</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>6</td>
<td>WOMANS CLUB OF FORT WORTH HISTORICAL PRESER</td>
<td>1316 PENNSYLVANIA AVE FORT WORTH, TX 76104</td>
<td>75-6442771</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>7</td>
<td>WOMANS HOSPITAL FOUNDATION</td>
<td>PO BOX 95059 BATON ROUGE, LA 70895</td>
<td>72-0652905</td>
<td>501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td>WOMANSPACE INC</td>
<td>1530 BRUNSWICK AVE LAWRENCE TOWNSHIP, NJ 86</td>
<td>22-2172522</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9</td>
<td>WOMEN AGAINST ABUSE INC</td>
<td>110 S BROAD ST PHILADELPHIA, PA 19110</td>
<td>23-1984838</td>
<td>501 (C) 3</td>
<td>71,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>10</td>
<td>WOMEN DONORS NETWORK</td>
<td>601 MONTGOMERY ST SAN FRANCISCO, CA 94111</td>
<td>05-0542397</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>WOMEN FOR WOMEN INTERNATIONAL</td>
<td>2000 M ST NW STE 200 WASHINGTON, DC 20036</td>
<td>52-1838756</td>
<td>501 (C) 3</td>
<td>49,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>12</td>
<td>WOMEN IN CHARGE</td>
<td>733 UNION BLVD RM 208 SAINT LOUIS, MO 63108</td>
<td>43-1660945</td>
<td>501 (C) 3</td>
<td>20,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table..........................................................  

3. Enter total number of other organizations listed in the line 1 table..........................................................  

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

Schedule I (Form 990) 2020
**SCHEDULE I**

(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

**2020**

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>WOMEN IN DISTRESS OF BROWARD COUNTY INC</td>
<td>59-1592524</td>
<td>501 (c) 3</td>
<td>79,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMEN IN FILM &amp; VIDEO INC</td>
<td>52-1175294</td>
<td>501 (c) 3</td>
<td>55,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMEN IN NEED INC</td>
<td>13-3164477</td>
<td>501 (c) 3</td>
<td>46,350.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMEN IN NEED OF GODS SHELTER INC</td>
<td>58-1922624</td>
<td>501 (c) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMEN IN TRANSITION INC</td>
<td>23-1884534</td>
<td>501 (c) 3</td>
<td>6,750.</td>
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<td>WOMEN MAKE MOVIES INC</td>
<td>13-2740460</td>
<td>501 (c) 3</td>
<td>70,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMEN OF WONDER WOW INC</td>
<td>45-3705920</td>
<td>501 (c) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMEN RISING PRODUCTIONS</td>
<td>82-1544874</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMENS AND CHILDRENS ALLIANCE INC</td>
<td>82-0204464</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMENS BEAN PROJECT</td>
<td>84-1144973</td>
<td>501 (c) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS CARE CENTER INC</td>
<td>35-1609945</td>
<td>501 (c) 3</td>
<td>58,200.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMENS CENTER &amp; SHELTER OF GREATER PGH</td>
<td>25-1264376</td>
<td>501 (c) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   ![Yes/No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.

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<tr>
<th>1 (a) Name and address of organization or government</th>
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<tbody>
<tr>
<td>WOMENS CENTER OF MONTGOMERY COUNTY 2506 N BROAD ST STE 203 COLMAR, PA 18915 23-2000206</td>
<td>23</td>
<td>501 (C) 3</td>
<td>32,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS CLINIC 11500 W OLYMPIC BLVD STE 422 LOS ANGELES, CA 90045 85-2101583</td>
<td>85</td>
<td>501 (C) 3</td>
<td>30,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS COMMUNITY REVITALIZATION PROJECT 100 W OXFORD ST STE 22300 PHILADELPHIA, PA 215-2884486</td>
<td>215</td>
<td>501 (C) 3</td>
<td>36,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS COUNCIL OF THE DALLAS ARBORETUM &amp; BO 25 HIGHLAND PARK VLG STE 100 DALLAS, TX 75246-2128</td>
<td>25</td>
<td>501 (C) 3</td>
<td>17,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS EMPOWERMENT INTERNATIONAL PO BOX 501406 SAN DIEGO, CA 92150</td>
<td>41</td>
<td>501 (C) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS FOUNDATION OF BOSTON INC 126 BROOKLINE AVE STE 3 BOSTON, MA 2215</td>
<td>126</td>
<td>501 (C) 3</td>
<td>50,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS FOUNDATION OF COLORADO INC 1901 E ASBURY AVE DENVER, CO 80210</td>
<td>1901</td>
<td>501 (C) 3</td>
<td>93,000</td>
<td>FMV</td>
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<td>WOMENS FOUNDATION OF MINNESOTA 105 5TH AVE S STE 300 MINNEAPOLIS, MN 55401</td>
<td>105</td>
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<td>FMV</td>
<td>N/A</td>
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<td>WOMENS FUND OF CENTRAL OHIO INC 2323 W 5TH AVE COLUMBUS, OH 43204</td>
<td>2323</td>
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<td>17,000</td>
<td>FMV</td>
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<td>WOMENS FUND OF GREATER BIRMINGHAM 2201 5TH AVE S APT 110 BIRMINGHAM, AL 35233</td>
<td>2201</td>
<td>501 (C) 3</td>
<td>15,500</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS FUND OF SANTA BARBARA 133 E DE LA GUERRA ST # 15 SANTA BARBARA, CA 82-5169678</td>
<td>133</td>
<td>501 (C) 3</td>
<td>7,750</td>
<td>FMV</td>
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<tr>
<td>WOMENS GLOBAL EDUCATION PROJECT 136 N MARION ST OAK PARK, IL 60301</td>
<td>136</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>1(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
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<td>20-8826616</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS GUILD CEDARS SINA MEDICINAL CENTER</td>
<td>95-6097903</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WOMENS HOUSING AND ECONOMIC DEVELOPMENT COR</td>
<td>11-3096004</td>
<td>501 (c) 3</td>
<td>53,250</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMENS INFORMATION SERVICE WISE</td>
<td>02-0346512</td>
<td>501 (c) 3</td>
<td>126,000</td>
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<td>31-1759515</td>
<td>501 (c) 3</td>
<td>36,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOMENS INTERNATIONAL ZIONIST ORGANIZATION</td>
<td>13-3041381</td>
<td>501 (c) 3</td>
<td>16,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>WOMENS JUSTICE INITIATIVE INC</td>
<td>30-0681223</td>
<td>501 (c) 3</td>
<td>101,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>WOMENS LAW PROJECT</td>
<td>23-7354637</td>
<td>501 (c) 3</td>
<td>12,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS LEADERSHIP INSTITUTE OF UTAH</td>
<td>47-2963429</td>
<td>501 (c) 3</td>
<td>15,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOMENS LEAGUE COMMUNITY RESIDENCES INC</td>
<td>11-2897747</td>
<td>501 (c) 3</td>
<td>35,000</td>
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<td>WOMENS LUNCH PLACE INC</td>
<td>22-2514148</td>
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<td>FMV</td>
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<td>WOMENS MEDICAL FUND</td>
<td>84-3028266</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □  No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>WOMENS OPPORTUNITY HOUSE 3715 DELTA RIVER DR LANSING, MI 48906 38-3183579 501 (C) 3 20,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS REFUGEE COMMISSION INC 15 WEST 37TH STREET NO 9TH FL NEW YORK, NY 46-3668128 501 (C) 3 12,750. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS REPRODUCTIVE RIGHTS ASSISTANCE PROJE 2633 LINCOLN BLVD 338 SANTA MONICA, CA 9040 95-4522977 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOMENS RESOURCE CENTER 620 MADISON AVE SCRANTON, PA 18510 23-2003915 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS RESOURCE CENTER OF RACINE INC 1547 COLLEGE AVE RACINE, WI 53403 39-1356335 501 (C) 3 6,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS RESOURCE MEDICAL CENTERS OF SOUTHERN 1701 W CHARLESTON BLVD STE 130 LAS VEGAS, NV 94-2944732 501 (C) 3 30,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS RIGHTS INFORMATION CENTER 108 W PALISADE AVE ENGLEWOOD, NJ 7631 23-7453339 501 (C) 3 19,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS SPORTS FOUNDATION 5TH FLOOR NEW YORK, NY 10001 23-7380557 501 (C) 3 11,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>WOMENS WAY 123 S BROAD ST PHILADELPHIA, PA 19109 23-1989161 501 (C) 3 8,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WONDERBOUND 3824 DAHLIA ST DENVER, CO 80207 84-1223229 501 (C) 3 5,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WONDERS &amp; WORRIES INC 9101 BURNET RD STE 205 AUSTIN, TX 78758 74-3012982 501 (C) 3 9,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOOD RIVER COMMUNITY YOUNG MENS CHRISTIAN A 1177 W STATE ST BOISE, ID 83702 82-0481436 501 (C) 3 127,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td></td>
<td></td>
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</tbody>
</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</thead>
<tbody>
<tr>
<td>WOOD RIVER LAND TRUST COMPANY</td>
<td>82-0474191</td>
<td>501 (C) 3</td>
<td>38,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOODBERRY FOREST SCHOOL</td>
<td>56-0519590</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOODBURY JEWISH CENTER</td>
<td>11-2974460</td>
<td>501 (C) 3</td>
<td>11,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOODBURY LIFE RESOURCE CENTER</td>
<td>26-3431073</td>
<td>501 (C) 3</td>
<td>6,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WOODCRAFT RANGERS</td>
<td>95-1729319</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WOODDALE CHURCH</td>
<td>41-0844378</td>
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<tr>
<td>WOODINVILLE ALLIANCE CHURCH</td>
<td>91-1078277</td>
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<td>WOODLAND HILLS FAMILY CHURCH</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>WOODLAND MONTESORI SCHOOL INC</td>
<td>39-1195818</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<td>WOODLAND PARK ZOOLOGICAL SOCIETY</td>
<td>91-6070005</td>
<td>501 (C) 3</td>
<td>66,000</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOODLAND SCHOOL</td>
<td>94-2753220</td>
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<td>WOODLANDS ACADEMY</td>
<td>36-2469186</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: .................................................................

3. Enter total number of other organizations listed in the line 1 table: .................................................................
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>WOODLANDS ANGLICAN MISSION INC</td>
<td>76-0664852</td>
<td>501 (C) 3</td>
<td>14,900.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>WOODLANDS RELIGIOUS COMMUNITY INC</td>
<td>76-1804123</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
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<td>WOODLAWN FOUNDATION</td>
<td>13-3055729</td>
<td>501 (C) 3</td>
<td>29,800.</td>
<td>FMV</td>
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<td>WOODLYNDE SCHOOL CORP</td>
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<td>WOODMERE ART MUSEUM INC</td>
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<td>501 (C) 3</td>
<td>37,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WOODMONT BAPTIST CHURCH</td>
<td>63-0477465</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOODRIDGE BAPTIST CHURCH</td>
<td>76-0319401</td>
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<td>18,600.</td>
<td>FMV</td>
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<td>WOODS HOLE OCEANOGRAPHIC INSTITUTION</td>
<td>04-2105850</td>
<td>501 (C) 3</td>
<td>53,500.</td>
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<td>N/A</td>
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<td>WOODS MEMORIAL PRESBYTERIAN CHURCH</td>
<td>52-0729914</td>
<td>501 (C) 3</td>
<td>30,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>WOODS PROJECT INC</td>
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<td>FMV</td>
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<tr>
<td>WOODS SERVICES INC</td>
<td>23-1322002</td>
<td>501 (C) 3</td>
<td>75,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td><strong>WOODSIDE HIGH SCHOOL FOUNDATION</strong></td>
<td>32-0232205</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td><strong>WOODSIDE PRESBYTERIAN CHURCH</strong></td>
<td>23-1968564</td>
<td>501 (C) 3</td>
<td>21,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>3</td>
<td><strong>WOODSIDE SCHOOL FOUNDATION</strong></td>
<td>94-2928552</td>
<td>501 (C) 3</td>
<td>31,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>4</td>
<td><strong>WOODSIDE SYNAGOGUE AHAVAT TORAH</strong></td>
<td>52-6045098</td>
<td>501 (C) 3</td>
<td>5,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td><strong>WOODSON CENTER</strong></td>
<td>52-1217891</td>
<td>501 (C) 3</td>
<td>125,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>6</td>
<td><strong>WOODSTOCK AREA COUNCIL ON AGING</strong></td>
<td>03-0295419</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
<td><strong>WOODSTOCK COMMUNITY PLAYSCHOOL INC</strong></td>
<td>03-0341034</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td><strong>WOODSTOCK COMMUNITY TRUST INC</strong></td>
<td>03-0357761</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>9</td>
<td><strong>WOODSTOCK FARM ANIMAL SANCTUARY INC</strong></td>
<td>20-1552990</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td><strong>WOODWARD ACADEMY INC</strong></td>
<td>58-0625584</td>
<td>501 (C) 3</td>
<td>8,700.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td><strong>WOODWELL CLIMATE RESEARCH CENTER</strong></td>
<td>04-3005094</td>
<td>501 (C) 3</td>
<td>538,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td><strong>WOOLY MAMMOTH THEATRE CO</strong></td>
<td>52-1242900</td>
<td>501 (C) 3</td>
<td>24,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
</tbody>
</table>

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>EIN</th>
<th>IRC Section (if applicable)</th>
<th>Amount of Cash Grant</th>
<th>Amount of Non-Cash Assistance</th>
<th>Method of Valuation</th>
<th>Purpose of Grant or Assistance</th>
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<tbody>
<tr>
<td>WORCESTER COUNTY FOOD BANK INC</td>
<td>04-3071457</td>
<td>501 (C) 3</td>
<td>8,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WORCESTER JEWISH COMMUNITY CENTER</td>
<td>04-2104353</td>
<td>501 (C) 3</td>
<td>8,025</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WORCESTER POLYTECHNIC INSTITUTE</td>
<td>04-2121659</td>
<td>501 (C) 3</td>
<td>159,482</td>
<td>FMV</td>
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<td>WORD AMONG US INC</td>
<td>52-1320592</td>
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<td>10,900</td>
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<td>WORD OF GOD FELLOWSHIP INC</td>
<td>58-1456572</td>
<td>501 (C) 3</td>
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<tr>
<td>WORD OF GRACE COMMUNITY CHURCH</td>
<td>39-1577851</td>
<td>501 (C) 3</td>
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</tr>
<tr>
<td>WORD OF GRACE MISSION INC</td>
<td>37-1206377</td>
<td>501 (C) 3</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WORD OF LIFE FELLOWSHIP INC</td>
<td>13-5648615</td>
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<td>WORK ON FIRE CATHOLIC MINISTRIES</td>
<td>26-1448551</td>
<td>501 (C) 3</td>
<td>55,600</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WORDS BEATS AND LIFE INC</td>
<td>27-0062812</td>
<td>501 (C) 3</td>
<td>13,600</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>WORK TO RIDE INC</td>
<td>23-2717148</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>WORKERS DEFENSE PROJECT INC</td>
<td>35-2296166</td>
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<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WORKFIRST FOUNDATION</td>
<td>228 E 45TH ST FL 16 NEW YORK, NY 10017</td>
<td>32-0161008</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>2</td>
<td>WORKING AMERICA EDUCATION FUND</td>
<td>815 16TH ST NW WASHINGTON, DC 20006</td>
<td>20-2035052</td>
<td>501 (C) 3</td>
<td>546,001.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3</td>
<td>WORKING WORLD INC</td>
<td>115 NASSAU ST # 513 NEW YORK, NY 10038</td>
<td>20-2264584</td>
<td>501 (C) 3</td>
<td>100,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>4</td>
<td>WORKS AND PROCESS INC</td>
<td>155 E 44TH ST RM 1005 NEW YORK, NY 10017</td>
<td>13-3592291</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5</td>
<td>WORLD AFFAIRS COUNCIL</td>
<td>2200 ALASKAN WAY STE 450 SEATTLE, WA 98121</td>
<td>91-0586924</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>6</td>
<td>WORLD AFFAIRS COUNCIL OF NORTHERN CALIFORNIA</td>
<td>312 SUTTER ST STE 312 SAN FRANCISCO, CA 94110</td>
<td>94-1156356</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>7</td>
<td>WORLD BANK COMMUNITY CONNECTIONS FUND</td>
<td>1818 H STREET NW MND MC-9-912 WASHINGTON, D C</td>
<td>42-15599999</td>
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<td>9,500.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>8</td>
<td>WORLD BICYCLE RELIEF NFP</td>
<td>1800 W FULTON MARKET PL 4 CHICAGO, IL 60607</td>
<td>20-5080679</td>
<td>501 (C) 3</td>
<td>84,922.</td>
<td>FMV</td>
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<td>9</td>
<td>WORLD CARE</td>
<td>1925 W GARDNER LN TUCSON, AZ 85705</td>
<td>86-0830973</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
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<td>10</td>
<td>WORLD CENTRAL KITCHEN INCORPORATED</td>
<td>655 NEW YORK AVE NW FL 6 WASHINGTON, DC 200</td>
<td>27-3521132</td>
<td>501 (C) 3</td>
<td>1,170,391.</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>11</td>
<td>WORLD CHALLENGE INC</td>
<td>1125 KELLY JOHNSON BLVD STE 321 COLORADO SPRING, CO</td>
<td>23-7249005</td>
<td>501 (C) 3</td>
<td>18,500.</td>
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<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>12</td>
<td>WORLD CHILDHOOD FOUNDATION INC</td>
<td>529 5TH AVE NEW YORK, NY 10017</td>
<td>16-1559586</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>2880 ARROWHEAD ST EUGENE, OR 97404</td>
<td>42-1649091</td>
<td>501 (c) 3</td>
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<td>FMV</td>
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<td>632 BROADWAY STE 901 NEW YORK, NY 10012</td>
<td>56-2525151</td>
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<td>WORLD CONNECT INC</td>
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<td>5730 N 1ST ST STE 105 # 307 FRESNO, CA 9371</td>
<td>94-2902936</td>
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<td>FMV</td>
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<td>WORLD FOR JESUS MINISTRIES INC</td>
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<td>1 WORLD GOLF PL SAINT AUGUSTINE, FL 32092</td>
<td>59-2998925</td>
<td>501 (c) 3</td>
<td>100,000.</td>
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<td>FMV</td>
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<td>WORLD GOLF FOUNDATION INC</td>
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<td>7432 LITTLE RIVER TPKE ANNANDALE, VA 22003</td>
<td>51-0642296</td>
<td>501 (c) 3</td>
<td>35,000.</td>
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<td>FMV</td>
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<td>WORLD GOSPEL MISSION</td>
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<td>1330 BRADDOCK PL STE 301 ALEXANDRIA, VA 223</td>
<td>35-1985485</td>
<td>501 (c) 3</td>
<td>11,000.</td>
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<td>FMV</td>
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<td>WORLD HOPE INTERNATIONAL INC</td>
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<td>17111 MEMORIAL CHASE RD HOUSTON, TX 77070</td>
<td>74-1950943</td>
<td>501 (c) 3</td>
<td>42,000.</td>
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<td>FMV</td>
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<td>WORLD IMPACT INC</td>
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<tr>
<td>2001 S VERNON AVE LOS ANGELES, CA 90007</td>
<td>95-2681237</td>
<td>501 (c) 3</td>
<td>6,000.</td>
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<td>FMV</td>
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<td>WORLD JEWISH CONGRESS AMERICAN SECTION INC</td>
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<td>501 MADISON AVE NEW YORK, NY 10022</td>
<td>13-1790756</td>
<td>501 (c) 3</td>
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<tr>
<td>PO BOX 610607 DALLAS, TX 75261</td>
<td>93-1135565</td>
<td>501 (c) 3</td>
<td>9,800.</td>
<td></td>
<td>FMV</td>
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<td>WORLD MISSION</td>
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<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) WORLD MISSIONARY PRESS INC</td>
<td>35-1076405</td>
<td>501 (C) 3</td>
<td>10,000</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(2) WORLD MONUMENTS FUND INC</td>
<td>13-2571900</td>
<td>501 (C) 3</td>
<td>12,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>(3) WORLD MUSIC INC</td>
<td>22-3036665</td>
<td>501 (C) 3</td>
<td>6,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>(4) WORLD MUSIC PRODUCTIONS INC</td>
<td>52-1490194</td>
<td>501 (C) 3</td>
<td>5,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(5) WORLD NEIGHBORS INC</td>
<td>73-0707328</td>
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<td>FMV</td>
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<tr>
<td>(6) WORLD ORPHANS</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7) WORLD OUTREACH MINISTRIES INC</td>
<td>62-1561595</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
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<tr>
<td>(8) WORLD ORGANIZATION FELLOWSHIP INC</td>
<td>54-1953305</td>
<td>501 (C) 3</td>
<td>18,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(9) WORLD ORGANIZATION FELLOWSHIP INC</td>
<td>59-0939206</td>
<td>501 (C) 3</td>
<td>12,100</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(10) WORLD RELIEF CORP OF NATIONAL ASSOCIATION O</td>
<td>63-0838799</td>
<td>501 (C) 3</td>
<td>11,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(11) WORLD RELIEF CORP OF NATIONAL ASSOCIATION O</td>
<td>23-6333344</td>
<td>501 (C) 3</td>
<td>128,275</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
</tbody>
</table>

Enter total number of sections 501(c)(3) and government organizations listed in the line 1 table. ..........................................................................................................

Enter total number of other organizations listed in the line 1 table. ..........................................................................................................

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Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Attach to Form 990.

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<table>
<thead>
<tr>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. | WORLD RENEW  
    1700 28TH ST SE GRAND RAPIDS MI 49508-1414 | 38-1708140 | 501 (C) 3 | 18,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 2. | WORLD RESOURCES INSTITUTE  
    10 G ST NE WASHINGTON, DC 20002 | 52-1257057 | 501 (C) 3 | 30,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 3. | WORLD TRADE CENTER PERFORMING ARTS CENTER I  
    1 LIBERTY FLE FL 29 NEW YORK, NY 10006 | 45-5316035 | 501 (C) 3 | 2,000,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 4. | WORLD VISION  
    34834 WEYERHAEUSER WAY S FEDERAL WAY, WA 98 | 95-1922279 | 501 (C) 3 | 2,240,988. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 5. | WORLD VISION INTERNATIONAL  
    800 W CHESTNUT AVE MONROVIA, CA 91016 | 95-3202116 | 501 (C) 3 | 61,560. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 6. | WORLD WIDE NEW TESTAMENT BAPTIST MISSIONS I  
    PO BOX 725 KINGS MOUNTAIN, NC 28086 | 56-1125931 | 501 (C) 3 | 16,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 7. | WORLD WILDLIFE FUND INC  
    1250 24TH ST NW WASHINGTON, DC 20037 | 52-16933B7 | 501 (C) 3 | 511,200. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 8. | WORLDRREADER ORG  
    2030 1ST AVE STE 300 SEATTLE, WA 98121 | 27-2092468 | 501 (C) 3 | 313,500. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 9. | WORLDTTEAM USA INC  
    1431 STUCKERT RD WARRINGTON, PA 18976 | 59-1759397 | 501 (C) 3 | 18,350. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 10. | WORLDWIDE BIBLE SOCIETY  
    1160 CADILLAC CT MILPITAS, CA 95035 | 91-2101762 | 501 (C) 3 | 10,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 11. | WORTH RISES INC  
    168 CANAL ST NEW YORK, NY 10013 | 83-3653756 | 501 (C) 3 | 39,000. | FMV | N/A | FOR RECIPIENT'S EXEM |
| 12. | WORTHINGTON CHRISTIAN CHURCH  
    8145 N HIGH ST COLUMBUS, OH 43235 | 51-0156381 | 501 (C) 3 | 9,300. | FMV | N/A | FOR RECIPIENT'S EXEM |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

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### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>WORTHINGTON CHRISTIAN SCHOOLS INC</strong>&lt;br&gt;6675 WORTHINGTON GALENA RD WORTHINGTON, OH 27-1698164</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td><strong>WOUNDED WARRIOR PROJECT INC</strong>&lt;br&gt;4899 BELFORT RD STE 300 JACKSONVILLE, FL 32</td>
<td>501 (C) 3</td>
<td>486,603.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td><strong>WOUNDED WARRIORS FAMILY SUPPORT INC</strong>&lt;br&gt;11218 JOHN GALT BLVD STE 103 OMAHA, NE 6813</td>
<td>501 (C) 3</td>
<td>69,750.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>WOVEN OAK INITIATIVES OF NORWOOD INC</strong>&lt;br&gt;1757 MILLS AVE NORWOOD, OH 45212</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td><strong>WQED MULTIMEDIA</strong>&lt;br&gt;4802 5TH AVE PITTSBURGH, PA 15213</td>
<td>501 (C) 3</td>
<td>31,875.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>WREATHS ACROSS AMERICA</strong>&lt;br&gt;PO BOX 249 COLUMBIA FALLS, MT 59912</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>WRIGHT STATE UNIVERSITY FOUNDATION INC</strong>&lt;br&gt;3640 COLONEL GLENN HWY DAYTON, OH 45435</td>
<td>501 (C) 3</td>
<td>41,800.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8</td>
<td><strong>WROTBOSTON INC</strong>&lt;br&gt;1300 WASHINGTON ST FL 2 ROCHESTER, NY 14607</td>
<td>501 (C) 3</td>
<td>20,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td><strong>WRITERS MATTIE</strong>&lt;br&gt;2021 GREEN ST APT 1 PHILADELPHIA, PA 19130</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td><strong>WRITERS ROOM INC</strong>&lt;br&gt;740 BROADWAY 12TH FL NEW YORK, NY 10003</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>WRITERS THEATRE INC</strong>&lt;br&gt;321 PARK AVE GLENCOE, IL 60022</td>
<td>501 (C) 3</td>
<td>21,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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<tr>
<td>12</td>
<td><strong>WROTOPIA LAB INC</strong>&lt;br&gt;155 W 81ST ST STE 2 NEW YORK, NY 10024</td>
<td>501 (C) 3</td>
<td>5,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
<td></td>
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### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  
   - No ☐

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tr>
<td>1</td>
<td>VANGUARD CHARITABLE ENDOWMENT PROGRAM</td>
<td>23-2888152</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>2</td>
<td>WSGK PUBLIC TELECOMMUNICATIONS COUNCIL</td>
<td>15-0620345</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>3</td>
<td>WYCLIFFE ASSOCIATES INC</td>
<td>95-2584324</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>4</td>
<td>WYCLIFFE BIBLE TRANSLATORS INC</td>
<td>95-1831097</td>
<td>501 (C) 3</td>
<td>385,354.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>5</td>
<td>WYCLIFFE SEED COMPANY</td>
<td>33-0838929</td>
<td>501 (C) 3</td>
<td>22,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>6</td>
<td>WYE RIVER UPPER SCHOOL INC</td>
<td>35-2166557</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>7</td>
<td>WYNWOOD WILDLIFE REHAB</td>
<td>68-0579913</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>8</td>
<td>WY Theatre INC</td>
<td>74-2254851</td>
<td>501 (C) 3</td>
<td>15,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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</tr>
<tr>
<td>9</td>
<td>WYOFILE</td>
<td>27-0410642</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>10</td>
<td>WYOMING CATHOLIC COLLEGE</td>
<td>83-0434307</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>11</td>
<td>WYRS BROADCASTING A NJ NONPROFIT CORPORATION</td>
<td>56-2322550</td>
<td>501 (C) 3</td>
<td>12,705.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
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<tr>
<td>12</td>
<td>XAXERIAN BROTHERS USA INC</td>
<td>52-6036905</td>
<td>501 (C) 3</td>
<td>61,250.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT’S EXEM</td>
<td></td>
</tr>
</tbody>
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3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>XAVIER COLLEGE PREPARATORY HIGH SCHOOL</td>
<td>34200 COOK ST PALM DESERT, CA 92211</td>
<td>71-0908497</td>
<td>501 (C) 3</td>
<td>7,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(2)</td>
<td>XAVIER MISSION INC</td>
<td>55 W 15TH ST NEW YORK, NY 10011</td>
<td>45-3763576</td>
<td>501 (C) 3</td>
<td>13,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(3)</td>
<td>XAVIER UNIVERSITY</td>
<td>3800 VICTORY PARKWAY CINCINNATI, OH 45207</td>
<td>31-0537516</td>
<td>501 (C) 3</td>
<td>26,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(4)</td>
<td>XAVIER UNIVERSITY OF LOUISIANA</td>
<td>1 DREXEL DR NEW ORLEANS, LA 70125</td>
<td>72-0635884</td>
<td>501 (C) 3</td>
<td>9,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(5)</td>
<td>XERCES SOCIETY INC</td>
<td>628 NE BROADWAY ST STE 200 PORTLAND, OR 972</td>
<td>51-0175253</td>
<td>501 (C) 3</td>
<td>72,550.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(6)</td>
<td>XLH NETWORK INC</td>
<td>911 CENTRAL AVENUE 161 ALBANY, NY 12206</td>
<td>20-2441942</td>
<td>501 (C) 3</td>
<td>22,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(7)</td>
<td>Y M C A OF MCCOOK</td>
<td>PO BOX 408 MC COOK, NE 69001</td>
<td>47-0377999</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(8)</td>
<td>YAD CHESED FUND INC</td>
<td>440 TOTTEN FOND RD WALTHAM, MA 2451</td>
<td>30-0588290</td>
<td>501 (C) 3</td>
<td>120,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>(9)</td>
<td>YAD LACHMU ANYU LEWITZOUCH CHQQ LIYISROEL</td>
<td>260 MARCY AVE BROOKLYN, NY 11211</td>
<td>11-3525524</td>
<td>501 (C) 3</td>
<td>10,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(10)</td>
<td>YAD YAAROV</td>
<td>949 STARING ENGLEWOOD, NJ 7631</td>
<td>94-2967967</td>
<td>501 (C) 3</td>
<td>37,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>(11)</td>
<td>YAD YISROEL INC</td>
<td>1070 38TH ST BROOKLYN, NY 11219</td>
<td>11-3150521</td>
<td>501 (C) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>(12)</td>
<td>YAKIMA GREENWAY FOUNDATION</td>
<td>111 S 18TH ST YAKIMA, WA 98901</td>
<td>91-1110737</td>
<td>501 (C) 3</td>
<td>25,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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   - **Yes**
   - **No**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<tbody>
<tr>
<td>1. (1) YAKIMA HUMANE SOCIETY</td>
<td>91-0580938</td>
<td>501 (c) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>2. (2) YAKIMA MUSIC EN ACCION YAMA</td>
<td>30-0893939</td>
<td>501 (c) 3</td>
<td>38,600.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>3. (3) YAKIMA VALLEY MUSEUM &amp; HIST ASSN</td>
<td>91-0828572</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>4. (4) YALE UNIVERSITY</td>
<td>06-0646973</td>
<td>501 (c) 3</td>
<td>4,825,431.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>5. (5) YAMPA VALLEY COMMUNITY FOUNDATION</td>
<td>84-0794536</td>
<td>501 (c) 3</td>
<td>14,290.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>6. (6) YAMPA VALLEY MEDICAL CENTER FOUNDATION</td>
<td>31-1806773</td>
<td>501 (c) 3</td>
<td>27,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
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<tr>
<td>7. (7) YANKTON CATHOLIC COMMUNITY FOUNDATION OFFIC</td>
<td>46-0457413</td>
<td>501 (c) 3</td>
<td>19,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>8. (8) YASEEN EDUCATIONAL SOCIETY</td>
<td>45-2384158</td>
<td>501 (c) 3</td>
<td>34,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>9. (9) YEAR UP INC</td>
<td>04-3534407</td>
<td>501 (c) 3</td>
<td>156,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</tr>
<tr>
<td>10. (10) YEHUDI INC</td>
<td>47-1768554</td>
<td>501 (c) 3</td>
<td>50,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>11. (11) YELLOW BARN INC</td>
<td>03-0228985</td>
<td>501 (c) 3</td>
<td>156,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>12. (12) YELLOW DOG COMMUNITY AND CONSERVATION FOUND</td>
<td>81-2726410</td>
<td>501 (c) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>YELLOWHAMMER FUND Po Box 1565 Tuscaloosa, AL 35403</td>
<td>82-1822204</td>
<td>501 (C) 3</td>
<td>11,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>YELLOWSTONE CLUB COMMUNITY FOUNDATION 1111 Research Dr Ste B Bozeman, MT 59718</td>
<td>27-1974255</td>
<td>501 (C) 3</td>
<td>68,333.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
<td></td>
</tr>
<tr>
<td>YELLOWSTONE FOREVER 222 E Main St Ste 301 Bozeman, MT 59715</td>
<td>47-5427975</td>
<td>501 (C) 3</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YELLOWSTONE TO YUKON CONSERVATION INITIATI</td>
<td>PO Box 157 Bozeman, MT 59771</td>
<td>81-0535303</td>
<td>38,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YES PREP PUBLIC SCHOOLS INC 5515 South Loop E Houston, TX 77033</td>
<td>76-0563835</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Yeshiva Gedola Of Detroit 24600 Greenfield Rd Oak Park, MI 48237</td>
<td>38-2569760</td>
<td>501 (C) 3</td>
<td>7,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Yeshiva Gedolar Bais Yisroel Inc 1731 Ridge Ave Lakewood, NJ 8701</td>
<td>11-2632931</td>
<td>501 (C) 3</td>
<td>50,500.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Yeshiva Gedoleh Moh Yisroel 8800 Seaview Ave Brooklyn, NY 11236</td>
<td>11-3437213</td>
<td>501 (C) 3</td>
<td>10,300.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Yeshiva High School For Girls Inc 1650 Palisade Ave Teaneck, NJ 7666</td>
<td>22-3383708</td>
<td>501 (C) 3</td>
<td>81,300.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>Yeshiva Keren Orah 1339 52nd St Brooklyn, NY 11219</td>
<td>23-7098648</td>
<td>501 (C) 3</td>
<td>502,200.</td>
<td>FMV</td>
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<td>Yeshiva Ketana Of Los Angeles 5050 Bluebell Ave Valley Vlg, CA 91607</td>
<td>45-4665043</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>Yeshiva Nachlei Torah Inc 1815 Swarthmore Ave Lakewood, NJ 8701</td>
<td>83-1418744</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

**Part I**
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>Yeshiva of Bergen County Inc 70 W Century Rd Paramus, NJ 7652 22-3722875 501 (C) 3 40,480. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva of Greater Washington Inc 2010 Linden Ln Silver Spring, MD 20910 52-1106842 501 (C) 3 85,800. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva of North Jersey 666 Kindermann Rd River Edge, NJ 7661 22-1526652 501 (C) 3 46,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Dravi Torah Riverdale Inc 450 W 250th St Bronx, NY 10471 13-4077155 501 (C) 3 18,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Ohr Yitzchak Inc 1214 E 15th St Brooklyn, NY 11230 11-3604665 501 (C) 3 9,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Shaarei Tzion 51 Park Ave Piscataway, NJ 8854 22-3249733 501 (C) 3 10,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<tr>
<td>Yeshiva Tifereth Moche Inc 8306 Abingdon Rd KEW Gardens, NY 11415 11-2149108 501 (C) 3 12,500. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Tomchei Temimim Lubavitch 570 Crown Street Brooklyn, NY 11213 46-2911428 501 (C) 3 58,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Tora's Chaim 137 Rock Hill Rd Spring Valley, NY 10977 61-1898702 501 (C) 3 36,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva Tora's Chaim of Greater Miami Inc 1025 NE Miami Gardens Dr Miami, FL 33179 59-2462426 501 (C) 3 100,000. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva University 500 W 185th St New York, NY 10033 13-1624225 501 (C) 3 615,900. FMV N/A FOR RECIPIENT'S EXEM</td>
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<td>Yeshiva University of Los Angeles Boys High 9760 W Pico Blvd Los Angeles, CA 90035 42-1746735 501 (C) 3 6,400. FMV N/A FOR RECIPIENT'S EXEM</td>
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Enter total number of other organizations listed in the line 1 table.

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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th></th>
<th>Name and address of organization or government</th>
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<th>Amount of non-cash assistance</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>Yeshiva Yaaras Devash INC</td>
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<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>Yeshiva Zichron Meilech INC</td>
<td>11-2620793</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
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<td>Yeshiva of Flatbush</td>
<td>11-1630915</td>
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<td>FMV</td>
<td>N/A</td>
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<td>4</td>
<td>Yeshivas Orr Reuven</td>
<td>13-3578806</td>
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<td>FMV</td>
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<td>80-0725929</td>
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<td>18,600.</td>
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<td>16-1644343</td>
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<td>11</td>
<td>Yeshiva Nitivot Montessori INC</td>
<td>20-5948484</td>
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<td>Yeshuos Yaakov INC</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

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   ...

3. Enter total number of other organizations listed in the line 1 table: 

   ...

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   Yes [x]  
   No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>YESODEI HADAS INC 133 PRESSBURG LN LAKewood, NJ 8701</td>
<td>82-2466108</td>
<td>501 (C) 3</td>
<td>12,500.</td>
<td>FMV</td>
<td>N/A</td>
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<td>YESTERMORROW INC 7865 MAIN ST WAITSFIELD, VT 5673</td>
<td>03-0278594</td>
<td>501 (C) 3</td>
<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>YEM DELL INC 6220 OLD LAGRANGE RD CRESTWOOD, KY 40014</td>
<td>61-1390688</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>YIELDING ACCOMPLISHED AFRICAN WOMEN 90 GRAVELLY RUN BRANCH RD CLAYTON, DE 19938</td>
<td>82-5279739</td>
<td>501 (C) 3</td>
<td>26,000.</td>
<td>FMV</td>
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<tr>
<td>YIVO INSTITUTE FOR JEWISH RESEARCH INC 15 W 16TH ST NEW YORK, NY 10011</td>
<td>13-1641082</td>
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<td>FMV</td>
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<tr>
<td>YMCA CAMP TECUNEH INC 12635 W TECUNEH BEND RD BROOKSTON, IN 4792</td>
<td>23-7331099</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YMCA OF DODGE COUNTY INC 220 CORPORATE DR BEAVER DAM, WI 53916</td>
<td>39-0975426</td>
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<td>FMV</td>
<td>N/A</td>
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<td>YMCA OF GREATER CHARLOTTE 400 E MOREHEAD ST CHARLOTTE, NC 28202</td>
<td>56-1045299</td>
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<td>5,100.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>YMCA OF GREATER CLEVELAND 1801 SUPERIOR AVE E STE 130 CLEVELAND, OH 4</td>
<td>34-0714728</td>
<td>501 (C) 3</td>
<td>201,125.</td>
<td>FMV</td>
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<td>YMCA OF GREATER ROCHESTER 444 E MAIN ST ROCHESTER, NY 14604</td>
<td>16-0743242</td>
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<td>36,000.</td>
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<td>YMCA OF MARTHAS VINEYARD INC 111R EDGARTOWN ROAD VINEYARD HAVEN, MA 2568</td>
<td>04-3293959</td>
<td>501 (C) 3</td>
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<td>YMCA OF MEMPHIS &amp; THE MID-SOUTH 7171 GOODLETT FARMS Ptwy CORDova, TN 38016</td>
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<td>11,000.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

 Attach to Form 990.

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

Name of the organization

VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number

23-2888152

Part I  General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

☐ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<td>FMV</td>
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<td>501 (C) 3</td>
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<td>FMV</td>
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<td>74-0004913</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>YOLO CRISIS NURSEY INC</td>
<td>47-1006055</td>
<td>501 (C) 3</td>
<td>6,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<td>7</td>
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<td>23-7111782</td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>10</td>
<td>YORK COUNTY COMMUNITY FOUNDATION</td>
<td>23-6299868</td>
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<td>1,017,000.</td>
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<td>11</td>
<td>YORK COUNTY FOOD BANK</td>
<td>23-2452484</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
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<td>12</td>
<td>YORK COUNTY FREE CLINIC INC</td>
<td>26-0754486</td>
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<td>6,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3 Enter total number of other organizations listed in the line 1 table .................................................................

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

Schedule I (Form 990) 2020
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▲ Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ........................................... [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>YORK COUNTY HISTORY CENTER</td>
<td>250 E MARKET ST YORK, PA 17403</td>
<td>23-1352323</td>
<td>501 (C) 3</td>
<td>100,500.</td>
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<td>YORK FRESH FOOD FARMS</td>
<td>150 WILLIS RD YORK, PA 17404</td>
<td>47-5548242</td>
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<td>10,000.</td>
<td>FMV</td>
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<td>YORK HOSPITAL</td>
<td>PO BOX 2767 YORK, PA 17405</td>
<td>23-1352222</td>
<td>501 (C) 3</td>
<td>8,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YORK SYMPHONY ORCHESTRA</td>
<td>50 S GEORGE ST YORK, PA 17401</td>
<td>23-6298810</td>
<td>501 (C) 3</td>
<td>10,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YORKMINSTER PRESBYTERIAN CHURCH</td>
<td>6218 GEORGE WASHINGTON HWY YORKTOWN, VA 236</td>
<td>54-0722727</td>
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<td>18,629.</td>
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<tr>
<td>YOSEMITE FOUNDATION</td>
<td>101 MONTGOMERY ST STE 1700 SAN FRANCISCO, CA 94102</td>
<td>94-3058041</td>
<td>501 (C) 3</td>
<td>170,125.</td>
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<td>YOU CAN VOTE</td>
<td>902 BROAD ST DURHAM, NC 27705</td>
<td>83-2882290</td>
<td>501 (C) 3</td>
<td>14,000.</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>YOU EAT I EAT COMMUNITY UNITY FOOD PANTRY</td>
<td>8888 DYER ST STE 513 EL PASO, TX 79904</td>
<td>47-5003687</td>
<td>501 (C) 3</td>
<td>6,000.</td>
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<td>YOUNG &amp; HEALTHY</td>
<td>136 W PEORIA ST PASADENA, CA 91103</td>
<td>95-4527969</td>
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<td>YOUNG ACTORS THEATRE</td>
<td>9628 CAMPO RD STE J SPRING VALLEY, CA 91977</td>
<td>73-1669410</td>
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<td>10,000.</td>
<td>FMV</td>
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<tr>
<td>YOUNG AIRMANS ASSOCIATION</td>
<td>1718 WHITE SANDS WAY AVERNE, NY 11692</td>
<td>83-2005292</td>
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<tr>
<td>YOUNG AMERICANS FOR LIBERTY FOUNDATION</td>
<td>500 N CAPITAL OF TEXAS HWY BLDG 5 AUSTIN, TX 78703</td>
<td>45-3503672</td>
<td>501 (C) 3</td>
<td>309,500.</td>
<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................................................................................................................................................

3. Enter total number of other organizations listed in the line 1 table ...........................................................................................................................................................................

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

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization**

VANGUARD CHARITABLE ENDOWMENT PROGRAM

**Employer identification number**

23-2888152

---

#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(1) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>YOUNG AMERICAS FOUNDATION</td>
<td>11480 COMMERCE PARK DR STE 600 RESTON, VA 22091-3901</td>
<td>23-7042029</td>
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<td>194,000</td>
<td>FMV</td>
<td>N/A</td>
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<tr>
<td>YOUNG AUDIENCES OF NEW JERSEY</td>
<td>200 FORRESTAL RD PRINCETON, NJ 08540</td>
<td>23-7384991</td>
<td>501 (c) 3</td>
<td>62,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YOUNG AUTHORS GREENHOUSE</td>
<td>2509 PORTLAND AVE LOUISVILLE, KY 40212</td>
<td>82-2878352</td>
<td>501 (c) 3</td>
<td>10,000</td>
<td>FMV</td>
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<tr>
<td>YOUNG CATHOLIC PROFESSIONALS</td>
<td>6060 N CENTRAL EXPY STE 500 DALLAS, TX 75201</td>
<td>46-5331173</td>
<td>501 (c) 3</td>
<td>22,500</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>YOUNG CONCERT ARTISTS INC</td>
<td>1776 BROADWAY STE 1500 NEW YORK, NY 10019</td>
<td>13-1951681</td>
<td>501 (c) 3</td>
<td>25,000</td>
<td>FMV</td>
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<tr>
<td>YOUNG LIFE</td>
<td>420 N CASCADE AVE COLORADO SPRINGS, CO 80904</td>
<td>84-0385934</td>
<td>501 (c) 3</td>
<td>923,340</td>
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<tr>
<td>YOUNG MEN &amp; WOMENS HEBREW ASSN &amp; IRENE KAUF</td>
<td>5738 FORBES AVE PITTSBURGH, PA 15217</td>
<td>25-1094514</td>
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<td>YOUNG MENS CHRISTIAN ASSN OF SPRINGFIELD</td>
<td>701 S 4TH ST SPRINGFIELD, IL 62703</td>
<td>37-0661263</td>
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<td>YOUNG MENS CHRISTIAN ASSOCIATION AUBURN-LEW</td>
<td>62 TURNER ST AUBURN, ME 04210</td>
<td>01-0211567</td>
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<td>N/A</td>
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<td>YOUNG MENS CHRISTIAN ASSOCIATION CAMP BELKN</td>
<td>11 CHASE POINT RD MIRROR LAKE, NH 3853</td>
<td>04-3356887</td>
<td>501 (c) 3</td>
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<td>YOUNG MENS CHRISTIAN ASSOCIATION OF ATTLEBORO</td>
<td>63 N MAIN ST ATTLEBORO, MA 2703</td>
<td>04-2255019</td>
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<td>12,200</td>
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<td>YOUNG MENS CHRISTIAN ASSOCIATION OF BUCKS C</td>
<td>2500 LOWER STATE RD DOYLESTOWN, PA 18901</td>
<td>23-1903158</td>
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<td>FMV</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) YOUNG MENS CHRISTIAN ASSOCIATION OF CHAMPAIGN</td>
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<td>2501 FIELDS SOUTH DR CHAMPAIGN, IL 61822</td>
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<td>(2) YOUNG MENS CHRISTIAN ASSOCIATION OF DANE CO</td>
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<td>FMV</td>
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<td>711 COTTAGE GROVE RD MADISON, WI 53716</td>
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<td>(3) YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER BOSTON</td>
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<td>FMV</td>
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<td>315 HUNTINGTON AVE BOSTON, MA 2115</td>
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<td>(4) YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER BOSTON</td>
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<td>FMV</td>
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<td>501 GRAND AVE DES MOINES, IA 50309</td>
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<td>(5) YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER BOSTON</td>
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<td>(6) YOUNG MENS CHRISTIAN ASSOCIATION OF METROPOLE</td>
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<tr>
<td>301 N MAIN ST STE 1900 WINSTON SALEM, NC 27</td>
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<td>(7) YOUNG MENS CHRISTIAN ASSOCIATION OF METROPOLE</td>
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<tr>
<td>1112 16TH ST NW WASHINGTON, DC 20036</td>
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<td>(8) YOUNG MENS CHRISTIAN ASSOCIATION OF MONTCLAIR</td>
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<td>(9) YOUNG MENS CHRISTIAN ASSOCIATION OF NASHVILLE</td>
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<td>301 N MAIN ST STE 1900 WINSTON SALEM, NC 27</td>
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<td>(11) YOUNG MENS CHRISTIAN ASSOCIATION OF RYE N Y</td>
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<td>21 LOCUST AVE RYE, NY 10580</td>
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<td>(12) YOUNG MENS CHRISTIAN ASSOCIATION OF SAN FRANCISCO</td>
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<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
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<tr>
<td>50 CALIFORNIA ST STE 650 SAN FRANCISCO, CA</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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</tr>
</thead>
<tbody>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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<td>2</td>
<td>YOUNG MENS CHRISTIAN ASSOCIATION OF SNOWMEN</td>
<td>91-0565561</td>
<td>501 (C) 3</td>
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<td>FMV</td>
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<td>3</td>
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<td>15,000</td>
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<td>4</td>
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<td>5</td>
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<td>FMV</td>
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<tr>
<td>6</td>
<td>YOUNG MENS CHRISTIAN ASSOCIATION OF THE NOR</td>
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<td>11</td>
<td>YOUNG MENS CHRISTIAN ASSOCIATION SHERIDAN C</td>
<td>93-0186708</td>
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<td>YOUNG MENS CHRISTIAN ASSOCIATION YMCA CAMP</td>
<td>06-3357821</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization
VANGUARD CHARITABLE ENDOWMENT PROGRAM

Employer identification number
23-2888152

Part I  General Information on Grants and Assistance
1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes □ No □

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>YOUNG PEOPLES CHORUS OF NEW YORK CITY INC</td>
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<td>YOUNG VOICES</td>
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<td>YOUNGSTOWN STATE UNIVERSITY FOUNDATION</td>
<td>34-6576610</td>
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<td>655 WICK AVE YOUNGSTOWN, OH 44502</td>
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<td>YOUR COMMUNITY FOUNDATION OF NORTH CENTRAL</td>
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<td>PO BOX 409 MORGANTOWN, WV 26507</td>
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<tr>
<td>2216 NORTH CHARLES STREET BALTIMORE, MD 21</td>
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<td>YOUTH ADVOCACY FOUNDATION INC</td>
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<td>FMV</td>
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<td>75 FEDERAL ST FL 6 BOSTON, MA 2110</td>
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3. Enter total number of other organizations listed in the line 1 table. .......................................................... ▶

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(a)</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>4</td>
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<td>83-2607046</td>
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<td>84-1188718</td>
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<td>14-1433750</td>
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<td>FMV</td>
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<td>FMV</td>
<td>N/A</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part I: General Information on Grants and Assistance

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   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>94-6132571</td>
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<td>51,000.</td>
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<td><strong>YOUTH IMPROVED INCORPORATED</strong></td>
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<td>FMV</td>
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<td>FOR RECIPIENT'S EXEM</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
## Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ☑️  No ☐

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>501 (C) 3</td>
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<td>YOUTH UNITED FOR COMMUNITY ACTION</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

Employer identification number

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
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<th>EIN</th>
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<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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</table>

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Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered “Yes” on Form 990, Part IV, line 21 or 22.**

*Attach to Form 990.*

*Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.*

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.  

**Schedule I (Form 990) 2020**

V 20-7.21
## Part I  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Answer: Yes

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

## Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

### Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>47-3642630</td>
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<td>42-1101851</td>
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<td>PO BOX 156 MCGREGOR, WA 98637</td>
<td>74-1946758</td>
<td>501 (C) 3</td>
<td>8,300. FMV</td>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>13-5628475</td>
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<td>66,800.</td>
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<td>N/A</td>
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<td>12,000.</td>
<td>FMV</td>
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<td>501 (C) 3</td>
<td>29,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOE EMPowers</td>
<td>PO BOX 28839 RALEIGH, NC 27611</td>
<td>45-4671349</td>
<td>501 (C) 3</td>
<td>101,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOLOGICAL SOCIETY OF CINCINNATI</td>
<td>3400 VINE ST CINCINNATI, OH 45220</td>
<td>31-0537171</td>
<td>501 (C) 3</td>
<td>18,875.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOLOGICAL SOCIETY OF MILWAUKEE COUNTY</td>
<td>10005 W BLUEMOUND RD MILWAUKEE, WI 53226</td>
<td>39-6077242</td>
<td>501 (C) 3</td>
<td>9,100.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOLOGICAL SOCIETY OF PHILADELPHIA</td>
<td>3400 W GIRARD AVE PHILADELPHIA, PA 19104</td>
<td>23-1352298</td>
<td>501 (C) 3</td>
<td>517,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOLOGICAL SOCIETY OF PITTSBURGH</td>
<td>1855 ONE W WILDLIFE PITTSBURG, PA 15206</td>
<td>25-1418766</td>
<td>501 (C) 3</td>
<td>23,000.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOLOGICAL SOCIETY OF SAN DIEGO</td>
<td>PO BOX 120551 SAN DIEGO, CA 92112</td>
<td>95-1648219</td>
<td>501 (C) 3</td>
<td>57,400.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZOOTOWN ARTS COMMUNITY CENTER</td>
<td>216 W MAIN ST MISSOULA, MT 59802</td>
<td>80-0253229</td>
<td>501 (C) 3</td>
<td>5,500.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
<tr>
<td>ZUMBRO LUTHERAN CHURCH</td>
<td>624 THIRD AVENUE SW ROCHESTER, MN 55902</td>
<td>41-0718374</td>
<td>501 (C) 3</td>
<td>17,200.</td>
<td>FMV</td>
<td>N/A</td>
<td>FOR RECIPIENT'S EXEM</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 19,500.

3. Enter total number of other organizations listed in the line 1 table: 2.
## Part III  Grants and Other Assistance to Domestic Individuals
Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
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</table>

## Part IV  Supplemental Information
Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

**SCHEDULE I, PART I, LINE 2**

PROCEDURES FOR MONITORING GRANT FUNDS IN THE US

VANGUARD CHARITABLE'S BOARD OF TRUSTEES HAS FINAL AUTHORITY OVER GRANT DISTRIBUTIONS. GRANT RECOMMENDATIONS ARE NONBINDING AND WILL NOT BE APPROVED UNTIL VANGUARD CHARITABLE HAS VERIFIED THE RECIPIENT ORGANIZATION'S TAX-EXEMPT STATUS AS DEFINED BY SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND ITS STATUS AS A PUBLIC CHARITY AS DEFINED BY SECTION 509(A)(1), (2), OR (3), OR A PRIVATE OPERATING FOUNDATION AS DEFINED BY SECTION 4942(J)(3) OR (5) AND EXCLUDING NON-FUNCTIONALLY
### Part III
Grants and Other Assistance to Domestic Individuals.

Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
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### Part IV
Supplemental Information.

Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

INTEGRATED TYPE III SUPPORTING ORGANIZATIONS. VANGUARD CHARITABLE

PERFORMS DUE DILIGENCE TO ENSURE THAT ALL GRANTEES ARE ELIGIBLE SECTION 501(C)(3) ORGANIZATIONS THAT ARE LIKELY TO USE GRANT FUNDS EXCLUSIVELY FOR CHARITABLE PURPOSES. GRANTS CANNOT BE USED TO FULFILL PLEDGES OR PROVIDE INDIVIDUAL OR PRIVATE BENEFIT. FOLLOWING THE SEPTEMBER 11, 2001 TERRORIST ATTACKS VANGUARD CHARITABLE DEVELOPED ANTI-TERRORISM FINANCING COMPLIANCE GUIDELINES. THESE GUIDELINES ENSURE APPROPRIATE STEPS ARE FOLLOWED TO REDUCE THE LIKELIHOOD THAT ITS DOMESTIC GRANTS COULD BE DIVERTED TO TERRORIST ORGANIZATIONS. VANGUARD CHARITABLE MAY CONTACT PROSPECTIVE GRANT RECIPIENTS TO OBTAIN INFORMATION ABOUT THEIR CHARITABLE
### Part III  Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
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</table>

### Part IV  Supplemental Information

Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

ACTIVITIES BEFORE APPROVING A GRANT RECOMMENDATION, AND MAY CONTACT THE CHARITY AFTERWARD TO ENSURE THAT THE GRANT WAS USED FOR ITS STATED PURPOSE. VANGUARD CHARITABLE MAY ALSO MAKE GRANTS PURSUANT TO A GRANT AGREEMENT AND REQUIRE REPORTS ON THE USE OF SUCH GRANT FUNDS.
VANGUARD CHARITABLE ENDOWMENT PROGRAM 23-2888152

Part I  Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
- Travel for companions
- Tax indemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (such as maid, chauffeur, chef)

1b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part II  Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>REBECCA MOFFETT CHIEF STRATEGIC PLANNING OFF</td>
<td>(i) 159,836. (ii) 28,620. (iii) 0.</td>
<td>(i) 30,306.</td>
<td>(ii) 25,999.</td>
<td>(iii) 244,761.</td>
<td>(iv) 0.</td>
</tr>
<tr>
<td>JODI ROSEN DIRECTOR OF STRATEGIC SERVICES</td>
<td>(i) 145,177. (ii) 6,270. (iii) 0.</td>
<td>(i) 23,429.</td>
<td>(ii) 1,360.</td>
<td>(iii) 176,236.</td>
<td>(iv) 0.</td>
</tr>
<tr>
<td>ANN L. GILL CHIEF PHILANTHROPIC OFFICER</td>
<td>(i) 260,137. (ii) 42,417. (iii) 0.</td>
<td>(i) 44,689.</td>
<td>(ii) 10,709.</td>
<td>(iii) 357,952.</td>
<td>(iv) 0.</td>
</tr>
<tr>
<td>MARK FROEHLICH CHIEF FINANCIAL OFFICER</td>
<td>(i) 190,702. (ii) 30,345. (iii) 0.</td>
<td>(i) 32,872.</td>
<td>(ii) 10,793.</td>
<td>(iii) 264,712.</td>
<td>(iv) 0.</td>
</tr>
<tr>
<td>CARLA RIES DIRECTOR OF OPERATIONS</td>
<td>(i) 129,208. (ii) 11,689. (iii) 0.</td>
<td>(i) 22,137.</td>
<td>(ii) 25,941.</td>
<td>(iii) 188,975.</td>
<td>(iv) 0.</td>
</tr>
<tr>
<td>MARY JANE EMERY DIRECTOR OF FINANCE/CONTROLLER</td>
<td>(i) 136,015. (ii) 5,967. (iii) 0.</td>
<td>(i) 21,625.</td>
<td>(ii) 10,793.</td>
<td>(iii) 174,400.</td>
<td>(iv) 0.</td>
</tr>
</tbody>
</table>

Schedule J (Form 990) 2020
Part III  Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 3

VANGUARD CHARITABLE DOES NOT COMPENSATE JANE GREENFIELD FOR HER SERVICES OR PARTICIPATE IN DECISIONS INVOLVING HER COMPENSATION.
### Part I. Excess Benefit Transactions

(section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
</tr>
</thead>
<tbody>
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<td>1</td>
<td>(1)</td>
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</tbody>
</table>

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958: $________

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization: $________

### Part II. Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization?</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due</th>
<th>(g) In default?</th>
<th>(h) Approved by board or committee?</th>
<th>(i) Written agreement?</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Yes</td>
<td>No</td>
<td>Yes</td>
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</table>

Total: $________

### Part III. Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
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<tbody>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
**Part IV  Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE VANGUARD GROUP, INC.</td>
<td>CREATOR OR FOUNDER</td>
<td>2,687,932</td>
<td>OCCUPANCY/ADMIN. SVCS.</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>VANGUARD BROKERAGE SERVICES</td>
<td>SUB. OF LINE 1 ENTITY</td>
<td>4,194.</td>
<td>BROKER COMMISSIONS</td>
<td>X</td>
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</tbody>
</table>

**Part V  Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions).
### Types of Property

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
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<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Art - Historical treasures</td>
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<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
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<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
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<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
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<tr>
<td>6</td>
<td>Cars and other vehicles.</td>
<td></td>
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<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
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<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td></td>
<td>21,248. 1,531,897,449. PUBLIC MARKET VALUE</td>
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<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td>7. 620,760,295. INDEPENDENT ASSESS.</td>
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</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td>22. 463,764,633. INDEPENDENT ASSESS.</td>
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<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
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<td>2. 601,375. INSURANCE POLICIES</td>
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<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
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<tr>
<td>14</td>
<td>Qualified conservation contribution - Other.</td>
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<tr>
<td>15</td>
<td>Real estate - Residential</td>
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<tr>
<td>16</td>
<td>Real estate - Commercial.</td>
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<tr>
<td>17</td>
<td>Real estate - Other</td>
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<td>18</td>
<td>Collectibles</td>
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<td>Food inventory</td>
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<td>Drugs and medical supplies</td>
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<td>Taxidermy</td>
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<tr>
<td>22</td>
<td>Historical artifacts.</td>
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<tr>
<td>23</td>
<td>Scientific specimens</td>
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<tr>
<td>24</td>
<td>Archeological artifacts</td>
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<tr>
<td>25</td>
<td>Other ▶(BITCOIN)</td>
<td></td>
<td>19. 3,020,200. SELLING PRICE</td>
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</tr>
<tr>
<td>26</td>
<td>Other ▶(____________________</td>
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<tr>
<td>27</td>
<td>Other ▶(____________________</td>
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<td>28</td>
<td>Other ▶(____________________</td>
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<tr>
<td>29</td>
<td>Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 823, Part V, Donee Acknowledgement</td>
<td>29</td>
<td>22.</td>
<td></td>
</tr>
</tbody>
</table>

#### Notes

**30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 

**b** If "Yes," describe the arrangement in Part II.

**31** Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

**32a** Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

**b** If "Yes," describe in Part II.

**33** If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B)

The counts reflected in Part I, column (b), represent the number of contributions. For purposes of Schedule M, one contribution is defined as one instance of a single security gift from a specific donor, regardless of the number of shares of that specific security.

SCHEDULE M, PART I, LINE 32B

Vanguard Charitable has entered into a services agreement with a third party payment processor that is in the business of facilitating Bitcoin transactions by receiving Bitcoin from buyers and providing either Bitcoin or cash to sellers. The agreement authorizes the third party to act as Vanguard Charitable's agent to receive Bitcoin on Vanguard Charitable's behalf, liquidate the Bitcoins received into cash, and disburse funds in US dollars to Vanguard Charitable. The agreement provides that contributions processed on behalf of Vanguard Charitable are treated the same as a contribution made directly to Vanguard Charitable in that they are irrevocable to Vanguard Charitable.
VANGUARD CHARITABLE FULFILLS ITS MISSION TO INCREASE PHILANTHROPY AND MAXIMIZE ITS IMPACT OVER TIME BY ADMINISTERING A DONOR-ADVISED FUND PROGRAM, A TAX EFFECTIVE WAY TO CONSOLIDATE, ACCRUE, AND GRANT ASSETS TO CHARITY. VANGUARD CHARITABLE'S PHILANTHROPIC ACCOUNTS OFFER DONORS A FLEXIBLE AND CONVENIENT WAY TO GIVE AND, ULTIMATELY, HELP THEM MAKE A GREATER CHARITABLE IMPACT.

VANGUARD CHARITABLE IS PROUD TO OFFER THE HIGHEST VALUE DONOR-ADVISED FUND, A CLAIM BACKED BY OUR LOW ALL-IN FEE AND STRONG ALIGNMENT WITH THE TIME-TESTED PRINCIPLES OF VANGUARD, A LEADER IN AT-COST INVESTMENTS, AND BELIEVES IN THE IMPORTANCE OF LONG-TERM, STRATEGIC CHARITABLE PLANNING THAT MINIMIZES COSTS AND MAXIMIZES THE IMPACT OF PHILANTHROPIC GIVING.

VANGUARD CHARITABLE IS A LEADING U.S. NONPROFIT ORGANIZATION THAT FULFILLS ITS MISSION TO INCREASE PHILANTHROPY AND MAXIMIZE ITS IMPACT OVER TIME BY ADMINISTERING A DONOR-ADVISED FUND, A TAX-EFFECTIVE WAY TO CONSOLIDATE, ACCRUE, AND GRANT ASSETS TO CHARITY. THE UNIQUE STRUCTURE OF OUR PERSONAL PHILANTHROPIC ACCOUNTS ALLOWS DONORS TO BE STRATEGIC ABOUT GIVING AND MANAGE THEIR CHARITABLE DONATIONS IN A TAX-EFFECTIVE, FLEXIBLE, AND CONVENIENT WAY. COUPLED WITH OUR LOW COSTS AND A CHARITABLE PLAN, OUR ACCOUNTS HELP DONORS TO MAXIMIZE THEIR PHILANTHROPIC IMPACT.
THROUGH THESE PHILANTHROPIC ACCOUNTS, WE HELP DONORS FULFILL CHARITABLE MISSIONS THAT REFLECT THE PEOPLE AND CAUSES THEY CARE ABOUT MOST, AND TOGETHER, WE SUPPORT THOUSANDS OF NONPROFIT ORGANIZATIONS EVERY YEAR.

OUTSIDE THE IMMEDIATE BENEFITS, SUCH AS A CHARITABLE TAX DEDUCTION, OUR PHILANTHROPIC ACCOUNTS ALSO OFFER CHARITABLE CONTRIBUTIONS THE OPPORTUNITY TO GROW TAX-FREE THROUGH A VARIETY OF INVESTMENT OPTIONS THAT SPAN THE RISK SPECTRUM.

VANGUARD CHARITABLE MAKES IT EASIER TO MANAGE CHARITABLE DONATIONS BY ALLEVIATING THE ADMINISTRATIVE BURDEN AND TIME IT REQUIRES TO INVEST ASSETS, CONDUCT CHARITY DUE DILIGENCE, AND ISSUE GRANTS. OUR PHILANTHROPIC ACCOUNTS REDUCE WORK AND STREAMLINE COSTS FOR DONORS WITHOUT SACRIFICING CHARITABLE IMPACT.

DURING THIS FISCAL YEAR, VANGUARD CHARITABLE DISTRIBUTED APPROXIMATELY 12.4% OF ASSETS (BASED ON A 5-YEAR ROLLING AVERAGE) IN GRANTS FOR CHARITABLE PURPOSES, PRINCIPALLY TO OTHER QUALIFIED 501(C)(3) PUBLIC CHARITIES AND GOVERNMENTAL ORGANIZATIONS EXCLUSIVELY FOR PUBLIC PURPOSES. VANGUARD CHARITABLE ISSUED 189,418 GRANTS TOTALING OVER $1.8 BILLION. THESE GRANTS BENEFITED LOCAL, REGIONAL, NATIONAL AND GLOBAL CAUSES. SINCE ITS INCEPTION IN 1997, VANGUARD CHARITABLE HAS GRANTED MORE THAN $12.3 BILLION TO QUALIFIED CHARITABLE DONEES.

FORM 990, PART VI, SECTION A, LINE 2

CAROLINE COSBY, KARIN A. RISI, BETH MORALES SINGH - BUSINESS RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11B
THE FINAL DRAFT IS CIRCULATED TO ALL TRUSTEES AS WELL AS VANGUARD CHARITABLE'S OUTSIDE LEGAL COUNSEL REQUESTING THEIR REVIEW AND APPROVAL OF THE DOCUMENT AND ALSO SOLICITING COMMENTS, QUESTIONS, AND CONCERNS. ALL FEEDBACK IS IMMEDIATELY ADDRESSED. ANY RESULTANT MODIFICATIONS TO THE RETURN ARE INCORPORATED INTO A REVISED FINAL DRAFT. THE RETURN IS FILED WITH THE IRS. ONCE FILED, A PUBLIC COPY OF THE RETURN IS POSTED ON VANGUARD CHARITABLE'S PUBLIC WEBSITE.

FORM 990, PART VI, SECTION B, LINE 12C
ON AN ANNUAL BASIS, AND IN CONJUNCTION WITH THE PREPARATION OF THE 990, A CONFLICT OF INTEREST QUESTIONNAIRE AND COPY OF VANGUARD CHARITABLE'S CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL CURRENT TRUSTEES, OFFICERS, KEY EMPLOYEES, AS WELL AS VANGUARD CHARITABLE STAFF. IT IS REQUIRED THAT THEY REVIEW THE CONFLICTS OF INTEREST POLICY AND RESPOND TO THE APPROPRIATE QUESTIONS ON THE QUESTIONNAIRE, THEN SIGN AND RETURN IT TO MANAGEMENT PRIOR TO FILING THE 990. IN ACCORDANCE WITH THE POLICY, TRUSTEES ARE REQUIRED TO DISCLOSE CONFLICTS AND DO NOT PARTICIPATE IN DECISIONS TO WHICH THEY MAY HAVE A CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15A
VANGUARD CHARITABLE DOES NOT COMPENSATE JANE GREENFIELD FOR HER SERVICES OR PARTICIPATE IN DECISIONS INVOLVING HER COMPENSATION.
FORM 990, PART VI, SECTION B, LINE 15B

THE BOARD SETS COMPENSATION FOR THE OFFICERS BASED ON SEVERAL FACTORS, AS FOLLOWS: 1) ORGANIZATIONAL PERFORMANCE AS MEASURED CONSISTENT WITH VANGUARD CHARITABLE'S RELEVANT METRICS, 2) INDIVIDUAL ACHIEVEMENT AS ASSESSED DURING THE FORMAL ANNUAL AND MID-YEAR REVIEW PROCESS, 3) USE OF COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT REGIONAL NOT-FOR-PROFIT ORGANIZATIONS AND NATIONAL DONOR ADVISED FUNDS, AND 4) TRUSTEE APPROVED COMPENSATION STRATEGY FOR VANGUARD CHARITABLE.

FORM 990, PART VI, SECTION C, LINE 19

VANGUARD CHARITABLE PRIDES ITSELF ON TRANSPARENCY. THE FOLLOWING DOCUMENTS ARE AVAILABLE BOTH ON VANGUARD CHARITABLE'S WEBSITE AS WELL AS ON REQUEST: AUDITED FINANCIAL STATEMENTS, FORM 990, CONFLICTS OF INTEREST POLICY, CODE OF ETHICS POLICY, WHISTLEBLOWER POLICY, AND ANNUAL REPORT. VANGUARD CHARITABLE'S RECORDS RETENTION POLICY, GIFT ACCEPTANCE POLICY, AND FORM 1023 ARE ALSO AVAILABLE UPON REQUEST.

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,
FL, GA, HI, IL, KS, KY, ME, MD, MA, MI,
MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,
RI, SC, TN, UT, VA, WA, WV, WI,
990, PART VII - COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>DESCRIPTION OF SERVICES</th>
<th>COMPENSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>UST GLOBAL INC.</td>
<td>TECH ADMIN. SERVICES</td>
<td>3,035,838.</td>
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<tr>
<td>31 CANTINMENT ROAD</td>
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<tr>
<td>SINGAPORE 089747</td>
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<tr>
<td>UST GLOBAL INC.</td>
<td>TECH ADMIN. SERVICES</td>
<td>2,771,970.</td>
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<tr>
<td>P.O. BOX 31001-1967</td>
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<tr>
<td>PASADENA, CA 91110-1967</td>
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<td></td>
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<tr>
<td>VANGUARD GROUP, INC.</td>
<td>OCCUP. &amp; ADMIN. SVS.</td>
<td>2,474,954.</td>
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<tr>
<td>400 DEVON PARK DRIVE</td>
<td></td>
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<tr>
<td>WAYNE, PA 19087</td>
<td></td>
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<tr>
<td>SLALOM, LLC DBA SLALOM CONSULT</td>
<td>TECH SERVICES</td>
<td>2,023,249.</td>
</tr>
<tr>
<td>P.O. BOX 101416</td>
<td></td>
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<tr>
<td>PASADENA, CA 91189-1416</td>
<td></td>
<td></td>
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<tr>
<td>RANDSTAD</td>
<td>TEMPORARY SERVICES</td>
<td>620,454.</td>
</tr>
<tr>
<td>ONE OVERTON PARK 3625 CUMBERLAND BLVD SE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATLANTA, GA 30339</td>
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</table>
### Part I: Identification of Disregarded Entities
Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
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<tbody>
<tr>
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### Part II: Identification 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 year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
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<tbody>
<tr>
<td>(1)</td>
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<td>Yes/No</td>
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</tbody>
</table>
### Part III

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RHUMBLINE LOW CARBON INDEX FUND</td>
<td>INVESTMENTS</td>
<td>MA</td>
<td>VCEP</td>
<td>EXCLUDED</td>
<td>661,947</td>
<td>719,038,622</td>
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<td>X</td>
<td>99.6677</td>
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### Part IV

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
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<tbody>
<tr>
<td>(1)</td>
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</table>
### Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**Part V**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

   **a.** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

   **b.** Gift, grant, or capital contribution to related organization(s).

   **c.** Gift, grant, or capital contribution from related organization(s).

   **d.** Loans or loan guarantees to or for related organization(s).

   **e.** Loans or loan guarantees by related organization(s).

   **f.** Dividends from related organization(s).

   **g.** Sale of assets to related organization(s).

   **h.** Purchase of assets from related organization(s).

   **i.** Exchange of assets with related organization(s).

   **j.** Lease of facilities, equipment, or other assets to related organization(s).

   **k.** Lease of facilities, equipment, or other assets from related organization(s).

   **l.** Performance of services or membership or fundraising solicitations for related organization(s).

   **m.** Performance of services or membership or fundraising solicitations by related organization(s).

   **n.** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).

   **o.** Sharing of paid employees with related organization(s).

   **p.** Reimbursement paid to related organization(s) for expenses.

   **q.** Reimbursement paid by related organization(s) for expenses.

   **r.** Other transfer of cash or property to related organization(s).

   **s.** Other transfer of cash or property from related organization(s).

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
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</thead>
<tbody>
<tr>
<td>(1) RHUMBLINE LOW CARBON INDEX FUND LLC</td>
<td>B</td>
<td>717,987,228.</td>
<td>COST</td>
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(6)
## Part VI  Unrelated Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)</th>
<th>(e) Are all partners section 501(c)(3) organizations?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Part VII  Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.