** Return of Organization Exempt From Income Tax **

** Form 990 **

Department of the Treasury
Internal Revenue Service

For the 2021 calendar year, or tax year beginning APR 1, 2021 and ending MAR 31, 2022

** Name of organization: ALIGHT **

** Employer identification number: 36-3241033 **

** Tax-exempt status: 501(c)(3) **

** Form of organization: Corporation **

** Website: WWW.WEAREALIGHT.ORG **

** Year of formation: 1978 **

** State of legal domicile: IL **

** Summary **

1. Briefly describe the organization’s mission or most significant activities: SEE PART III, LINE 1.

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)

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

5. Total number of individuals employed in calendar year 2021 (Part V, line 2a)

6. Total number of volunteers (estimate if necessary)

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

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

** Revenue **

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

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

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

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

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

** Expenses **

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

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

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

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

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

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

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

** Net Assets or Fund Balances **

20. Net assets (Part X, line 16)

21. Total liabilities (Part X, line 26)

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

** 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.

** Signature of officer **

** Type or print name and title: JOCELYN WYATT, PRESIDENT **

** Firm’s name: GELMAN, ROSENBERG & FREEDMAN **

** Firm’s address: 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930 **

** Phone no. 301-951-9090 **

May the IRS discuss this return with the preparer shown above? See instructions

** Print/Type preparer’s name: RICHARD J. LOCASTRO, CPA **

** Preparer’s signature: RICHARD J. LOCASTRO **

** Date: 01/30/2023 **

** Check self-employed: Yes X No **

** Firm’s EIN: 52-1392008 **

** PTIN: 00288314 **

For Paperwork Reduction Act Notice, see the separate instructions.
Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ALIGHT WALKS ALONGSIDE THOSE ON THE LONG AND ARDUOUS JOURNEY OF DISPLACEMENT, HELPING THEM PROCESS THEIR NEW REALITY, NAVIGATE TO TRUSTWORTHY SERVICES AND SUPPORT, AND REBUILD MEANINGFUL LIVES.

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 $50,939,437. including grants of $1,068,559.) (Revenue $331,050.)

A. ALIGHT IS ONE OF SUDAN'S LARGEST PROVIDER OF HEALTH CARE SERVICES, PROVIDING PRIMARY AND REPRODUCTIVE HEALTH CARE AND NUTRITION SUPPORT TO CLOSE TO 1 MILLION PEOPLE.

B. IN THE HORN OF AFRICA, ALIGHT PROVIDES WATER AND SANITATION, NUTRITION SERVICES, LIVELIHOODS SUPPORT, AND LIFESAVING HEALTHCARE TO HUNDREDS OF THOUSANDS OF PEOPLE IN DOZENS OF COMMUNITIES AND DISPLACED PERSONS SETTLEMENTS.

C. ALIGHT IS DOING THE DOABLE AND HAS DELIVERED LIFESAVING FOOD, MEDICINE, AND OTHER CRITICAL RELIEF SUPPLIES TO MORE THAN 1 MILLION UKRAINIANS IMPACTED BY WAR.

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 $50,939,437.
<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>Is the organization required to complete Schedule B, Schedule of Contributors? See instructions</td>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If “Yes,” complete Schedule C, Part I</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If “Yes,” complete Schedule D, Part I</td>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If “Yes,” complete Schedule D, Part II</td>
<td>5</td>
<td>X</td>
</tr>
<tr>
<td>6</td>
<td>If “Yes,” complete Schedule D, Part III</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>7</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If “Yes,” complete Schedule D, Part IV</td>
<td>7</td>
<td>X</td>
</tr>
<tr>
<td>8</td>
<td>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 “Yes,” complete Schedule D, Part V</td>
<td>8</td>
<td>X</td>
</tr>
<tr>
<td>9</td>
<td>Did the organization report an amount in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VI</td>
<td>9</td>
<td>X</td>
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<tr>
<td>10</td>
<td>Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If “Yes,” complete Schedule D, Part VII</td>
<td>10</td>
<td>X</td>
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<tr>
<td>11</td>
<td>Did the organization report an amount for investments other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VIII</td>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>12</td>
<td>Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part IX</td>
<td>11b</td>
<td>X</td>
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<tr>
<td>13</td>
<td>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If “Yes,” complete Schedule D, Part X</td>
<td>11c</td>
<td>X</td>
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<tr>
<td>14</td>
<td>Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part X</td>
<td>11d</td>
<td>X</td>
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<tr>
<td>15</td>
<td>Did the organization report an amount for program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part X</td>
<td>11e</td>
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<td>16</td>
<td>Did the organization report an amount for other liabilities in Part X, line 25? If “Yes,” complete Schedule D, Part X</td>
<td>11f</td>
<td>X</td>
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<tr>
<td>17</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If “Yes,” complete Schedule D, Part X</td>
<td>12a</td>
<td>X</td>
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<tr>
<td>18</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If “Yes,” complete Schedule D, Part X</td>
<td>12b</td>
<td>X</td>
</tr>
<tr>
<td>19</td>
<td>Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If “Yes,” complete Schedule D, Part X</td>
<td>12c</td>
<td>X</td>
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<tr>
<td>20</td>
<td>Did the organization report amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If “Yes,” complete Schedule D, Part X</td>
<td>12d</td>
<td>X</td>
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<tr>
<td>21</td>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If “Yes,” complete Schedule C, Part I</td>
<td>13</td>
<td>X</td>
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<td>22</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If “Yes,” complete Schedule D, Part II</td>
<td>14</td>
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<tr>
<td>23</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If “Yes,” complete Schedule D, Part III</td>
<td>15</td>
<td>X</td>
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<td>24</td>
<td>Did the organization report amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If “Yes,” complete Schedule D, Part IV</td>
<td>16</td>
<td>X</td>
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<td>25</td>
<td>Did the organization report an amount for investments other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VII</td>
<td>17</td>
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<td>Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VIII</td>
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<td>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If “Yes,” complete Schedule D, Part IX</td>
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<tr>
<td>28</td>
<td>Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part X</td>
<td>20a</td>
<td>X</td>
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<tr>
<td>29</td>
<td>Did the organization report amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If “Yes,” complete Schedule D, Part X</td>
<td>20b</td>
<td>X</td>
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<tr>
<td>30</td>
<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If “Yes,” complete Schedule G, Part II</td>
<td>21</td>
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### Part IV Checklist of Required Schedules (continued)

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<td>38</td>
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### 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>
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<tr>
<td>1a</td>
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<tr>
<td>1b</td>
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<tr>
<td>1c</td>
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**Note:** All Form 990 filers are required to complete Schedule O.
Part V  
Statements Regarding Other IRS Filings and Tax Compliance (continued)

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.  

Yes   No  2a  71

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  

b If "Yes," has it filed a Form 990-T for this year?  "No" to line 3b, provide an explanation on Schedule O  

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)?  

b If "Yes," enter the name of the foreign country. SEE SCHEDULE O  

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  

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?  

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  

7 Organizations that may receive deductible contributions under section 170(c).  

a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?  

b If "Yes," did the organization notify the donor of the value of the goods or services provided?  

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  

d If "Yes," indicate the number of Forms 8282 filed during the year.  

7d  

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  

7e  

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  

7f  

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  

7g  

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  

7h  

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  

8  

9 Sponsoring organizations maintaining donor advised funds.  

a Did the sponsoring organization make any taxable distributions under section 4966?  

9a  

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  

9b  

10 Section 501(c)(7) organizations. Enter:  

a Initiation fees and capital contributions included on Part VIII, line 12 N/A  

10a  

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  

10b  

11 Section 501(c)(12) organizations. Enter:  

a Gross income from members or shareholders  

11a  

b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  

11b  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

12a  

b If "Yes," enter the amount of tax-exempt interest received or accrued during the tax year N/A  

12b  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

a Is the organization licensed to issue qualified health plans in more than one state?  

Note: See the instructions for additional information the organization must report on Schedule O.  

13a  

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  

13b  

14a Did the organization receive any payments for indoor tanning services during the tax year?  

b If "Yes," has it filed a Form 720 to report these payments?  "No," provide an explanation on Schedule O  

14a  

14b  

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  

15  

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  

16  

17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  

17  

18 If "Yes," complete Form 4720, Schedule O.
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

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

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

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

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

6 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?

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
   a The governing body?
   b Each committee with authority to act on behalf of the governing body?

9 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? If “Yes,” provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?
   b If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
   b Describe on 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
   b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
   c Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe on 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?
   a The organization’s CEO, Executive Director, or top management official
   b 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?
   b If “Yes,” did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements?

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)s 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

   MARK WHITE - 612-872-7060
   1325 QUIKCY STREET, NE, SUITE A1, MINNEAPOLIS, MN 55413
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- List all of the organization’s current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s current key employees, if any. See the instructions for definition of “key employee.”
- List all of the organization’s former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SARAH HARTMAN</td>
<td>40.00</td>
<td>X</td>
<td>249,125.</td>
<td>0.</td>
<td>43,278.</td>
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<td>CO &amp; EXPERIENCE OFFICER</td>
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<td></td>
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<tr>
<td>(2) BERNAD OCHIENG OJWANG</td>
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<td>255,974.</td>
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<td>33,158.</td>
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<tr>
<td>COUNTRY DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) MARK WHITE</td>
<td>40.00</td>
<td>X</td>
<td>221,030.</td>
<td>0.</td>
<td>40,161.</td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td>0.50</td>
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</tr>
<tr>
<td>(4) ADAN A. ADAR</td>
<td>40.00</td>
<td>X</td>
<td>196,688.</td>
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<td>32,773.</td>
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<tr>
<td>COUNTRY DIRECTOR</td>
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<tr>
<td>(5) JEREMY K. HALDEMAN</td>
<td>40.00</td>
<td>X</td>
<td>156,370.</td>
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<td>36,720.</td>
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<tr>
<td>DIR. OF GOV’T AFFAIRS &amp; ADVOC.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(6) RANDHIR SINGH</td>
<td>40.00</td>
<td>X</td>
<td>145,776.</td>
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<td>19,702.</td>
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<td>COUNTRY DIRECTOR</td>
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<tr>
<td>(7) GINA PAULETTE</td>
<td>40.00</td>
<td>X</td>
<td>123,881.</td>
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<td>19,803.</td>
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<tr>
<td>DIRECTOR OF GLOBAL SUPPORT</td>
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</tr>
<tr>
<td>(8) JOCHELYN WYATT</td>
<td>40.00</td>
<td>X</td>
<td>1,346.</td>
<td>0.</td>
<td>25.</td>
</tr>
<tr>
<td>PRESIDENT (BEG. 12/15/21)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(9) WHITNEY WILLIAMS</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(10) LYNN HIESTAND</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>VICE-CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) MARK DAYTON</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TREASURER</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) IMAD LIBBUS</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
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</tr>
<tr>
<td>SECRETARY</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(13) PAUL BENNETT</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>(14) VANSSSA HOLDEN</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) MAHBBOB MAALIM</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(16) MARTHA MACMILLAN</td>
<td>1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) DOGON MONDIANT</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) GREG PAGE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19) MAUREEN REED</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20) VIRGINIA RUSTIQUE-PETTENI</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(21) RICHARD VOEBEL</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(22) MARY WHITNEY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(23) YASMIN YONIS</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(24) BRENDA CASSELLIUS</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 12

#### Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.
- **Yes**: 1
- **No**: 3

#### For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual.
- **Yes**: 4
- **No**: 3

#### Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.
- **Yes**: 5
- **No**: 7

### 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>ATOMIC DATA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>250 MARQUETTE AVE S, MINNEAPOLIS, MN 55401</td>
<td>IT SERVICES</td>
<td>317,549.</td>
</tr>
<tr>
<td>GOLDEN ARROW CO., P1-HAMIRYAH BUSINESS, SHARJAH, UNITED ARAB EMIRATES</td>
<td>VEHICULAR SERVICES</td>
<td>300,700.</td>
</tr>
<tr>
<td>ALWAHA FOR SUPPLIER, P.O. BOX 185053, DUBAI, UNITED ARAB EMIRATES</td>
<td>EQUIPMENT SERVICES</td>
<td>205,584.</td>
</tr>
<tr>
<td>RESOLUTION GRAPHICS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LB 7376 PO BOX 9438, MINNEAPOLIS, MN 55440</td>
<td>PRINTING SERVICES</td>
<td>170,299.</td>
</tr>
<tr>
<td>STOKED, LLC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1323 6HT AVE N., NASHVILLE, TN 37028</td>
<td>WORKSHOP DESIGN CONSULTANTS</td>
<td>136,500.</td>
</tr>
</tbody>
</table>

2. Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 7
### Part VIII  Statement of Revenue

#### Contributions, Gifts, Grants and Other Similar Amounts

<table>
<thead>
<tr>
<th></th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
<th>Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Government grants (contributions)</td>
<td>1e</td>
<td>49,940,155.</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>11,963,685.</td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td>1g</td>
<td>184,677.</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Total, Add lines 1a-1f</td>
<td></td>
<td>61,903,840.</td>
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</tr>
</tbody>
</table>

#### Program Service Revenue

<table>
<thead>
<tr>
<th></th>
<th>Business Code</th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
<th>Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>SUPPORT INCOME</td>
<td>900099</td>
<td>302,708.</td>
<td>302,708.</td>
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</tr>
<tr>
<td>2b</td>
<td>SOLAR KIT INSTALL. FEES</td>
<td>900099</td>
<td>29,675.</td>
<td>29,675.</td>
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</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f</td>
<td>All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Total, Add lines 2a-2f</td>
<td></td>
<td>332,383.</td>
<td></td>
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</tr>
</tbody>
</table>

#### Other Revenue

<table>
<thead>
<tr>
<th></th>
<th>Business Code</th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
<th>Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td>26,003.</td>
<td>26,003.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td>Gross rents</td>
<td>6a</td>
<td>63,236.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td>Less: rental expenses</td>
<td>6b</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c</td>
<td>Rental income or (loss)</td>
<td>6c</td>
<td>63,236.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td>(i) Securities</td>
<td>60,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Less: cost or other basis and sales expenses</td>
<td>(ii) Other</td>
<td>65,895.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Gain or (loss)</td>
<td></td>
<td>-5,895.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>Gross income from fundraising events (not including $ contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b</td>
<td>Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td>Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td>Less: direct expenses</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td></td>
<td>3,959.</td>
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</tr>
<tr>
<td>10b</td>
<td>Less: cost of goods sold</td>
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<td>5,292.</td>
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<td></td>
</tr>
<tr>
<td>c</td>
<td>Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>WRITE OFFS</td>
<td>900099</td>
<td>143,124.</td>
<td>143,124.</td>
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</tr>
<tr>
<td>11b</td>
<td>REFUNDS</td>
<td>900099</td>
<td>23,807.</td>
<td>23,807.</td>
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<tr>
<td>11c</td>
<td>MISCELLANEOUS</td>
<td>900099</td>
<td>11,808.</td>
<td>11,808.</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Total, Add lines 11a-11d</td>
<td></td>
<td>178,739.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Total revenue, See instructions</td>
<td></td>
<td>62,496,973.</td>
<td>331,050.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Statement of Functional Expenses

**Part IX**

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column (A)</th>
<th>Column (B)</th>
<th>Column (C)</th>
<th>Column (D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check if Schedule O contains a response or note to any line in this Part IX</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants and other assistance to domestic organizations and domestic governments</td>
<td>180,442</td>
<td>180,442</td>
<td></td>
<td></td>
</tr>
<tr>
<td>See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants and other assistance to foreign organizations, foreign governments,</td>
<td>888,117</td>
<td>888,117</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits paid to or for members</td>
<td>672,141</td>
<td></td>
<td>453,582</td>
<td>218,559</td>
</tr>
<tr>
<td>Compensation not included above to disqualified persons (as defined</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>under section 4958(f)(1)(i) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other salaries and wages</td>
<td>23,114,748</td>
<td>20,585,450</td>
<td>1,787,344</td>
<td>741,954</td>
</tr>
<tr>
<td>Pension plan accruals and contributions (include section 401(k) and</td>
<td>271,664</td>
<td>257,642</td>
<td>10,340</td>
<td>3,682</td>
</tr>
<tr>
<td>403(b) employer contributions)</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other employee benefits</td>
<td>4,443,916</td>
<td>3,889,360</td>
<td>380,339</td>
<td>174,217</td>
</tr>
<tr>
<td>Payroll taxes</td>
<td>1,377,611</td>
<td>1,116,397</td>
<td>177,214</td>
<td>84,000</td>
</tr>
<tr>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management</td>
<td>116,341</td>
<td>50,161</td>
<td>50,302</td>
<td>15,878</td>
</tr>
<tr>
<td>Legal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounting</td>
<td>192,128</td>
<td>192,128</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A), amount,</td>
<td>2,111,417</td>
<td>1,074,118</td>
<td>682,038</td>
<td>355,261</td>
</tr>
<tr>
<td>list line 11g expenses on Sch O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advertising and promotion</td>
<td>177,086</td>
<td>65,555</td>
<td>45,485</td>
<td>66,046</td>
</tr>
<tr>
<td>Office expenses</td>
<td>1,646,621</td>
<td>1,299,913</td>
<td>109,128</td>
<td>237,580</td>
</tr>
<tr>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupancy</td>
<td>1,827,503</td>
<td>1,629,834</td>
<td>138,101</td>
<td>59,568</td>
</tr>
<tr>
<td>Travel</td>
<td>3,300,982</td>
<td>3,132,533</td>
<td>155,807</td>
<td>12,642</td>
</tr>
<tr>
<td>Payments of travel or entertainment expenses for any federal, state, or</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conferences, conventions, and meetings</td>
<td>177,836</td>
<td>107,038</td>
<td>64,943</td>
<td>5,855</td>
</tr>
<tr>
<td>Interest</td>
<td>11,719</td>
<td>1,043</td>
<td>10,676</td>
<td></td>
</tr>
<tr>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation, depletion, and amortization</td>
<td>29,608</td>
<td>25,185</td>
<td>1,754</td>
<td>2,669</td>
</tr>
<tr>
<td>Insurance</td>
<td>319,287</td>
<td>299,472</td>
<td>16,804</td>
<td>3,011</td>
</tr>
<tr>
<td>Other expenses, Itemize expenses not covered above. (List miscellaneous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>expenses on line 24e. If line 24e amount exceeds 10% of line 25, column</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A), amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROGRAM SUPPLIES</td>
<td>10,939,811</td>
<td>10,939,811</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CONSTRUCTION</td>
<td>2,791,951</td>
<td>2,791,951</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EQUIPMENT PURCHASE</td>
<td>1,237,400</td>
<td>1,030,278</td>
<td>187,773</td>
<td>19,349</td>
</tr>
<tr>
<td>EDUCATION &amp; TRAINING</td>
<td>1,026,642</td>
<td>964,103</td>
<td>62,539</td>
<td></td>
</tr>
<tr>
<td>All other expenses</td>
<td>468,525</td>
<td>418,906</td>
<td>38,326</td>
<td>11,293</td>
</tr>
<tr>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>57,323,496</td>
<td>50,939,437</td>
<td>4,372,495</td>
<td>2,011,564</td>
</tr>
<tr>
<td>Joint costs. Complete this line only if the organization reported in</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>column (B) joint costs from a combined educational campaign and fundraising</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part X Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>7,011,028</td>
<td>12,449,577</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>690,238</td>
<td>683,674</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>27,776,161</td>
<td>26,634,016</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>392,963</td>
<td>1,049,449</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined 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></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>776,419</td>
<td>1,175,236</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>641,210</td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>510,434</td>
<td>68,638</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>579,626</td>
<td>659,164</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>938,087</td>
<td>461,829</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>349,872</td>
<td>356,181</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 33)</td>
<td>38,583,032</td>
<td>43,599,902</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>5,855,128</td>
<td>6,617,171</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>910,343</td>
<td>391,678</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 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>6,765,471</td>
<td>7,008,849</td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Net assets without donor restrictions</td>
<td>1,164,569</td>
</tr>
<tr>
<td>28</td>
<td>Net assets with donor restrictions</td>
<td>30,652,992</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>31,817,561</td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>38,583,032</td>
</tr>
<tr>
<td>33</td>
<td>Total liabilities and net assets/fund balances</td>
<td></td>
</tr>
</tbody>
</table>

---

Form 990 (2021)
Form 990 (2021)

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>62,496,973.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>57,323,496.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>5,173,477.</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>31,817,561.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-399,985.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></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>36,591,053.</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>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Cash</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Accrual</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Other</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>[ ]</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Separate basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Consolidated basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Both consolidated and separate basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>[ ]</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Separate basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Consolidated basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>- Both consolidated and separate basis</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>[ ]</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>[ ]</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2021)
**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

---

**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.)

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
</tr>
<tr>
<td>4</td>
<td>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the name, city, and state:</td>
</tr>
<tr>
<td>5</td>
<td>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.)</td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
</tr>
<tr>
<td>7</td>
<td>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.)</td>
</tr>
<tr>
<td>8</td>
<td>An agricultural trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
</tr>
<tr>
<td>9</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
</tr>
<tr>
<td>10</td>
<td>An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</td>
</tr>
<tr>
<td>a</td>
<td>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.</td>
</tr>
<tr>
<td>b</td>
<td>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.</td>
</tr>
<tr>
<td>c</td>
<td>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.</td>
</tr>
<tr>
<td>d</td>
<td>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.</td>
</tr>
<tr>
<td>e</td>
<td>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.</td>
</tr>
<tr>
<td>f</td>
<td>Enter the number of supported organizations.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN (described on lines 1-10 above (see instructions))</th>
<th>(iii) Type of organization (see instructions)</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Section A. Public Support

Calendar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total
--- | --- | --- | --- | --- | --- | ---
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 61013084.59606207.51052552.62172252.61903840.295747935 |  |  |  |  |  
2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf |  |  |  |  |  |  
3 The value of services or facilities furnished by a governmental unit to the organization without charge |  |  |  |  |  |  
4 Total. Add lines 1 through 3 | 61013084.59606207.51052552.62172252.61903840.295747935 |  |  |  |  |  
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |  |  |  |  |  |  
6 Public support. Subtract line 5 from line 4. |  |  |  |  |  |  

### Section B. Total Support

Calendar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total
--- | --- | --- | --- | --- | --- | ---
7 Amounts from line 4 | 61013084.59606207.51052552.62172252.61903840.295747935 |  |  |  |  |  
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 17,548. | 73,491. | 86,089. | 111,727. | 89,239. | 378,094. 
9 Net income from unrelated business activities, whether or not the business is regularly carried on | 905,812. | 86,197. | 115,355. | 15,086. | 178,739. | 1301189. 
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) |  |  |  |  |  |  
11 Total support. Add lines 7 through 10 |  |  |  |  |  |  
12 Gross receipts from related activities, etc. (see instructions) |  |  |  |  |  |  
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 |  |  |  |  |  |  

### Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) |  |  |  |  |  |  
15 Public support percentage from 2020 Schedule A, Part II, line 14 |  |  |  |  |  |  
16a 33 1/3% support test - 2021. 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 |  |  |  |  |  |  
16b 33 1/3% support test - 2020. 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 |  |  |  |  |  |  
17a 10% -facts-and-circumstances test - 2021. 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 |  |  |  |  |  |  
17b 10% -facts-and-circumstances test - 2020. 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 |  |  |  |  |  |  
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 |  |  |  |  |  |  

Schedule A (Form 990) 2021
### 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

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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>
</tr>
<tr>
<td>2</td>
<td>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>
</tr>
<tr>
<td>3</td>
<td>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>
</tr>
<tr>
<td>4</td>
<td>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>
</tr>
<tr>
<td>5</td>
<td>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>
</tr>
<tr>
<td>6 Total</td>
<td>Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support</td>
<td>Subtract line 7c from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>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>
</tr>
<tr>
<td>10b</td>
<td>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>
</tr>
<tr>
<td>10c</td>
<td>Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>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>
</tr>
<tr>
<td>13 Total support</td>
<td>Add lines 9, 10c, 11, and 12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First 5 years</td>
<td>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></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))</td>
<td>15</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2020 Schedule A, Part III, line 15</td>
<td>16</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))</td>
<td>17</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2020 Schedule A, Part III, line 17</td>
<td>18</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
- **19b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, 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.

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

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

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

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

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

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

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

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

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).

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

b. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

c. Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

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

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

11  Has the organization accepted a gift or contribution from any of the following persons?
   a  A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
   b  A family member of a person described on line 11a above?
   c  A 35% controlled entity of a person described on line 11a or 11b above?  If “Yes” to line 11a, 11b, or 11c, provide detail in Part VI.

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?  If “No,” describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization’s activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2  Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?  If “Yes,” explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

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)?  If “No,” describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

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?

2  Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?  If “No,” explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3  By reason of the relationship described on line 2, above, did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year?  If “Yes,” describe in Part VI the role the organization’s supported organizations played in this regard.

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.
   b  The organization is the parent of each of its supported organizations. Complete line 3 below.
   c  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

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?  If “Yes,” then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
   b  Did the activities described on line 2a, above, constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have been engaged in?  If “Yes,” explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.

3  Parent of Supported Organizations. Answer lines 3a and 3b below.
   a  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations?  If “Yes” or “No” provide details in Part VI.
   b  Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?  If “Yes,” describe in Part VI the role played by the organization in this regard.
Part VI
See instructions.
Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

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

### Section D - Distributions

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
<td>1</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>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2021 from Section C, line 6</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
<td>10</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2021 from Section C, line 6</td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.</td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2021</td>
</tr>
<tr>
<td>a</td>
<td>From 2016</td>
</tr>
<tr>
<td>b</td>
<td>From 2017</td>
</tr>
<tr>
<td>c</td>
<td>From 2018</td>
</tr>
<tr>
<td>d</td>
<td>From 2019</td>
</tr>
<tr>
<td>e</td>
<td>From 2020</td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through 3e</td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2021 distributable amount</td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2016 not applied (see instructions)</td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from line 3f.</td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2021 from Section D, line 7:</td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2021 distributable amount</td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from line 4.</td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2022. Add lines 3j and 4c.</td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2017</td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2018</td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2019</td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2020</td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2021</td>
</tr>
</tbody>
</table>
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.)
** PUBLIC DISCLOSURE COPY **

### Schedule B

(Form 990)

<table>
<thead>
<tr>
<th>Department of the Treasury</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Revenue Service</td>
</tr>
</tbody>
</table>

** 123451  11-11-21 **

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

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

### Schedule of Contributors

#### (2021)

<table>
<thead>
<tr>
<th>OMB No. 1545-0047</th>
</tr>
</thead>
</table>

#### Employer identification number

| 36-3241033 |

### Name of the organization

| ALIGHT |

### Organization type (check one):

<table>
<thead>
<tr>
<th>(check one)</th>
</tr>
</thead>
</table>

#### Filers of:

** Form 990 or 990-EZ **

- ** X ** 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust ** not treated as a private foundation **
- 527 political organization

** Form 990-PF **

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the ** General Rule ** or a ** Special Rule. **

** Note: ** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### General Rule

- 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

- ** X ** 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering “N/A” in column (b) instead of the contributor name and address), II, and III.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the ** General Rule ** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year .................................  ► $ ______

** Caution: ** An organization that isn’t covered by the General Rule and/or the Special Rules doesn’t file Schedule B (Form 990), but it ** must ** answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990).

LHA

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

Schedule B (Form 990) (2021)

123451 11-11-21
**Part I**

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$20,352,872</td>
<td>Person, Payroll</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$18,658,296</td>
<td>Person, Payroll</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$6,393,194</td>
<td>Person, Payroll</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$2,151,390</td>
<td>Person, Payroll</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

*Schedule B (Form 990) (2021)*

Name of organization: **ALIGHT**

Employer identification number: **36-3241033**
## Part II Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Description of noncash property given</th>
<th>FMV (or estimate) (See instructions.)</th>
<th>Date received</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Schedule B (Form 990) (2021)
### Schedule B (Form 990) (2021)

Name of organization: **ALIGHT**

Employer identification number: 36-3241033

#### Part III

<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>
</tr>
</thead>
<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
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<td>------------------------------------------</td>
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<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
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</tbody>
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<tbody>
<tr>
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<tr>
<td>------------------------------------------</td>
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<tr>
<td></td>
</tr>
</tbody>
</table>
**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>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

**Part II**

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

<table>
<thead>
<tr>
<th></th>
<th>Purpose(s) of conservation easements held by the organization (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Preservation of land for public use (for example, recreation or education)</td>
</tr>
<tr>
<td></td>
<td>Protection of natural habitat</td>
</tr>
<tr>
<td></td>
<td>Preservation of open space</td>
</tr>
</tbody>
</table>

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></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
</tbody>
</table>

**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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>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.</td>
</tr>
<tr>
<td>b</td>
<td>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:</td>
</tr>
<tr>
<td></td>
<td>(i) Revenue included on Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td></td>
<td>(ii) Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>

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:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Revenue included on Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td>b</td>
<td>Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>

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

Schedule D (Form 990) 2021

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**Form 990**

Name of the organization: **ALIGHT**

Employer identification number: **36-3241033**

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

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

Schedule D (Form 990) 2021

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16350130 745960 00463 2021.05040 ALIGHT 00463_1
## 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>Amount</th>
<th>1c</th>
<th>1d</th>
<th>1e</th>
<th>1f</th>
</tr>
</thead>
</table>

2a. 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 9, or reported an amount on Form 990, Part X, line 21.

1. Beginning of year balance
   - 1a. Current year: 1,104,090.
   - 1b. Prior year: 1,104,090.
   - 1c. Two years back: 900,793.
   - 1d. Three years back: 857,472.
   - 1e. Four years back: 880,353.

   Contributions: 100,000.

   Net investment earnings, gains, and losses: 72,379.

   Grants or scholarships: 213,494.

   Other expenditures for facilities and programs: 30,000.

   Administrative expenses: 100,000.

   End of year balance: 1,146,469.

2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   - a. Board designated or quasi-endowment: 0.0000%
   - b. Permanent endowment: 82.7000%
   - c. Term endowment: 17.3000%

   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
   - (ii) Related organizations
   - 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>Description of property</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>Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td></td>
<td>77,943.</td>
<td>77,943.</td>
<td></td>
</tr>
<tr>
<td>Equipment</td>
<td></td>
<td>78,306.</td>
<td>74,572.</td>
<td>3,734.</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>484,961.</td>
<td>435,862.</td>
<td>49,099.</td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

130,776.
**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>
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<td></td>
</tr>
<tr>
<td>(A)</td>
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<td>(H)</td>
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</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

**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>
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Total. (Col. (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>
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</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>
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</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
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<td>(2)</td>
<td></td>
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<td>(3)</td>
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<td>(8)</td>
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<td>(9)</td>
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</tbody>
</table>

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

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

Schedule D (Form 990) 2021
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.

1. Total revenue, gains, and other support per audited financial statements: $62,096,988.
   - Amounts included on line 1 but not on Form 990, Part VIII, line 12:
     b. Donated services and use of facilities.
     c. Recoveries of prior year grants.
     d. Other (Describe in Part XIII.): 2d.
     e. Add lines 2a through 2d: $-399,985.

2. Subtract line 2e from line 1: $62,496,973.
   - Amounts included on Form 990, Part VIII, line 12, but not on line 1:
     a. Investment expenses not included on Form 990, Part VIII, line 7b: 4a.
     b. Other (Describe in Part XIII.): 4b.
     c. Add lines 4a and 4b: 4c.

3. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) $62,496,973.

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.

1. Total expenses and losses per audited financial statements: $57,323,496.
   - Amounts included on line 1 but not on Form 990, Part IX, line 25:
     a. Donated services and use of facilities: 2a.
     b. Prior year adjustments: 2b.
     c. Other losses: 2c.
     d. Other (Describe in Part XIII.): 2d.
     e. Add lines 2a through 2d: 2e.

2. Subtract line 2e from line 1: $57,323,496.
   - Amounts included on Form 990, Part IX, line 25, but not on line 1:
     a. Investment expenses not included on Form 990, Part VIII, line 7b: 4a.
     b. Other (Describe in Part XIII.): 4b.
     c. Add lines 4a and 4b: 4c.

3. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) $57,323,496.

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.

PART V, LINE 4:

ALIGHT HAS 3 SEPARATE ENDOWMENTS WITH SIMILAR REQUIREMENTS. THE EARNINGS CAN BE USED WITH APPROVAL FOR CURRENT EMERGENCY OPERATIONS. CERTAIN AMOUNTS OF THE ORIGINAL ENDOWMENT CAN BE USED FOR EMERGENCY RELIEF WITH THE REQUIREMENT TO MAKE THE ENDOWMENT WHOLE WHEN MONIES ARE RECEIVED.

PART X, LINE 2:

FOR THE YEARS ENDED MARCH 31, 2022 AND 2021, ALIGHT AND RELATED ENTITIES HAVE DOCUMENTED THEIR CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAVE DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.
**Statement of Activities Outside the United States**

**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? [X] Yes  [ ] No

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>CENTRAL AMERICA AND THE CARIBBEAN</td>
<td>1</td>
<td>1</td>
<td>PROGRAM ACTIVITIES</td>
<td>COMMUNITY DEVELOPMENT</td>
<td>107,544.</td>
</tr>
<tr>
<td>EAST ASIA AND THE PACIFIC</td>
<td>2</td>
<td>276</td>
<td>PROGRAM ACTIVITIES</td>
<td>HEALTH SERVICES, EMERGENCY RESPONSE, INFECTIOUS DISEASE PREVENTION AND</td>
<td>2,727,339.</td>
</tr>
<tr>
<td>MIDDLE EAST AND NORTH AFRICA</td>
<td>1</td>
<td>0</td>
<td>PROGRAM ACTIVITIES</td>
<td>EMERGENCY RESPONSE</td>
<td>14,424.</td>
</tr>
<tr>
<td>NORTH AMERICA</td>
<td>0</td>
<td>0</td>
<td>PROGRAM ACTIVITIES</td>
<td>Community Development</td>
<td>64,487.</td>
</tr>
<tr>
<td>RUSSIA AND NEIGHBORING STATES</td>
<td>0</td>
<td>0</td>
<td>PROGRAM ACTIVITIES</td>
<td>EMERGENCY RESPONSE</td>
<td>130,051.</td>
</tr>
<tr>
<td>SOUTH ASIA</td>
<td>1</td>
<td>31</td>
<td>PROGRAM ACTIVITIES</td>
<td>Formal and Non-Formal Education</td>
<td>1,164,024.</td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td>6</td>
<td>1878</td>
<td>PROGRAM ACTIVITIES</td>
<td>Health Care (Primary Health Care, Infectious Disease Prevention,)</td>
<td>42,719,439.</td>
</tr>
<tr>
<td>EUROPE (INCLUDING ICELAND &amp; GREENLAND)</td>
<td>0</td>
<td>0</td>
<td>LOCATED IN RECIPIENTS</td>
<td></td>
<td>5,328.</td>
</tr>
</tbody>
</table>

3a Subtotal .................................... 11  2186  46,932,636. 
3b Total from continuation sheets to Part I ............... 0  0  882,789. 
3c Totals (add lines 3a and 3b) .................................. 11  2186  47,815,425. 

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. See Part V for Column (E) Descriptions
<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees or agents in region</th>
<th>(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region</th>
<th>(f) Total expenditures for region</th>
</tr>
</thead>
<tbody>
<tr>
<td>NORTH AMERICA</td>
<td>0</td>
<td>0</td>
<td>GRANTS TO RECIPIENTS LOCATED IN REGION</td>
<td></td>
<td>40,030.</td>
</tr>
<tr>
<td>SOUTH ASIA</td>
<td>0</td>
<td>0</td>
<td>GRANTS TO RECIPIENTS LOCATED IN REGION</td>
<td></td>
<td>371,886.</td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td>0</td>
<td>0</td>
<td>GRANTS TO RECIPIENTS LOCATED IN REGION</td>
<td></td>
<td>470,873.</td>
</tr>
</tbody>
</table>

Totals .................................................................................................................. 882,789.
**Part II**

**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>Name of organization</th>
<th>IRS code section and EIN (if applicable)</th>
<th>Region</th>
<th>Purpose of grant</th>
<th>Amount of cash grant</th>
<th>Manner of cash disbursement</th>
<th>Amount of noncash assistance</th>
<th>Description of noncash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>EUROPE (INCLUDING ICELAND &amp; GREENLAND)</td>
<td></td>
<td>OPERATIONAL SUPPORT</td>
<td>5,328</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOUTH ASIA</td>
<td></td>
<td>EDUCATION</td>
<td>371,886</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td></td>
<td>POLIO PREVENTION</td>
<td>271,942</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
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</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td></td>
<td>PSYCHOSOCIAL SUPPORT</td>
<td>166,872</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td></td>
<td>PROTECTION</td>
<td>32,059</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NORTH AMERICA</td>
<td></td>
<td>COMMUNITY DEVELOPMENT/EMERGENCY RESPONSE</td>
<td>18,055</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>NORTH AMERICA</td>
<td></td>
<td>COMMUNITY DEVELOPMENT/EMERGENCY RESPONSE</td>
<td>8,812</td>
<td>WIRE TRANSFER</td>
<td>0.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>NORTH AMERICA</td>
<td></td>
<td>COMMUNITY DEVELOPMENT/EMERGENCY RESPONSE</td>
<td>7,106</td>
<td>WIRE TRANSFER</td>
<td>0.</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

<p>| Schedule F (Form 990) 2021 | 36-3241033 | Page 2 |</p>
<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 non-cash assistance</th>
<th>(h) Description of non-cash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ALIGHT</td>
<td>36-3241033</td>
<td>NORTH AMERICA</td>
<td>COMMUNITY DEVELOPMENT/EMERGENCY RESPONSE</td>
<td>6,057</td>
<td>WIRE TRANSFER</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Type of grant or assistance</td>
<td>(b) Region</td>
<td>(c) Number of recipients</td>
<td>(d) Amount of cash grant</td>
<td>(e) Manner of cash disbursement</td>
<td>(f) Amount of noncash assistance</td>
<td>(g) Description of noncash assistance</td>
<td>(h) Method of valuation (book, FMV, appraisal, other)</td>
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</table>
1. Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," 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) ☐ Yes ☒ No

2. Did the organization have an interest in a foreign trust during the tax year? If "Yes," 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) ☐ Yes ☐ No

3. Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," 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) ☐ Yes ☐ No

4. Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," 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) ☐ Yes ☐ No

5. Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 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) ☐ Yes ☐ No

6. Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) ☐ Yes ☐ No
PART I, LINE 2:

TO EFFECTIVELY MONITOR GRANT ACTIVITIES AND IDENTIFY POTENTIAL PROBLEMS IN A TIMELY MANNER, ALIGHT USES A LAYERED APPROACH INVOLVING STAFF AND SYSTEMS AT ALL LEVELS OF THE ORGANIZATION.

FOR PROGRAM MONITORING, ALIGHT EMPLOYS VARIOUS MEANS OF ONGOING MONITORING AND EVALUATIONS SYSTEMS DEPENDING ON THE COUNTRY PROGRAM AND THE PROJECT. IN GENERAL HOWEVER, AT THE FIELD LEVEL, PROJECT STAFF KEEP DETAILED RECORDS OF ACTIVITIES AND SHARE THESE REGULARLY WITH OPERATIONAL, TECHNICAL AND MANAGEMENT STAFF AT BOTH THE COUNTRY PROGRAM HEAD OFFICE AND ALIGHT HEADQUARTERS. COUNTRY PROGRAMS AND HEADQUARTERS COLLABORATE CLOSELY ON DEVELOPMENT OF INTERNAL AND DONOR REPORTS EACH MONTH FOR SUBMISSION AS REQUIRED. CURRENTLY THIS APPROACH GATHERS THE APPROPRIATE AMOUNT OF INFORMATION AT EACH LEVEL WHILE ENGAGING ALL STAFF AT ALL LEVELS TO MEET CLEAR TARGETS. MANAGEMENT AND TECHNICAL STAFF REVIEW QUARTERLY REPORTS TO ENSURE THAT ACTIVITIES ARE PROCEEDING ON SCHEDULE AND THAT TARGETS ARE MET.

ALIGHT HAS ESTABLISHED AND DOCUMENTED ACCOUNTING AND ADMINISTRATIVE PROCEDURES AND POLICIES TO ENSURE ADEQUATE SYSTEMS OF INTERNAL CONTROL, SAFEGUARD THE RESOURCES OF THE ORGANIZATION, ENABLE THE PREPARATION OF ACCURATE AND TIMELY REPORTS, ENSURE RETENTION AND MAINTENANCE OF RECORDS AND ENSURE ADHERENCE TO GENERALLY ACCEPTED ACCOUNTING STANDARDS AND REGULATIONS. ALIGHT EMPLOYS THE USE OF AN ACCOUNTING SYSTEM WHICH ENABLES THE ALIGHT FINANCIAL DEPARTMENTS LOCATED AT BOTH ITS HEADQUARTER AND FIELD OFFICES TO TRACK COSTS AS RELATED TO ALL ASPECTS OF PROGRAM OPERATIONS. EXPENDITURES ARE MONITORED ON A MONTHLY BASIS AGAINST BUDGETS.
TO ENSURE APPROPRIATE CONTROL. ALIGHT IS AUDITED ANNUALBY BY A US
GOVERNMENT-APPROVED INDEPENDENT AUDIT FIRM.

ALIGHT HEADQUARTERS IS RESPONSIBLE FOR FINANCIAL REPORT CONSOLIDATION.
ALIGHT HEADQUARTERS IS ALSO RESPONSIBLE FOR TRANSFER OF FUNDS TO LOCAL
OFFICES. ALL BANK ACCOUNTS USED BY ALIGHT OFFICES ARE OPERATED UNDER A
JOINT SIGNATORY AUTHORIZATION AND THE CFO MUST APPROVE ALL NEW ACCOUNTS.
ALIGHT CURRENTLY OPERATES BANK ACCOUNTS IN ALL ITS AREAS OF OPERATION.
ALIGHT EMPLOYS THE USE OF DOCUMENTED PROCUREMENT AND ADMINISTRATIVE
POLICIES AND PROCEDURES, WHICH OUTLINE SPECIFIC PROCUREMENT PROCEDURES
AND AUTHORIZATION REQUIREMENTS, TRAVEL POLICIES AND OTHER GRANT
COMPLIANCE REQUIREMENTS. IN AS MUCH AS POSSIBLE, PROCUREMENT IS COMPLETED
IN THE FIELD, WITH FINAL APPROVAL FOR SIGNIFICANT TRANSACTIONS, AS
OUTLINED IN A DELEGATION OF AUTHORITY POLICY, BY THE CFO, AND IF
NECESSARY THE ALIGHT PRESIDENT UPON THEIR EXAMINATION OF THE REQUEST FOR
VALIDITY, SUFFICIENCY OF FUNDING AND COMPLIANCE TO REGULATIONS.

PART I, LINE 3, COLUMN (E):
REGION: EAST ASIA AND THE PACIFIC
(E) SPECIFIC TYPES OF SERVICES IN REGION: HEALTH SERVICES, EMERGENCY
RESPONSE, INFECTIOUS DISEASE PREVENTION AND MITIGATION

REGION: SUB-SAHARAN AFRICA
(E) SPECIFIC TYPES OF SERVICES IN REGION: HEALTH CARE (PRIMARY AND
REPRODUCTIVE HEALTH), INFECTIOUS DISEASE PREVENTION, WATER/SANITATION,
SHELTER, PROTECTION, INCOME GENERATION, NUTRITION AND EMERGENCY RESPONSE.
## SCHEDULE I
(Form 990)

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

Complete 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

**ALIGHT**

### Employer identification number

36-3241033

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

<table>
<thead>
<tr>
<th>1</th>
<th>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### 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>(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>
</tr>
</thead>
<tbody>
<tr>
<td>ORAM - ORGANIZATION FOR REFUGE, ASYLUM AND MIGRATION - 615 1ST AVENUE NE, SUITE 500 - MINNEAPOLIS, MN 55413</td>
<td>26-3748676</td>
<td>501(C)(3)</td>
<td>110,000.</td>
<td>0.</td>
<td>OPERATIONAL SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>QUESTSCOPE LTD</td>
<td>36-3936979</td>
<td>501(C)(3)</td>
<td>65,792.</td>
<td>0.</td>
<td>OPERATIONAL SUPPORT</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

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### 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 noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV

**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

ALIGHT USES A LAYERED APPROACH INVOLVING BOTH STAFF REVIEW ACTIVITIES,

REVIEW OF DOCUMENTATION AND REVIEW OF FINANCIAL AND PROGRAMMATIC REPORTS,

WHERE REQUIRED. SPECIFIC MONITORING REQUIREMENTS WILL DEPEND ON THE


AWARD.
<table>
<thead>
<tr>
<th>Part I Questions Regarding Compensation</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-class or charter travel</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Health or social club dues or initiation fees</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Personal services (such as maid, chauffeur, chef)</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Travel for companions</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>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 &quot;No,&quot; complete Part III to explain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compensation committee</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Written employment contract</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Independent compensation consultant</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Compensation survey or study</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Form 990 of other organizations</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Approval by the board or compensation committee</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Receive a severance payment or change-of-control payment?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b Participate in or receive payment from a supplemental nonqualified retirement plan?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>c Participate in or receive payment from an equity-based compensation arrangement?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b Any related organization?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; on line 5a or 5b, describe in Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b Any related organization?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; on line 6a or 6b, describe in Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; describe in Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; describe in Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 If &quot;Yes&quot; on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LHA 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).

**Note:** Do not list any individuals that aren’t listed on Form 990, Part VII.

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 and/or 1099-NEC 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>(1) SARAH HARTMAN</td>
<td>(i) 249,125.</td>
<td>0.</td>
<td>0.</td>
<td>12,950.</td>
<td>30,328.</td>
</tr>
<tr>
<td>CO &amp; EXPERIENCE OFFICER</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) BERNAD OCHIENG OJWANG</td>
<td>(i) 176,939.</td>
<td>0.</td>
<td>79,035.</td>
<td>7,980.</td>
<td>25,178.</td>
</tr>
<tr>
<td>COUNTRY DIRECTOR</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(3) MARK WHITE</td>
<td>(i) 221,030.</td>
<td>0.</td>
<td>0.</td>
<td>13,276.</td>
<td>26,885.</td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) ADAN A. ADAR</td>
<td>(i) 187,839.</td>
<td>0.</td>
<td>8,849.</td>
<td>8,330.</td>
<td>24,443.</td>
</tr>
<tr>
<td>COUNTRY DIRECTOR</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) JEREMY K. HALDEMAN</td>
<td>(i) 156,370.</td>
<td>0.</td>
<td>0.</td>
<td>9,621.</td>
<td>27,099.</td>
</tr>
<tr>
<td>DIR. OF GOV’T AFFAIRS &amp; ADVOC.</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) RANDHIR SINGH</td>
<td>(i) 145,776.</td>
<td>0.</td>
<td>0.</td>
<td>7,074.</td>
<td>12,628.</td>
</tr>
<tr>
<td>COUNTRY DIRECTOR</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
PART I, LINE 1A:

FOR THE COUNTRY DIRECTORS LISTED ON THE FORM 990, PART VII THE EMPLOYMENT CONTRACTS GENERALLY INCLUDE A HOUSING ALLOWANCE AND PROVISION FOR ANNUAL HOME LEAVE ROUND TRIP TRANSPORTATION FOR THE EMPLOYEE AND IMMEDIATE FAMILY.

THIS BENEFIT HAS BEEN INCLUDED IN THE EMPLOYEES TAXABLE INCOME.
### Noncash Contributions

**Part I: Types of Property**

<table>
<thead>
<tr>
<th></th>
<th>Check if applicable</th>
<th>Number of contributions or items contributed</th>
<th>Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td>X</td>
<td>51</td>
<td>184,677 FMV</td>
</tr>
<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td>X</td>
<td>51</td>
<td>184,677 FMV</td>
</tr>
<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<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>X</td>
<td>51</td>
<td>184,677 FMV</td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Archaeological artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other</td>
<td>( )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other</td>
<td>( )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other</td>
<td>( )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other</td>
<td>( )</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**

- Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement: **29**
- **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?
  - **Yes**
  - **No**

**Part II: Other Information**

- **31** Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
  - **Yes**
  - **No**

- **32a** Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
  - **Yes**
  - **No**

**LHA**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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 AMOUNT REPORTED IN COLUMN(B) REPRESENTS THE NUMBER OF CONTRIBUTIONS.
**FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:**

- SUDAN
- UGANDA
- RWANDA
- PAKISTAN
- THAILAND
- BURMA
- KENYA
- SOUTH SUDAN
- EL SALVADOR
- SOMALIA
- COLOMBIA
- MEXICO
- POLAND
- UKRAINE

**FORM 990, PART VI, SECTION B, LINE 11B:**

The Form 990 was prepared by the outside accountants and reviewed and approved by management. The Finance/Audit Committee reviewed and approved the 990 prior to sending a final electronic copy of the return to all Board members prior to being filed with the IRS.

**FORM 990, PART VI, SECTION B, LINE 12C:**

Any person engaged in a close personal relation as defined by the Alight Conflict of Interest Policy is required to disclose such relation as it arises, if it has the potential to influence decisions around hiring, promotions, education, access to material, medicine, healthcare, money or other financial resources or any other goods or services provided by Alight. Employees are prohibited from providing any assistance or service through any Alight program, such as access to materials, medicine, healthcare, money or other financial resources or any other goods or services provided by Alight, to anyone with whom they have a close personal relationship. Employees are also prohibited from supervising and participating in any hiring, promotion, and evaluation decisions, either directly or indirectly that may affect an individual with whom they have a close personal relationship. Employees who believe this policy is being

**Employer identification number**

36-3241033
ALEIGHT

VIOLATED ARE REQUIRED TO REPORT THE CONCERN. PERSONAL GAIN MAY RESULT NOT
ONLY IN CASES WHERE AN EMPLOYEE OR RELATIVE HAS A SIGNIFICANT OWNERSHIP IN
A FIRM WITH WHICH THE ALIGHT DOES BUSINESS BUT ALSO WHEN AN EMPLOYEE OR
RELATIVE RECEIVES ANY KICKBACK, BRIBE, SUBSTANTIAL GIFT, OR SPECIAL
CONSIDERATION AS A RESULT OF ANY TRANSACTION OR BUSINESS DEALINGS INVOLVING
THE ALIGHT. THE ACTIVITIES ARE STRICTLY PROHIBITED BY ALIGHT. VIOLATIONS
WILL BE CAUSE FOR IMMEDIATE TERMINATION AND, IF WARRANTED, LEGAL ACTION.

THE ORGANIZATION PERFORMS ANNUAL EXTERNAL AUDITS AND REGULAR INTERNAL
AUDITS TO EVALUATE ITS INTERNAL CONTROLS AND DETECT ANY CONFLICT OF
INTEREST. ALIGHT ALSO HAS A CONFIDENTIAL REPORTING MECHANISM FOR REPORTING
VIOLATIONS OF ITS POLICIES AND A WHISTLEBLOWER PROTECTION POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

IN DETERMINING THE PRESIDENT/CEO'S SALARY, THE COMPENSATION COMMITTEE OF
THE BOARD CONSIDERS MARKET SURVEY DATA OF COMPARABLE POSITIONS AND THE
PRESIDENT'S PERFORMANCE. THE MARKET SURVEY DATA INCLUDES INFORMATION ON
SALARIES OF CEOs OF COMPARABLE INSTITUTIONS, AS REPORTED ON CHARITY
NAVIGATOR AND REPORTED IN THE ANNUAL INSIDE NGO SURVEY WHICH INCLUDES DATA
ON SALARIES OF POSITIONS IN INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS IN
THE HUMANITARIAN RELIEF AND DEVELOPMENT SECTOR. A FORMAL PERFORMANCE
EVALUATION IS ALSO CONDUCTED ANNUALLY. ALL DECISIONS ARE DOCUMENTED IN THE
BOARD MINUTES. THE LAST COMPENSATION REVIEW TOOK PLACE IN OCTOBER 2021.

A SALARY REVIEW OF KEY POSITIONS IS CONDUCTED ANNUALLY TO DETERMINE MARKET
COMPETIVENESS AND INTERNAL EQUITY CONCERNS. MARKET SURVEY DATA IS GATHERED
FROM VARIOUS SOURCES, DEPENDING UPON THE POSITION, BUT THE PRIMARY SURVEY
COMPARISON DATA USED IS FROM THE ANNUAL INSIDE NGO SURVEY OF POSITIONS IN
INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS IN THE HUMANITARIAN RELIEF AND
DEVELOPMENT SECTOR. THE POSITIONS ARE ALSO REVIEWED BY HUMAN RESOURCES TO DETERMINE IF ANY INTERNAL INEQUITIES EXIST AMONG POSITIONS. THE MARKET AND INTERNAL EQUITY DATA IS PRESENTED TO THE INDEPENDENT BOARD WHO MAKES THE FINAL DECISION ON COMPENSATION BASED ON THIS DATA PRESENTED TO THEM AND THE INDIVIDUAL PERFORMANCE OF THE EMPLOYEE. PERFORMANCE EVALUATIONS ARE CONDUCTED ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. THE FINANCIAL STATEMENTS ARE PUBLISHED ONLINE AS PART OF OUR ANNUAL REPORT AND ARE AVAILABLE UPON REQUEST.
### Part I: Identification of Disregarded Entities

<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>
</tr>
</thead>
<tbody>
<tr>
<td>QUESTSCOPE, LTD. - 36-3936979</td>
<td>1325 QUINCY STREET, NE, SUITE A1</td>
<td>HUMANITARIAN EDUCATIONAL PROGRAMS</td>
<td>ILLINOIS</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>MINNEAPOLIS, MN 55413</td>
<td>QUESTSCOPE - 98-1069488</td>
<td>ILLINOIS</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>71-75 SHELTON STREET LONDON, UNITED KINGDOM WC2H 9JQ</td>
<td>QUESTSCOPE - 98-1069488</td>
<td>HUMANITARIAN EDUCATIONAL PROGRAMS</td>
<td>UNITED KINGDOM</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Part II: Identification of Related Tax-Exempt Organizations

<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>
</tr>
</thead>
<tbody>
<tr>
<td>QUESTSCOPE, LTD. - 36-3936979</td>
<td>1325 QUINCY STREET, NE, SUITE A1</td>
<td>HUMANITARIAN EDUCATIONAL PROGRAMS</td>
<td>ILLINOIS</td>
<td>501(C)(3)</td>
<td>LINE 7</td>
<td>ALIGHT</td>
</tr>
<tr>
<td>ORAM - ORGANIZATION FOR REFUGEE ASYLUM &amp; MIGRATION - 26-3748676, 1325 QUINCY STREET, NE, SUITE A1, MINNEAPOLIS, MN 55413</td>
<td>QUESTSCOPE - 98-1069488</td>
<td>HUMANITARIAN EDUCATIONAL SUPPORT</td>
<td>CALIFORNIA</td>
<td>501(C)(3)</td>
<td>LINE 7</td>
<td>ALIGHT</td>
</tr>
<tr>
<td>EASTERN CONGO INITIATIVE (ECI) - 45-4103655</td>
<td>1325 QUINCY STREET, NE, SUITE A1</td>
<td>HUMANITARIAN EDUCATIONAL AND SUPPORT</td>
<td>MINNESOTA</td>
<td>501(C)(3)</td>
<td>LINE 7</td>
<td>ALIGHT</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### 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>KUJA KUJA, INC. - 85-0668285</td>
<td></td>
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<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>1325 QUINCY STREET, NE, SUITE A1</td>
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<tr>
<td>MINNEAPOLIS, MN 55413</td>
<td>SOCIAL ENTERPRISE</td>
<td>DE</td>
<td>ALIGHT</td>
<td>C CORP</td>
<td>400,031</td>
<td>822,067</td>
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<td>Yes</td>
<td>No</td>
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</tbody>
</table>

### 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>
</tr>
</thead>
<tbody>
<tr>
<td>KUJA KUJA, INC. - 85-0668285</td>
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<tr>
<td>1325 QUINCY STREET, NE, SUITE A1</td>
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<tr>
<td>MINNEAPOLIS, MN 55413</td>
<td>SOCIAL ENTERPRISE</td>
<td>DE</td>
<td>ALIGHT</td>
<td>C CORP</td>
<td>400,031</td>
<td>822,067</td>
<td>82.74%</td>
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<td>Yes</td>
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</tbody>
</table>

Schedule R (Form 990) 2021  ALIGHT  36-3241033  Page 2
**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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>Transaction type (a-s)</th>
<th>Amount involved</th>
<th>Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) QUESTSCOPE, LTD.</td>
<td>A 11,624.4% INTEREST ON LOAN</td>
<td></td>
</tr>
<tr>
<td>(b) QUESTSCOPE, LTD.</td>
<td>B 65,792. BASED ON OPERATING BUDGET</td>
<td></td>
</tr>
<tr>
<td>(c) QUESTSCOPE, LTD.</td>
<td>D 500,000. LOAN VALUE</td>
<td></td>
</tr>
<tr>
<td>(d) QUESTSCOPE, LTD.</td>
<td>L 66,995. FMV</td>
<td></td>
</tr>
<tr>
<td>(e) QUESTSCOPE, LTD.</td>
<td>N 0. FMV</td>
<td></td>
</tr>
<tr>
<td>(f) QUESTSCOPE, LTD.</td>
<td>Q 130,055. ACTUAL EXPENSE</td>
<td></td>
</tr>
</tbody>
</table>
### Part V Continuation of Transactions With Related Organizations

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(7) QUESTSCOPE Q</td>
<td>34,425.</td>
<td>ACTUAL EXPENSE</td>
<td></td>
</tr>
<tr>
<td>(8) ORAM B</td>
<td>110,000.</td>
<td>BASED ON OPERATING BUDGET</td>
<td></td>
</tr>
<tr>
<td>(9) ORAM Q</td>
<td>111,877.</td>
<td>ACTUAL EXPENSE</td>
<td></td>
</tr>
<tr>
<td>(10) ORAM L</td>
<td>21,127.</td>
<td>ACTUAL EXPENSE</td>
<td></td>
</tr>
<tr>
<td>(11) ORAM L</td>
<td>0.</td>
<td>FMV</td>
<td></td>
</tr>
<tr>
<td>(12) ECI L</td>
<td>37,273.</td>
<td>ACTUAL EXPENSE</td>
<td></td>
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</tbody>
</table>
### 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 sec. 501(c)(3) orgs.?</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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Schedule R (Form 990) 2021
Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.