** PUBLIC DISCLOSURE COPY **

Form **991**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. Inspection

Department of the Treasury Internal Revenue Service

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

Open to Public

A F	or the	2021 calendar year, or tax year beginning and en	ding		
B c	heck if pplicable	GLOBAL WAR ON TERRORISM MEMORIAL		D Employer identific	cation number
	Addres change	FOUNDATION			
	Name change	Doing business as		47-37004	89
	Initial return		om/suite	E Telephone numbe	r
	Final return/	1300 PENNSYLVANIA AVE NW 70	0 0	910-391-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,887,714.
X	Amend return	washington, DC 20004		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer: MICHAEL R. RODRIGOEZ	3	for subordinates	? Yes X No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		mpt status: X 501(c)(3) 501(c)()◀ (insert no.) 4947(a)(1) or [527	If "No," attach a	list. See instructions
		e: ► WWW.GWOTMEMORIALFOUNDATION.ORG		H(c) Group exemptio	
K F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2015 $_{ m extsf{N}}$	f 1 State of legal domicile; $f DE$
Pa		Summary			
ø	1 1	Briefly describe the organization's mission or most significant activities: ${ t BUILD1}$	ING A	NATIONAL M	EMORIAL TO
Governance]	HONOR ALL WHO HAVE SERVED IN THE GLOBAL WA	AR ON	TERRORISM.	
ern	2 (Check this box $lacktriangle$ if the organization discontinued its operations or disposed	d of more	1 1	_
Š		Number of voting members of the governing body (Part VI, line 1a)		3	8
∞ ∞		Number of independent voting members of the governing body (Part VI, line 1b) $$			8
es	5	Fotal number of individuals employed in calendar year 2021 (Part V, line 2a)		5	2
Activities &		Total number of volunteers (estimate if necessary)			60
Act		Fotal unrelated business revenue from Part VIII, column (C), line 12			0.
	1 d	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		236,314.	1,887,253.
Jen /		Program service revenue (Part VIII, line 2g)		0.	0.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	461.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		236,314.	1,887,714.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		25,575.	145,188.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	;····	0.	0.
х		Fotal fundraising expenses (Part IX, column (D), line 25) 190,822		226 000	E16 772
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		226,999. 252,574.	
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		•	661,960.
_ s	19	Revenue less expenses. Subtract line 18 from line 12		-16,260.	
ts o		5 1 1 (D 1 V II 10)		ginning of Current Year 33,746.	End of Year 1,290,494.
Sse Bala	20	Fotal assets (Part X, line 16)		9,380.	40,374.
Net Assets or Fund Balances	21	Fotal liabilities (Part X, line 26)		24,366.	1,250,120.
	22 rt	Net assets or fund balances. Subtract line 21 from line 20		24,300.	1,230,120.
		ties of perjury, I declare that I have examined this return, including accompanying schedules at	nd statem	ents, and to the hest of m	v knowledge and helief it is
	-	, and complete. Declaration of preparer (other than officer) is based on all information of which			y Kilowiougo alia bolloi, it lo
,	1	Mark and R Kanna Augus	· propuror		0, 2022
Sign	,	Signature of officer		Date	,
Her		MICHAEL R. RODRIGUEZ, CEO			
	~	Type or print name and title			
		Print/Type preparer's name Preparer's signature	10	Date Check	PTIN
Paid		RICHARD E. DYNOSKE RICHARD E. DYNOSK	KE	if self-employe	P00095538
	- +	Firm's name GROSSMAN YANAK & FORD LLP			25-1638525
-		Firm's address THREE GATEWAY CTR STE 1800		-	
	·	PITTSBURGH, PA 15222		Phone no. (4	12)338-9300
May	the IR	S discuss this return with the preparer shown above? See instructions		1 12112 1121 1	X Yes No

Pai	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:
	THE GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION LEADS THE EFFORT TO
	PLAN, FUND, AND BUILD THE NATIONAL GWOT MEMORIAL ON THE NATIONAL MALL,
	IN WASHINGTON, D.C., ON A SITE BEFITTING THE HISTORICAL SIGNIFICANCE
	OF SERVICE IN THIS WAR.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X 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 \$ 347,483 • including grants of \$) (Revenue \$
	ORGANIZING AND COORDINATING EFFORTS TO BUILD A NATIONAL GWOT MEMORIAL
	IN WASHINGTON D.C. RELATED TO SITE SELECTION, DESIGN, HISTORICAL
	SIGNIFICANCE, SET-UP FOR ARCHITECTURAL ASSESSMENT, APPROVAL PROCESSES,
	COMMUNICATIONS AND OUT REACH TO INTERESTED SUPPORTERS, AS WELL AS
	COORDINATION WITH FEDERAL, STATE AND LOCAL AUTHORITIES AND SUPPORTING
	VETERAN ORGANIZATIONS
415	(Code:) (Expenses \$ 43,433 • including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$43,433. including grants of \$) (Revenue \$) THE GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION WAS ESTABLISHED TO BE
	A LASTING TRIBUTE TO THE COURAGE AND SACRIFICE OF ALL WHO HAVE SERVED,
	AND ESPECIALLY THOSE WHO HAVE MADE THE ULTIMATE SACRIFICE, IN OUR
	NATION'S LONGEST ONGOING CONFLICT, WHILE INSPIRING ALL AMERICANS TO
	STAND UNITED BEHIND THOSE WHO CONTINUE TO SERVE. THE FOUNDATION WILL
	HAVE CONTINUING INNOVATIVE EDUCATIONAL PROGRAMING, AND SUPPORTIVE
	RESEARCH AND COMMUNICATION EFFORTS TO ADVANCE THE UNDERSTANDING OF THE
	IMPACT OF THE CONFLICT AND FOSTER RECOGNITION FOR THE SERVICE AND
	SACRIFICE OF NOT ONLY MEMBERS OF THE MILITARY BUT ALSO THE COUNTLESS
	CIVILIANS, FAMILY MEMBERS, AND OTHERS IN THE FIGHT TO KEEP OUR COUNTRY
	SAFE.
	<u></u>
4c	(Code:) (Expenses \$) (Revenue \$)
40	(Code:) (Expenses \$
4 - '	Other pregram convices (Describe on Schodule O.)
40	Other program services (Describe on Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 390,916.
40	Total program service expenses ► 390,916. Form 990 (2021)
	F0III 990 (2021)

Page 3

Form 990 (2021) FOUNDATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	- 110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		Х	
L	Schedule D, Parts XI and XII	12a	21	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		 ^``
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''		+
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
.5	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_00		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
_			_	

Page 4

Form 990 (2021) FOUNDATION
Part IV Checklist of Required Schedules (continued)

22 X 23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X. Countin A), in 22 if Virey. "Complete Schedule J. Part a In 8. 4, or 5, about compensation of the organization's current and former Officers, directors, returbed, say employees, and highest compensated employees? If Virey, "Complete Schedule J. Part II N. 20 to the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after Documber 31, 2002? If Virey, "answer lines 24b through 24d and complete Schedule J. Part II N. 20 to the organization invest any proceeds of fax exempt bonds beyond a temporary period exception?" 24b Did the organization maintain an excess account other than a refunding excross of any tax-exempt bonds? 35c Section 301(A), 301(A), and 301(A), and 301(A)(B) organizations. Did the organization invest are the rangeged in an excess benefit transaction with a disqualified person dump the year? If Virey, "complete Schedule I, Part II I I I I I I I I I I I I I I I I I				Yes	No
23 Did the organization answer "Ves" to Part WI, Section A, Ina 3, 4, or 5, about compensation of the organization scurrent and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, "Part IV Section II Section	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is and the vest tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was sessued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is. If No." go to line 25a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24c b Did the organization invest any an escrow account other than a relunding secrow at any time during the year to defease any tax-exempt bonds? 45d b Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section \$01(x)3, 501(x)4), and \$01(x)2) organizations. Did the organization engage in an excess benefit transaction with a discussified person during the year? 25a Issuer in the organization are seen reported on any of the organization spot of 900-902.27 If "Yes," complete Schedule L, Part I. 25b Is the organization should be reported on any of the organization spot of 900-902.27 If "Yes," complete Schedule L, Part I. 25c Is Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled earthy of family member of any of these persons? If "Yes," complete Schedule L, Part IV. 25b Is A aminy in the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or addition, and exceptioning, an employee thereof or papiciable lines are personal? If "Yes," complete Schedule L, Part IV. 25c Is A assistance of applicable line in the organization spece			22		X
Schedule / Was a bid the organization have a tax-everant bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," anover lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23				
24a Dt the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a b Dt the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a Dt Dt Dt the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Dt					₩
stated day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If" No.* go to line 25a b Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 50(16)8, 001(04), and 501(128) organizations. Did the organization angegie in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization organization or the organization shall be organization between the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization sprior Forms 990 or 990-EZ7 If "Yes," complete Schedule L, Part II b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creation or founder, substantial contributor, or 35% controlled artity of mailly member of any of these persons? If "Yes," complete Schedule L, Part II 26	~4	Schedule J	23		
Schedule K. If "No." go to line 25a bit Did the organization invest any proceeds of tax exampt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exampt bonds? 24d	24				
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization maintain an ecrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d			24a		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 258 Section 501(3), 501(4), and					
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 258 Section 501(3), 501(4), and			24c		
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? if "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? if "Yes," complete Schedule L, Part III 27 X 28 Was the organization provide thereof) or family member of any of these persons? if "Yes," complete Schedule L, Part IV 28 X 29 A Current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? if "Yes," complete Schedule L, Part IV 28 X 29 Did the organization requires one or more individuals and/or organization selectored in line 28a or 28b7ll "Yes," complete Schedule L, Part IV 28 X X 30 Did the organization requires one or more individuals and/or organizations? if "Yes," complete Schedule M 29 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? if "Yes," complete Schedule N, Part I 31 X 32 Did the organization related to any tax-exempt or taxable entity? if "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X X 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? if "Yes," complete Schedule R, Part V, line 2 X X 34 Did the organization related to any tax-exempt or taxable entity? if "Yes," complet		d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 890 E2? If "Yes," complete Schedule L, Part I	25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 55% controlled entity formity member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28a X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X 31 Did the organization in equal to the properties Schedule M 29 X 32 Did the organization in equal to the properties Schedule M 29 X 33 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X 34 Was the organization have a controlled entity disregarded as separate from the organization with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or			25a		X
Schedule L, Part I 25 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "'es," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28a X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-32 if "Yes," complete Schedule R, Part II, III, or IV, and Part V, line I 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35a X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chari					
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IIV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28		Cabadada I David	25b		х
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 20 bit the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 Ba X 29 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 Ba X 29 Did the organization individual described in line 28a? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I. 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.77013? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 35 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% o	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
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instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations to did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 fliers are required to complete Schedule O 10 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable C Did the organization or organization ormal value or reportable payments to vendo			27		
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			10	х	

FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No			
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	2a 2	2b		X			
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				Х			
			3a		Α.			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b					
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial		4a		х			
h	If "Yes," enter the name of the foreign country	accounty?	-1 a					
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FRAR)						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
			6a	Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribut							
	were not tax deductible?		6b	X				
7	Organizations that may receive deductible contributions under section 170(c).							
а	$ Did the organization \ receive \ a \ payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ an \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ before \ contribution \ and \ partly \ for \ goods \ and \ set \ contribution \ and \ partly \ for \ goods \ and \ set \ contribution \ and \ partly \ for \ goods \ and \ set \ for \ goods \ goods \ for \ goods \ $	vices provided to the payor?	7a	Х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		Х			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required						
	to file Form 8282?		7с		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year, pay premiums, directly or indirectly, on a personal benefit contribution of the year.		7f	-	Х			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g					
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes,		7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		8					
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		-					
а	Did the agree of a constitution and a great scale of the state of the		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:							
а	Initiation fees and capital contributions included on Part VIII, line 12	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:							
а	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						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l .	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	-					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		10-					
а	Is the organization licensed to issue qualified health plans in more than one state?		13a					
h	Note: See the instructions for additional information the organization must report on Schedule O. 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						
С	Enter the amount of reserves on hand	13c						
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
	excess parachute payment(s) during the year?		15		Х			
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х			
	If "Yes," complete Form 4720, Schedule O.							
17	$\textbf{Section 501(c)(21) organizations.} \ Did the trust, any disqualified person, or mine operator engage in the trust of the trust of$	any						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17					
	If "Yes," complete Form 6069.							

Form 990 (2021)

47-3700489

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	3		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	3		
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?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Division (min decision Broqueste information about policies fiet required by the internal fiet shall be dead.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.5		
·	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.0.0		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	tion C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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	le only	n avail	ahla
10	for public inspection. Indicate how you made these available. Check all that apply.	, o orny	, avail	abic
	Own website Another's website X Upon request Other (explain on Schedule O)			
10	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial	
19	statements available to the public during the tax year.	iu illiä	iicidi	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	MICHAEL R. RODRIGUEZ - 910-391-0565			
	1300 PENNSYLVANIA AVENUE, NW SUITE 700, WASHINTON, DC 20004			

FOUNDATION

47-3700489

Page 7

Form 990 (2021) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a 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 the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organ						npei	nsat	ted any current officer, o		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle	not check more than one unless person is both an er and a director/trustee)			h an	compensation	compensation	amount of
	week				recio	or/trus	lee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	or d	99			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	nstee.	trust		e e	ubeu		1099-NEC)	1099-NEG)	organization and related
	below	lual tr	tional		nploy	yee yee	L	1033-1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MARINA JACKMAN	40.00	_	_		_					
CEO		Х		Х				116,282.	0.	0.
(2) THEODORE C. SKOKOS	2.00									
CHAIRMAN OF THE BOARD		Х		Х				0.	0.	0.
(3) KENNETH A. HERSH	2.00									
VICE-CHAIRMAN OF THE BOARD		Х		Х				0.	0.	0.
(4) RYE BARCOTT	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) CECILIA DEYO	2.00	l		l						
TREASURER	1	Х		Х				0.	0.	0.
(6) EDWIN WAHLEN	1.00	l								
BOARD MEMBER	1	Х						0.	0.	0.
(7) WILLIAM KRAUS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) MICHAEL R. RODRIGUEZ	1.00									
BOARD MEMBER		Х						0.	0.	0.
		1								
		-								
		1								
		1								
		1								
		1								

Page 8

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)			
(A)	(B) Average				C)			(D)	(E)			F)
Name and title	hours per week (list any	box, offic	not c , unle	heck ss pe nd a d	more rson	than	h an	from	Reportable compensation from related	on d	amoi ot	nated unt of her
	hours for related	tee or directo	ustee			ensated		the organization (W-2/1099-MISC/	organization (W-2/1099-MIS 1099-NEC)	SC/	fron	ensation n the ization
	organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-NEC)				elated zations
								115 000				
1b Subtotal c Total from continuation sheets to Part V	I, Section A							116,282.		0.		0.
d Total (add lines 1b and 1c) Total number of individuals (including but n								116,282. ecceived more than \$100	,000 of reportab	0. ole		0. 1
compensation from the organization											Y	es No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual										3	Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edul	e J t	for such individual			4	Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," commended in the section B. Independent Contractors	•				,			ted organization or indiv	dual for services	,	5	Х
Complete this table for your five highest co the organization. Report compensation for										npens	ation fro	m
(A) Name and business			INC					(B) Description of s		С	(C) ompens	ation
2 Total number of independent contractors (i \$100,000 of compensation from the organi		ot lir	mite	d to	tho	se li:	stec	d above) who received n	nore than			
Too, ooo or compensation nom the organi	Lation					-					- 00	0 (222.4)

47-3700489 FOUNDATION Page 9 Form 990 (2021) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1,887,253. similar amounts not included above 1f 1g \$ g Noncash contributions included in lines 1a-1f 1,887,253. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses _____ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a CREDIT CARD REWARDS 900099 461. 461. b

461.

0.

1,887,714.

461

d All other revenue

e Total. Add lines 11a-11d

Total revenue. See instructions

Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respons	se or note to anv line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	134,615.	53,846.	53,846.	26,923.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10 572	4 000	4 222	0 115
10	Payroll taxes	10,573.	4,229.	4,229.	2,115.
11	Fees for services (nonemployees):				
a	<u> </u>	22 407	17 005	4 400	
b	Legal	22,407.	17,925.	4,482.	
	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)				
10		23,108.	23,108.		
12 13	Advertising and promotion Office expenses	7,839.	6,271.	1,568.	
14	Information technology	38,087.	30,472.	7,615.	
15	Royalties	23,007	20,2,20	., , , , ,	
16	Occupancy				
17	Travel	41,303.	41,303.		
18	Payments of travel or entertainment expenses	,	,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	26,126.			26,126.
20	Interest	-			-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	15,523.	12,419.	3,104.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	105	105		
а	PROFESSIONAL FEES	195,830.	195,830.	0.	0.
b	POSTAGE AND MAILING	129,860.	0.	0.	129,860.
С	MISCELLANEOUS	6,891.	5,513.	1,378.	0.
d	MEALS & ENTERTAINMENT	5,798.	0.	0.	5,798.
е	All other expenses	4,000.	200 016	4,000.	100 000
25	Total functional expenses. Add lines 1 through 24e	661,960.	390,916.	80,222.	190,822.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2021)
12201	N 12-N9-21				

Form 990 (2021)
Part X Balance Sheet

Pa	π λ	Balance Sheet	
		Check if Schedule O contains a response or note to any line in this	
			(A) (B) Beginning of year End of year
	1	Cash - non-interest-bearing	18,746. 1 1,280,494
	2	Savings and temporary cash investments	2
	3	Pledges and grants receivable, net	
	4	Accounts receivable, net	
	5	Loans and other receivables from any current or former officer, dire	
		trustee, key employee, creator or founder, substantial contributor,	or 35%
		controlled entity or family member of any of these persons	5
	6	Loans and other receivables from other disqualified persons (as de	fined
		under section 4958(f)(1)), and persons described in section 4958(c)	(3)(B) 6
ţ	7	Notes and loans receivable, net	7
Assets	8	Inventories for sale or use	
Ä	9	Prepaid expenses and deferred charges	
	10a	Land, buildings, and equipment: cost or other	
		basis. Complete Part VI of Schedule D 10a	
	b	Less: accumulated depreciation 10b	10c
	11	Investments - publicly traded securities	11
	12	Investments - other securities. See Part IV, line 11	12
	13	Investments - program-related. See Part IV, line 11	13
	14	Intangible assets	14
	15	Other assets. See Part IV, line 11	15
	16	Total assets. Add lines 1 through 15 (must equal line 33)	33,746. ₁₆ 1,290,494
	17	Accounts payable and accrued expenses	9,380. 17 40,374
	18	Grants payable	18
	19	Deferred revenue	
	20	Tax-exempt bond liabilities	
	21	Escrow or custodial account liability. Complete Part IV of Schedule	D
Se	22	Loans and other payables to any current or former officer, director,	
Ě		trustee, key employee, creator or founder, substantial contributor,	or 35%
Liabilities		controlled entity or family member of any of these persons	22
_	23	Secured mortgages and notes payable to unrelated third parties	23
	24	Unsecured notes and loans payable to unrelated third parties	24
	25	Other liabilities (including federal income tax, payables to related the	ird
		parties, and other liabilities not included on lines 17-24). Complete	Part X
		of Schedule D	25
	26	Total liabilities. Add lines 17 through 25	9,380. 26 40,374
w		Organizations that follow FASB ASC 958, check here	
Š		and complete lines 27, 28, 32, and 33.	
<u>la</u>	27	Net assets without donor restrictions	24,366. 27 1,250,120
ĕ	28	Net assets with donor restrictions	
Ĕ		Organizations that do not follow FASB ASC 958, check here	· 🔲 📗
Ē		and complete lines 29 through 33.	
ts o	29	Capital stock or trust principal, or current funds	29
SSE.	30	Paid-in or capital surplus, or land, building, or equipment fund	30
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other fund	
Š	32	Total net assets or fund balances	24,366. 32 1,250,120
	33	Total liabilities and net assets/fund balances	

Form **990** (2021)

GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION

Form 990 (2021) FOUNDATION 47-3700489 Page 12

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,88	<u> 37,7</u>	14.
2	Total expenses (must equal Part IX, column (A), line 25)	2	66	51,9	60.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,22		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-	24,3	66.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,2	<u>50,1</u>	20.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," 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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			1	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Open to Public Inspection

GLOBAL WAR ON TERRORISM MEMORIAL **Employer identification number** Name of the organization FOUNDATION 47-3700489 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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. 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. 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. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar 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.")						
2	Tax revenues levied for the organ-						
	ization'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						
	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.						
_	ction B. Total Support			•		•	
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4		, ,	, ,	, ,	<u> </u>	.,
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
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						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for the	•	,				
	organization, check this box and stop						>
Sed	ction C. Computation of Publ	ic Support Pe	rcentage				Í
14	Public support percentage for 2021 (I	ine 6, column (f), o	divided by line 11,	column (f))		14	%
	Public support percentage from 2020					15	%
	33 1/3% support test - 2021. If the d					more, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	n			▶□
b	33 1/3% support test - 2020. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances to	st. The organizati	on qualifies as a p	ublicly supported	organization		>
b	10% -facts-and-circumstances tes	•		, ,,	•		
	more, and if the organization meets the						
	organization meets the facts-and-circle	umstances test. T	he organization qu	ualifies as a public	ly supported organ	nization	>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	ıs ▶

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.)

Se	ction A. Public Support	ciow, picase comp	note i art ii.j				
	endar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	,	,	,	,	,	
	membership fees received. (Do not						
	include any "unusual grants.")	1103028.	122,868.	290,709.	236,314.	1887253.	3640172.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		,	,	,		
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1103028.	122,868.	290,709.	236,314.	1887253.	3640172.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						3640172.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	1103028.	(b) 2018 122,868.	(c) 2019 290, 709.	(d) 2020 236,314.	1887253.	3640172.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		-		-		
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
,	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	1103028.	122,868.	290,709.	236,314.	1887253.	3640172.
14	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organizati	ion,
	check this box and stop here						
Se	ction C. Computation of Publi	ic Support Per	rcentage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	100.00 %
	Public support percentage from 2020					16	100.00 %
	ction D. Computation of Inves						
17	Investment income percentage for 20	21 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	.00 %
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the					3 1/3%, and line 1	
	more than 33 1/3%, check this box as						▶ X
t	33 1/3% support tests - 2020. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization						
	TITY OLD TOUR LIGHT OF THE OF		DUA ULI III E 14. 198	a. OL 1310. GHEGK II.	אום איטע מווע אבר וווף	111111111111111111111111111111111111111	

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.)

		Vaa	No
		Yes	NO
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	-r a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	O		
	9a		
	9b		
	9с		
	10a		
	10h		
dulo	10b A (Forr	n 000	2021
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	t IV Supporting Organizations (continued)	0010	у га	ige 3
	tri capporting organizations (continuea)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		103	140
	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?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	11.5		
•	detail in Part VI .	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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			
0	supported organizations played in this regard.	3		
	tion 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 yea(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 in	istructioi		NI -
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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	20		
h	that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2a		
D	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
о a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
~	J 1.			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION

Schedule A (Form 990) 2021

47-3700489 Page 6

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	1	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	anization (see	
	instructions).				

Schedule A (Form 990) 2021

47-370<u>0489 Page 7</u>

Sche	Schedule A (Form 990) 2021 FOUNDATION 47-3700489 Page 7					
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ued)		
Sect	ion D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported				
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ıs	3		
4	Amounts paid to acquire exempt-use assets			4		
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
_6	Other distributions (describe in Part VI). See instructions.			6		
_ 7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive	Э			
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	ns	(iii) Distributable Amount for 2021	
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
c	From 2018					
d	From 2019					
е	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2021 distributable amount					
i_	Carryover from 2016 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
С	Remainder. Subtract lines 4a and 4b from line 4.					
5	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.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
a	Excess from 2017					
b	Excess from 2018					
c	Excess from 2019					
d	Excess from 2020					
е	Excess from 2021					

Schedule A (Form 990) 2021

GLOBAL WAR ON TERRORISM MEMORIAL 47-3700489 Page 8 FOUNDATION Schedule A (Form 990) 2021 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 B, Part VI 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.)

132028 01-04-22 Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Name of the organization

GLOBAL WAR ON TERRORISM MEMORIAL

FOUNDATION

Employer identification number

47-3700489

Organization type (check one):						
Filers of:	Section:					
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					
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) a contributor, during	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 \rightarrow \frac{1}{2}						
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).						

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Name of organization
GLOBAL WAR ON TERRORISM MEMORIAL
FOUNDATION

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		_ \$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		- \$\$9,024.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	Name, audress, and ZiF + 4	5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		- \$\$5,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		- \$\$5,000.	Person X Payroll		

Name of organization
GLOBAL WAR ON TERRORISM MEMORIAL
FOUNDATION

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
7			Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8			Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9			Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
10			Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash Complete Part II for noncash contributions.)		

Name of organization
GLOBAL WAR ON TERRORISM MEMORIAL
FOUNDATION

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Schedule B (Form 990) (2021) Name of organization Employer identification number GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION 47-3700489 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

GLOBAL WAR ON TERRORISM MEMORIAL Name of the organization

FOUNDATION

Employer identification number 47-3700489

Pa	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		s or Accounts. Complete if the
	organization answered Tes on Form 556, Fart IV, iii	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		
Pa			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ition or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that describes the
Do	organization's accounting for conservation easements. t III Organizations Maintaining Collections or	f Art Historical Tracquires or C	Other Similar Assets
Ра	till Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form		Other Sillinar Assets.
10	If the organization elected, as permitted under FASB ASC 95		and balance sheet works
Id	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its finar	,	'
h	If the organization elected, as permitted under FASB ASC 95		
b	art, historical treasures, or other similar assets held for public		
		exhibition, education, or research in full	inerance of public service,
	provide the following amounts relating to these items:		*
	(i) Revenue included on Form 990, Part VIII, line 1		L
0	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treations.	agurag, or other similar agests for financia	
2			ai yaiii, piovide
_	the following amounts required to be reported under FASB A	-	*
d	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		
IJ	Assets included in Form 330, Fall A		Ψ Ψ

GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION 47-3700489 Schedule D (Form 990) 2021 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) 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): Dublic exhibition Loan or exchange program b Scholarly research Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? 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 No Yes on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e f Ending balance No 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 82,519 891,218 **1a** Beginning of year balance 891,218. **b** Contributions c Net investment earnings, gains, and losses **d** Grants or scholarships e Other expenditures for facilities 82,519. 808,699. and programs f Administrative expenses 82,519. g End of year balance 891,218. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment **b** Permanent endowment ▶ Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No bv: (i) Unrelated organizations 3a(i) 3a(ii)

(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI	Land	Ruildings	and Equipmen	1t

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

·				
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total, Add lines 1a through 1e. (Column (d) must equa	al Form 990. Part X. colur	nn (B), line 10c.)	•	0.

Schedule D (Form 990) 2021

_	_
Page	-1

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
I) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Complete if the organization answered "Yes" of	on Form 900 Part IV line	11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-vear market value
` ' '	(b) Book value	(b) Method of Valuation. Cost of one	Tor your market value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	15 \		
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of liability		7.70 0. 7.11. 000 1 0.111 000, 1 4.117, 11.10 20	(b) Book value
(1) Federal income taxes			. ,
(1) 1 Cacial income taxes			
(2)			
(2)			
(3)			
(3) (4)			
(3)			
(3) (4) (5) (6)			
(3) (4) (5)			
(3) (4) (5) (6) (7)			
(3) (4) (5) (6) (7) (8)	25.)	>	

GLOBAL WAR ON TERRORISM MEMORIAL

Schedule D (Form 990) 2021 FOUNDATION			47-3	700489 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	atements With	Revenue per F	Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1 Total revenue, gains, and other support per audited financial statements			1	2,060,971.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a			
b Donated services and use of facilities	2b	173,257.		
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	173,257.
3 Subtract line 2e from line 1			3	1,887,714.
4 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	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			5	1,887,714.
Part XII Reconciliation of Expenses per Audited Financial St		n Expenses per	Retur	n.
Complete if the organization answered "Yes" on Form 990, Part IV, li				
Total expenses and losses per audited financial statements			1	835,217.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	450 055		
a Donated services and use of facilities		173,257.	4	
b Prior year adjustments	2b			
c Other losses				
d Other (Describe in Part XIII.)	•			452 055
e Add lines 2a through 2d			2e	173,257.
3 Subtract line 2e from line 1			3	661,960.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b				
b Other (Describe in Part XIII.)	4b			•
c Add lines 4a and 4b			4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	5	661,960.		
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and $\frac{1}{2}$			4; Part X	ζ, line 2; Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	any additional inform	mation.		
DADE V IINE 9.				
PART X, LINE 2:				
MANACEMENT IIAC ACCECCED TILE ODCANTZATION	ים שאע דיסמ	TETONIC AND	CON	CI IIDED
MANAGEMENT HAS ASSESSED THE ORGANIZATION'	S TAX PUS	TTIONS AND	CON	СГОБЕР
MUAM MUEDE WEDE NO INCEDMAIN MAY DOCIMION	IC DECITET	NC DECOCNI	т ОМ	TNI MUD
THAT THERE WERE NO UNCERTAIN TAX POSITION	NS KEQUIKI	NG KECOGNI	TION	IN THE
ETNANCIAI CHAMEMENING AC OF DECEMBED 21	0021 777	VEXDC XED	ר מיםו	010 DEMATN
FINANCIAL STATEMENTS AS OF DECEMBER 31, 2	2021. ALL	ILAKS AFT	ER Z	UIO REMAIN
OPEN TO EXAMINATION BY TAX AUTHORITIES.				
OPEN TO EXAMINATION BY TAX AUTHORITIES.				

47-370<u>0489 Page 4</u>

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GLOBAL WAR ON TERRORISM MEMORIAL FOUNDATION

Employer identification number 47-3700489

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

FORM 990 IS PREPARED BY A CERTIFIED PUBLIC ACCOUNTING FIRM AND A DRAFT COPY
IS PROVIDED TO THE ORGANIZATION'S MANAGEMENT. THE BOARD OF DIRECTORS REVIEW
AND APPROVE THE FORM 990 PRIOR TO ITS FILING WITH THE IRS.

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

ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST AT

TIMES ORGANIZATIONAL DECISIONS ARE MADE. THIS IS REVIEWED BY THE COMPLIANCE

OFFICER AT LEAST ANNUALLY.

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

EXECUTIVE COMMITTEE REVIEWS AND APPROVES CEO COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION COMPLIES WITH IRC SECTION 6104 AND MAKES ITS FORM 1023 AND FORM 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST POLICY, FINANCIAL

STATEMENTS, AND GOVERNING DOCUMENTS AVAILABLE FOR PUBLIC INSPECTION UPON

REQUEST.

FORM 990, PART XII, LINE 2C

THE ENTIRE EXECUTIVE LEADERSHIP COMMITTEE, CONSISTING OF THE CHAIRMAN,

VICE-CHAIRMAN, SECRETARY, AND TREASURER, OVERSEE THE AUDIT OF THE

FINANCIAL STATEMENTS AND SELECTION OF THE INDEPENDENT AUDITORS.

Schedule O (Form 990) 20	21			F	⊃age 2
Name of the organization	GLOBAL WAR FOUNDATION	ON TERRORISM	MEMORIAL	Employer identification nu 47-3700489	ımber
				·	