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TIN: 77-0473818

Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

A F	or the 2021 c	alendar year, or tax year beginning 01-01-2022 , and ending 12-31	1-2022			_	
	ck if applicable:	C Name of organization			D Employer	r identif	ication number
	dress change	Henry Miller Memorial Library			77-04738	010	
O Na	me change				77-04750	310	
_	tial return	Doing business as					
	al return/terminated nended return	Number and shoot (a. DO bas if we'll is not delicered to shoot address). Description		[E Telephone	number	
	plication pending	Number and street (or P.O. box if mail is not delivered to street address) Room/sui 48603 Highway One	ite		(831) 66	7-8574	
	prication perianing	City or town, state or province, country, and ZIP or foreign postal code		— ⊦	(031) 00	7 0374	
		Big Sur, CA 93920			G Gross rece	eints \$ 66	69.902
		F Name and address of principal officer:	H(a)	Ic thic s	group retu		
		·		subordi	•	1111 101	□Yes ✓No
		48603 Highway One Big Sur, CA 93920	H(b)	Are all s	subordinate	S	
I Ta	x-exempt status:			included		C:	Yes No
- W	abaita. b. N//				exemption n		nstructions.
J W	ebsite: N/A			Group e	sxemption n	idilibei	
V =		: ✓ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of	f formation	on: 1998	M State	of legal domicile: CA
► Fori	n or organization	Corporation Trust Association Other					-
Pa	art I Sum	mary					
	1 Briefly de	scribe the organization's mission or most significant activities:					
e	The Henry	Miller Memorial Library is a cultural center promoting education and events	s relating	to lite	rature, mus	ic, and	art.
aŭ							
E	-						
ò		is box ▶ □				1 -	1
Activities & Governance		of voting members of the governing body (Part VI, line 1a)				3	7
S		of independent voting members of the governing body (Part VI, line 1b) .				4	7
Ĕ		nber of individuals employed in calendar year 2021 (Part V, line 2a)				5	4
ŧ	6 Total nur	nber of volunteers (estimate if necessary)		•	•	6	25
ď	7a Total unr	elated business revenue from Part VIII, column (C), line 12				7a	0
	b Net unre	lated business taxable income from Form 990-T, Part I, line 11				7b	
				Prio	r Year		Current Year
9	8 Contribut	cions and grants (Part VIII, line 1h)			166,66	51	212,685
ĕ	9 Program	service revenue (Part VIII, line 2g)			129,55	58	206,108
Revenue	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)			4	17	0
	11 Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			126,00	08	74,926
	12 Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			422,27	74	493,719
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)					0
	14 Benefits	paid to or for members (Part IX, column (A), line 4)					0
88	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)			138,46	56	177,082
Expenses	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)					0
ре	b Total fund	raising expenses (Part IX, column (D), line 25) 11,382					
മ്	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)			107,17	77	138,945
	18 Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)			245,64	13	316,027
	•	less expenses. Subtract line 18 from line 12			176,63	-	177,692
es es		·	Begii	nning of	f Current Yea		End of Year
Net Assets or Fund Balances							
Bak	20 Total ass	ets (Part X, line 16)			1,736,13	36	2,510,204
P P	21 Total liab	ilities (Part X, line 26)			53,47	76	52,457
žĪ	22 Net asse	ts or fund balances. Subtract line 21 from line 20			1.682.66	50	2,457,747

<u> </u>				2023-07-26	
ign	gnature of officer			Date	
oro I	agnus Toren Executive Director				
Ту	pe or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
aid				self-employed	P00115222
eparer	Firm's name Fitzpatrick Profes	ssional Accountancy Corp		Firm's EIN	77-0441609
se Only	Firm's address ▶ 755 Santa Rosa S	St Ste 200		Phone no. (805	5) 781-0688
	San Luis Obispo,	CA 93401		-	
					. Yes No
•	Reduction Act Notice, see the	shown above? (see instructions)			
r Paperwork	Reduction Act Notice, see the	e separate instructions.	Cat	. No. 11282Y	Form 990 (20)
		——————————————————————————————————————			
rm 990 (2021)				Page
•		ce Accomplishments			rage
	_	•	£ 111		
	eck if Schedule O contains a resp scribe the organization's mission:	oonse or note to any line in this Par	[
e Schedule O	seribe the organization's mission.				
e Scriedule O					
Did the or	ganization undertake any signific	cant program services during the ye	ar which were not	listed on	
	Form 990 or 990-EZ?	and program services during the ye	ar which were not	iistea oii	🗆 Yes 🗸 No
•	escribe these new services on Sc	chadula O			U res No
•		make significant changes in how it	conducts any prod	ram	
services?	-	make significant changes in now it	conducts, any progr	iuiii	. 🗆 Yes 🗸 No
	escribe these changes on Schedu				. 0163 0110
•	-		h la		
		e accomplishments for each of its t ions are required to report the amo			
	ue, if any, for each program serv		and or grante and o		ioro, and total expenses,
a (Code:) (Expenses \$	145,185 including grants of) (Revenue \$)
		iterature, music, and art; including the B shop for unpublished and published autho			series, and an annual children's
	, , , ,				
b (Code:) (Expenses \$	100,891 including grants of	\$) (Revenue \$)
Providing cu	ultural center for the dissemination of	literature; and educational and archival r	esearch in literature, r		cifically for the world-reknown
author Hen	ry Mill and his associates. The HMML a	lso publishes an annual collection of poet	ry, prose, and art enti	tled "Ping Pong".	
C (Code:) (Expenses \$	including grants of	\$) (Revenue \$)
•	gram services (Describe in Sched	•			
(Expenses		cluding grants of \$) (Revenue	e \$)
e Total pro	gram service expenses 🕨	246,076			
					Form 990 (20
		——————————————————————————————————————			
rm 990 (2021	1				-
					Pag
Part IV Ch	ecklist of Required Sched	uies			V 11-
		4(.)(2)		\2 TC#': "	Yes No
1 Is the orga		1(c)(3) or 4947(a)(1) (other than a	private foundation	i)! IF "Yes," com	pplete Yes
SCHENINE.					

2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right			
0	to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X , as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
	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		No
	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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
	Page 4 ———————————————————————————————————	F	orm 99	0 (202

Yes

 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	24a 24b 24c 24d 25a and ete 25b rmer ly 26		No No No
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	24a 24b 24c 24d 25a and ete 25b rmer ly 26		No
 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?	24c 24d 25a and ete 25b rmer ly 26		
 to defease any tax-exempt bonds?	24d 25a and ete 25b rmer ly 26		
 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? <i>If "Yes," complete Schedule L, Part I </i>	and ete 25b		
 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 in a prior year, that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	and ete 25b		
 that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or for 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 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 	25b rmer		No
officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or fami member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	to a 27		
			No
35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III			No
Was the organization a party 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		No
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," com Schedule L, Part IV	plete 28c		No
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservat contributions? <i>If "Yes," complete Schedule M</i>	ion 30		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	ons 33		No
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, Part V, line 1	and 34		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled enwithin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	atity 35b		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	that 37		No
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? N All Form 990 filers are required to complete Schedule O	ote. 38	Yes	
Part V Statements Regarding Other IRS Filings and Tax Compliance	-		
Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	6	163	'''
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gam (gambling) winnings to prize winners?	ing 1c	Yes	
(3. 1. 3),3 p		orm 99	

———— Page 5 —————

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			
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.	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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 services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		No
п	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities	17		

				0 (2021)
	Page 6 ———————————————————————————————————			
orm	990 (2021)			Page 6
Par	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	<u>-</u>
Se	ection 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 7			
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.) Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	165	No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		110
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	List the states with which a copy of this Form 990 is required to be filed			
17 18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			

- Describe in Schedule O whether (and it so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: Magnus Toren 48603 Highway One Big Sur, CA 93920 (831) 667-2574

Form 990 (2	021)
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Form 990 ((2021) Page 7
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	n A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
4 - Cl-	to this table for all and a single ballisted. Do not a source for the sale of a single side of the side of the

- 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (B) (D) (E) (F) (C) Name and title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless person compensation compensation amount of other

	week (list any hours for related		oth a direct			r and a ee)	a	from the organization	from related organizations	compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	organization and related organizations
(1) Magnus Toren	40.00	х						111,525	0	0
Executive Dir.	0.00							111,525		ŭ
(2) Susan Zsigmond	4.00	X		х				0	0	0
President	0.00			^				0	0	Ü
(3) Dana Carnazzo	4.00	х		х				0	0	0
Secretary	0.00								-	
(4) Daniel Perlstein	4.00	х		х				0	0	0
Treasurer	0.00									
(5) John Handy Director	1.00	Х						0	0	0
(6) Britt Govea	1.00							0	0	0
Director	0.00							9	,	Ů
(7) Laura Schulkind	1.00	x						0	0	0
Director	0.00							0	0	Ü
(8) Conrad Selvig	1.00	Х						0	0	0
Director	0.00							Ğ		
					<u> </u>					

	ĺ	ſ	ĺ		ı	1 1		1 1	I	I	
_											
	<u> </u>									Form 99 0	0 (202
				Page	e 8						
orm 990 (2021)											Page
Part VII Section A. Officers, Di	rectors, Trustee	s, Key	Emp	loye	es,	and	Higl	nest Compensat	ed Employees (co	ntinued)	ruge
(A) Name and title	(B) Average hours per week (list any hours	than	ion (d one b both a direc	ox, ι an of	t che unles ficer	ss per	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	Estima amount o compens from	ited f othe sation the
	for related organizations	or Ind	Ξ	Officer	Ke)	em em	For	2/1099- MISC/1099-NEC)	2/1099- MISC/1099-NEC)	organizati relat	ed
	below dotted line)	Individual trustae or director	Institutional Trustee	cer	Key employee	Highest compensated employee	Former			organiza	ations
						_					
b Sub-Total .		Α.				*					
d Total (add lines 1b and 1c) .					_	•		111,525			
Total number of individuals (inclu of reportable compensation from			se list	ed al	bove	e) who	rece	eived more than \$1	.00,000		
										Yes	No
Did the organization list any forn line 1a? If "Yes," complete Sched	•			•	•			•	. ,	3	No
For any individual listed on line 1 organization and related organizatindividual									m the	4	No
Did any person listed on line 1a r		•						-	lividual for		INU
services rendered to the organiza		nete Sc	neaule	e J FC	JΓ SL	ісп ре	rson			5	No
Section B. Independent Control Complete this table for your five	highest compensate									ensation	
from the organization. Report cor	npensation for the	calenda	r Vaai								

		ivallic allu bus	onicoo auurcoo		Desci	וארוטוו טו אבו זונבא	Compensation
Total number of inde compensation from t			luding but not limite	d to those listed abov	(e) who received mo	re than \$100,000) of
							Form 990 (20)
				Page 9			
222 (2221)				. age 3			
rm 990 (2021) Part VIII Statem e	ent of Re	evenue					Page
			ponse or note to an	y line in this Part VIII			\square
				(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					exempt function	business revenue	excluded from tax under section
					revenue	revenue	512 - 514
derated campaign	ıs	1a					
mbership dues .		1b					
imbership dues . Indraising events Iated organization vernment grants (columns)							
ndraising events		1c					
lated organization	ne	ندو (
ated organization	15	1d					
vernment grants (co	ntributions)	1e					
		•					
All other contributions, and similar amounts no above		1f					
212,685							
Noncash contributions i lines 1a - 1f:\$	ncluded in	1g					
		9_					
Total. Add lines 1a-	1 <i>f</i>		_				
	11	<u> </u>	Business Code				1
2a Cultural & Other Ev	ents			206,108	206,108		
			711130				
e e							
<u> </u>							
<u> </u>							
, i							
Program Service Revenue							
Ĕ							
f All other program	n service r	revenue.					
9 Total. Add lines	2a-2f	🕨	206,108		1		
3 Investment incom similar amounts)	ne (includii	ng dividends, ir	nterest, and other	0			
4 Income from inve			nd proceeds	0			
5 Royalties	· <u> </u>			0			
	\ <u></u>	(i) Real	(ii) Personal				
6a Gross rents	6a						
b Less: rental	6b						
expenses c Rental income	OD						
or (loss)	6 c			[
d Net rental incon		s)	· · · •	0			

Ta Gross amount from sales of assets other than inventory be Less: cost or other basis and sales expenses C Gain or (loss) To d Net gain or (los			(i) Securities	(ii) Other]		
ther basis and sales expenses c Gain or (loss) d Net gain or (loss) c of method in method in method is method in	from sales of assets other	7a					
d Net gain or (loss)	other basis and	7b					
Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	c Gain or (loss)	7c					
(not including \$ of contributions reported on line 1c). See Part IV, line 18	d Net gain or (loss)	•		•	0		
C Net income or (loss) from fundraising events	a Gross income from fur (not including \$ contributions reported See Part IV, line 18	l on li	of ne 1c).				
Gross income from gaming activities. See Part IV, line 19		ses	8b				
Gross income from gaming activities. See Part IV, line 19	c Net income or (los	s) fro	m fundraising eve	ents	0		
10a Gross sales of inventory, less returns and allowances 10a 251,109 b Less: cost of goods sold 10b 176,183 c Net income or (loss) from sales of inventory	Gross income from See Part IV, line 19 b Less: direct expense	ses	9a 9b	es L	0		
C Net income or (loss) from sales of inventory	10aGross sales of invereturns and allowa	ntory	/, less • • 10a	251,109			
Miscellaneous Revenue Business Code				Orv •	7 4,926		74,926
					1		

ObjectId: 202332079349300218 - Submission: 2023-07-26

TIN: 77-0473818

SCHEDULE A

(Form 990)

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 <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection Employer identification number

		he organization					Employer identific	ation number
Henry	/ Miller I	Memorial Library					77-0473818	
	rt I organiz	Reason for Public ration is not a private fou	Charity State	us (All organizations	s must compl uah 12. check	lete this part.) S	See instructions.	
1		A church, convention of		-	-		(A)(i).	
2		A school described in se	ection 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form	990).)		
3		A hospital or a cooperat			•		iii).	
4		A medical research orga	·	_			•	nter the hospital's
		name, city, and state:						
5		An organization operate 170(b)(1)(A)(iv). (Co			sity owned or	operated by a gov	ernmental unit descril	bed in section
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).						
7		An organization that no section 170(b)(1)(A)	(vi). (Complete	Part II.)	• •	-	nit or from the genera	al public described in
8		A community trust desc	ribed in sectior	170(b)(1)(A)(vi).	(Complete Part	II.)		
9		An agricultural research non-land grant college o	of agriculture. S	ee instructions. Enter t	the name, city,	and state of the o	college or university:	,
10	✓	An organization that no from activities related to investment income and 30, 1975. See section	o its exempt fur unrelated busin	actions—subject to cert less taxable income (le	ain exceptions	, and (2) no more	than 33 1/3% of its su	upport from gross
11		An organization organiz	ed and operated	d exclusively to test for	public safety.	See section 509	(a)(4).	
12		An organization organiz more publicly supported on lines 12a through 12	l organizations (described in section 5	09(a)(1) or s	ection 509(a)(2)). See section 509(a	
а		Type I. A supporting or organization(s) the pow complete Part IV, Sec	ganization oper er to regularly a	rated, supervised, or coappoint or elect a majo	ontrolled by its	supported organiz	zation(s), typically by	
b		Type II. A supporting of management of the sup must complete Part I	organization sup oporting organiza	ervised or controlled in ation vested in the san				
С		Type III functionally supported organization(ted with, its
d		Type III non-function functionally integrated. instructions). You mus	nally integrate The organizatio	d. A supporting organi n generally must satisf	zation operated fy a distributior	d in connection with requirement and	th its supported organ	
е		Check this box if the orgintegrated, or Type III r	ganization recei	ved a written determin	ation from the		pe I, Type II, Type III	functionally
f	Ente	r the number of supporte	d organizations				<u> </u>	
g		ide the following informat	1	ipported organization(
	1 (i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		ganization listed ning document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			ı					
Tota	.1							
		work Reduction Act No	Lice, see the I	nstructions for	Cat. No. 1128	85F	Schedule	A (Form 990) 2022
Forn	n 990	or 990-EZ.	·					,
				Pag	ge 2 ———			
Sche	dule A	(Form 990) 2022						Page 2
	rt II	Support Schedul		zations Described				L)(A)(vi)
				ne box on line 5, 7, ify under the tests l				iiiy under Part III.

	nenual year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
(0 1	r fiscal year beginning in) Gifts, grants, contributions, and		. ,		. ,		
	membership fees received. (Do not						
2	include any "unusual grant.") Tax revenues levied for the						
_	organization's benefit and either paid						
3	to or expended on its behalf The value of services or facilities						
-	furnished by a governmental unit to						
4	the organization without charge Total. Add lines 1 through 3						_
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
_	line 4.						
	Section B. Total Support	_			_		
	llendar year r fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						_
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.).						
11							
12	10 Gross receipts from related activities, 6	tc (see instruction	ne)		l	12	<u> </u>
	•	•	•				instinu shael
13	First 5 years. If the Form 990 is for the	-			•	. , . ,	ization, check
_	this box and stop here				<u> </u>		
	Public support percentage for 2022 (lin		_	column (f))		14	
15						15	
	33 1/3% support test—2022. If the						hox
100	and stop here. The organization qualit						
ŀ	33 1/3% support test—2021. If the	organization did	not check a box or	line 13 or 16a, a	nd line 15 is 33 1/3	3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	icly supported org	janization			▶□
17	a 10%-facts-and-circumstances test	-2022. If the org	anization did not	check a box on lin	e 13, 16a, or 16b,	, and line 14 is 10	% or more,
	and if the organization meets the "fact		•	•	•	3	
	meets the "facts-and-circumstances" to 10%-facts-and-circumstances tes						
Ľ	more, and if the organization meets the						
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶ □
18	Private foundation. If the organization						
	instructions						▶□
						Schedule A (I	Form 990) 2022
			Page 3				
Sch	edule A (Form 990) 2022						Page 3
	Part III Support Schedule fo	or Organization	ns Described in	Section 509	(a)(2)		
	(Complete only if you	checked the box	on line 10 of P	art I or if the or	ganization faile		er Part II. If
_	the organization fails	to qualify under	the tests listed	below, please c	omplete Part II.)	
	Section A. Public Support	1	T	ı	1		
	llendar year r fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.") .	43,825	69,188	64,771	166,661	207,926	552,371
2							
_	merchandise sold or services	400 700	202 500	167.400	200,400	461.076	1 017 157
	performed, or facilities furnished in any activity that is related to the	406,760	392,500	167,433	388,488	461,976	1,817,157
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or						
	business under section 513						0
	Tay revenues levied for the				1		
	Tax revenues levied for the		1	I	1		1

	organization's penerit and either paid						1	U
5	to or expended on its behalf The value of services or facilities							
	furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	450,585	461,688	232,204	555,149	669,902	2,369	,528
7a	Amounts included on lines 1, 2, and							0
b	3 received from disqualified persons Amounts included on lines 2 and 3							
	received from other than disqualified							0
	persons that exceed the greater of \$5,000 or 1% of the amount on line							0
	13 for the year.							
c	Add lines 7a and 7b Public support. (Subtract line 7c							
8	from line 6.)						2,369	9,528
Se	ction B. Total Support							
	ndar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
9	fiscal year beginning in) Amounts from line 6	450,585	461,688	232,204	555,149	669,902	2,369	9,528
10a	Gross income from interest,	,	·	·	•	•		
	dividends, payments received on securities loans, rents, royalties and	543	3,330		47		3	3,920
	income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30,							0
	1975.							
C	Add lines 10a and 10b.	543	3,330		47		3	3,920
11	Net income from unrelated business activities not included on line 10b,							_
	whether or not the business is							0
12	regularly carried on. Other income. Do not include gain							
12	or loss from the sale of capital							0
	assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.).	451,128	•		· ·	•	1	
14	First 5 years. If the Form 990 is for t	he organization's	first, second, thir	d, fourth, or fifth t	ax year as a sect	on 501(c)(3) orga	anization, ched	ck
	this box and stop here						<u> </u>	
Se	ction C. Computation of Public							
15	Public support percentage for 2022 (li		•			15	99.83	
16	Public support percentage from 2021					16	99.81	.0 %
	ction D. Computation of Invest			line 12 selumen //	5))	T T		
								
17	•	•						70 %
18	Investment income percentage from 2	2021 Schedule A,	Part III, line 17 .			18	0.19	90 %
18	Investment income percentage from 2 33 1/3% support tests-2022. If the	2021 Schedule A, organization did r	Part III, line 17 . not check the box	on line 14, and lir	ne 15 is more thai	18 n 33 1/3%, and lin	0.19 e 17 is not	
18 19a	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and	2021 Schedule A, organization did rd stop here. The	Part III, line 17 . not check the box organization quali	on line 14, and lir	ne 15 is more than supported organiz	18 at 33 1/3%, and lin	0.19 e 17 is not • <mark>✓</mark>	90 %
18 19a	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the	2021 Schedule A, organization did rd stop here. The e organization did	Part III, line 17 . not check the box organization quali not check a box (on line 14, and lir fies as a publicly son line 14 or line 1	ne 15 is more than supported organiz 19a, and line 16 is	18 n 33 1/3%, and lin ation	0.19 e 17 is not • ✓ s% and line 18	90 %
18 19a b	Investment income percentage from 233 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 n 33 1/3%, and lin ation more than 33 1/3 anization	0.19 e 17 is not • • 9% and line 18 . •	90 %
18 19a	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 ation more than 33 1/3 anization instructions	0.19 e 17 is not • ✓ 9% and line 18 . • □ • □	90 % s is
18 19a b	Investment income percentage from 233 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 n 33 1/3%, and lin ation more than 33 1/3 anization	0.19 e 17 is not • ✓ 9% and line 18 . • □ • □	90 % s is
18 19a b	Investment income percentage from 233 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14,	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 ation more than 33 1/3 anization instructions	0.19 e 17 is not • ✓ 9% and line 18 . • □ • □	90 % s is
18 19a b	Investment income percentage from 233 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 ation more than 33 1/3 anization instructions	0.19 e 17 is not • ✓ 9% and line 18 . • □ • □	90 % s is
18 19a b 20	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization	2021 Schedule A, organization did rd stop here. The e organization did c and stop here.	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14,	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 ation more than 33 1/3 anization instructions	0.19 e 17 is not • ✓ % and line 18 . • □ • □	90 % is
18 19a b 20	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization	2021 Schedule A, organization did rd stop here. The e organization did and stop here. on did not check a	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14,	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi	ne 15 is more than supported organiz 19a, and line 16 is icly supported org	18 ation more than 33 1/3 anization instructions	0.19 e 17 is not • ✓ % and line 18 . • □ • □	90 % s is
18 19a b 20	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization dule A (Form 990) 2022 TV Supporting Organization	2021 Schedule A, organization did rd stop here. The e organization did and stop here. on did not check a	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14, 1	on line 14, and lir fies as a publicly s on line 14 or line 1 qualifies as a publi 19a, or 19b, check	ne 15 is more than supported organiz 19a, and line 16 is icly supported org this box and see	18 at 33 1/3%, and lin ation more than 33 1/3 anization instructions	0.19 e 17 is not	00 % is
18 19a b 20	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization	2021 Schedule A, organization did rd stop here. The e organization did rd and stop here. on did not check a	Part III, line 17 . not check the box organization quali not check a box of the organization of a box on line 14, Page 4	on line 14, and lir fies as a publicly son line 14 or line 1 qualifies as a publi 19a, or 19b, check	ne 15 is more than supported organiz 19a, and line 16 is icly supported org this box and see	18 n 33 1/3%, and lin ation more than 33 1/3 anization instructions Schedule A (I	0.19 e 17 is not	00 % is
18 19a b 20 Schee	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization of the complete only if you checked box 12b, of Part I, complete Section 23 1/3% of Part I, complete Section 24 1/3% of Part II	co21 Schedule A, organization did rd stop here. The e organization did rd and stop here. on did not check a did not check a a box on line 12 cections A and C. If ns A and D, and c	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14, Page 4 of Part I. If you checked box	on line 14, and lir fies as a publicly son line 14 or line 1 qualifies as a publi 19a, or 19b, check	ne 15 is more than supported organiz 19a, and line 16 is icly supported org this box and see	18 n 33 1/3%, and lin ation more than 33 1/3 anization instructions Schedule A (I	0.19 e 17 is not	00 % is
18 19a b 20 Schee	Investment income percentage from 2 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization of the complete only if you checked box 12b, of Part I, complete Sets	co21 Schedule A, organization did rd stop here. The e organization did rd and stop here. on did not check a did not check a a box on line 12 cections A and C. If ns A and D, and c	Part III, line 17 . not check the box organization quali not check a box of The organization of a box on line 14, Page 4 of Part I. If you checked box	on line 14, and lir fies as a publicly son line 14 or line 1 qualifies as a publi 19a, or 19b, check	ne 15 is more than supported organiz 19a, and line 16 is icly supported org this box and see	18 n 33 1/3%, and lin ation more than 33 1/3 anization instructions Schedule A (I	0.19 e 17 is not	00 %
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	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you	30			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a			
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.	4b			
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.	4c			
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).	5a			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the				
c	organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c			
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 .	6			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).	7			
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).	8			
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as	8			
	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 .	9a			
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting	Ja			
	organization had an interest? If "Yes," provide detail in Part VI.	9b			
С	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.	9c			
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)? If "Yes,"	JC			
	answer line 10b below.	10a			
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).				
	Schedule A	10b	. 000)	2022	
	Schedule A	(FUIII	990)	2022	
	Page 5				
Sche	dule A (Form 990) 2022		P	age 5	
Par	Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	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 11a above?	11a			
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c			
Se	VI. ection B. Type I Supporting Organizations				
	ation 51 Type 2 Supporting Organizations		Yes	No	
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	1			
_	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.				
Se	ection C. Type II Supporting Organizations				
36	Calon 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 hov			1	 	
	supporting organization was vested in the same persons that controlled or managed t	ne sup	ported organization(s).			
Se	ction D. All Type III Supporting Organizations					Т
					Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of tax year, (i) a written notice describing the type and amount of support provided during Form 990 that was most recently filed as of the date of notification, and (iii) copies of	ng the	prior tax year, (ii) a copy of the	:		
	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 e organization(s) or (ii) serving on the governing body of a supported organization? If " $^{\prime\prime}$	'No," e	xplain in Part VI how the			
	organization maintained a close and continuous working relationship with the support	ed org	anization(s).	2		
3	By reason of the relationship described in line 2 above, did the organization's support voice in the organization's investment policies and in directing the use of the organization.					
	during the tax year? If "Yes," describe in Part VI the role the organization's supporte			3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Po	art Tes	t during the year (see instruct	ions):		
а	The organization satisfied the Activities Test. Complete line 2 below.					
b	The organization is the parent of each of its supported organizations. Complete	e line	3 below.			
С	The organization supported a governmental entity. Describe in Part VI how yo	ou supp	ported a government entity (see	instru	ctions)	
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					
	supported organization(s) to which the organization was responsive? If "Yes," then in organizations and explain how these activities directly furthered their exempt purp					
	responsive to those supported organizations, and how the organization determined the substantially all of its activities.	at the	se activities constituted	2a	 	
b	Did the activities described on line 2a, above constitute activities that, but for the org	anizati	on's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," the organization's position that its supported organization(s) would have engaged in to organization's involvement.					
_				2b	 	<u> </u>
3	Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the off	icore d	directors or trustees of each of	3a	_	
а	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI .					
b	Did the organization exercise a substantial degree of direction over the policies, progr supported organizations? <i>If "Yes," describe in Part VI. the role played by the organiz</i>				<u> </u>	
			Schedule A	3b	2 000	2022
			Schedule A	(1011	. 550)	2022
	Page 6					
Sched	lule A (Form 990) 2022				J	Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting 0	rgan	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru				e	
	instructions. All other Type III non-functionally integrated supporting organization	ations i				
	Section A - Adjusted Net Income		(A) Prior Year		rent Yea onal)	11
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				
	Section B - Minimum Asset Amount (A) Prior Year (rent Yea onal)	ır
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1				
a	Average monthly value of securities	1a				
	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				
	Discount claimed for blockage or other factors	1				

~	(explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	

efile Public Visual Render

ObjectId: 202332079349300218 - Submission: 2023-07-26

TIN: 77-0473818

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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

bid the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Ves No No No No No No No N		me of the organization		Employer identification number
Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Total number at end of year	пen	ry milier methorial Library		77-0473818
(a) Donor advised funds (b) Funds and other accounts Total number at end of year	Pa			
1 Total number at end of year . 2 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value at end of year		Complete if the organization answered "Ye		
Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of pen space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements. Did a creage restricted by conservation easements. Number of conservation easements on a certified historic structure included in (a). Number of conservation easements on a certified historic structure included in (a). Number of conservation easements in dead of the conservation easement by the organization during the tax year Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . Number of states where property subject to conservation easement is located by the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year property subject to conservation easements in lotated by the organization have a written policy regarding the periodic monitoring, inspection, and enforcing conservation easements during the ye	_		(a) Donor advised funds	(b) Funds and other accounts
Aggregate value of grants from (during year) Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space Complete lines 2 at hrough 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements. Aga botal careage restricted by conservation easements. Number of conservation easements on a certified historic structure included in (a). Aumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of states where property subject to conservation easement is located Pose to enganization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements in thois? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements thoids? Amount of expenses incurred in monitoring, inspec		,		
Aggregate value at end of year		,		
Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes N		,		
organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete lif the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. In the last of the Year and the International Conservation easements on the last day of the tax year. In the International Conservation easements on a certified historic structure included in (a) . In the Very of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of conservation have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year Num	5			
Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education)	6	charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose c	onferring impermissible
Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year	Pa		s" on Form 990, Part IV, line 7.	
Protection of natural habitat	1	Purpose(s) of conservation easements held by the orga	nization (check all that apply).	
Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements .		Preservation of land for public use (e.g., recreation	n or education) Preservation of an	historically important land area
Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements .		Protection of natural habitat	Preservation of a c	rertified historic structure
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements			_ Treservation of a c	actified installe structure
a Total number of conservation easements	2	, ,	qualified concentration contribution in the for	m of a concentration
a Total number of conservation easements	2		qualified conservation contribution in the for	
c Number of conservation easements on a certified historic structure included in (a)	а	Total number of conservation easements		
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	b	Total acreage restricted by conservation easements		2b
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	c	Number of conservation easements on a certified histori	c structure included in (a)	2c
A Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	d		ired after 7/25/06, and not on a historic	2d
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	3		ed, released, extinguished, or terminated by	the organization during the
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ** ** ** ** ** ** ** ** **	4	Number of states where property subject to conservation	on easement is located >	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$ Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	5			
B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	onservation easements during the year
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	7		handling of violations, and enforcing conserv	vation easements during the year
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the	8	Does each conservation easement reported on line 2(d)		()()()()
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the	9	In Part XIII, describe how the organization reports cons	ervation easements in its revenue and exper	nse statement, and
Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the	Par			er Similar Assets.
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historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the	1a	historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furth	
Tollowing amounts relating to these terms.	b	historical treasures, or other similar assets held for pub	SC 958, to report in its revenue statement an lic exhibition, education, or research in further	d balance sheet works of art, erance of public service, provide the
(i) Revenue included on Form 990, Part VIII, line 1	(
(ii) Assets included in Form 990, Part X				· · · · · · · · · · · · · · · · · · ·
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	_	If the organization received or held works of art, histori	cal treasures, or other similar assets for final	
following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1	а		_	> \$
b Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	_			·

Schedule D (Form 990) 2021 Page **2**

Par	t III	Organizations Ma	aintaining Col	lections of A	rt Histor	ical Tre	Pasures o	r Other	Similar Ass	ets (contin	nued)
3	Using	the organization's acq (check all that apply):	uisition, accessior								
а		Public exhibition			d		Loan or exch	ange prog	rams		
b		Scholarly research			е		Other				
c		Preservation for future	e generations								
4	Provid Part X	de a description of the	organization's col	lections and exp	olain how th	ey furthe	er the organi	zation's ex	empt purpose	e in	
5		g the year, did the orga s to be sold to raise fur								☐ Yes	□ No
Pa	rt IV	Escrow and Cust Complete if the org line 21.			n Form 990	, Part I	V, line 9, o	r reporte	d an amount	on Form	990, Part X,
1a		organization an agent led on Form 990, Part)								☐ Yes	□ No
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete t	he followina	table:			Am	ount	
c		ning balance		•	-			1c			-
d		ons during the year .						1d			
е		butions during the year						1e			
f	Endin	g balance						1f			
2a	Did +k	ne organization include	an amount on Fo	rm 990 Part Y	line 21 for	accrow i	or custodial	account lia	hility2	□ vos	□ No
b		s," explain the arrange			•				•		U 140
	rt V	Endowment Fund		. Check here in t	не ехріанас	ion nas i	been provide	u III Pait /	1111		
Га	1 C V	Complete if the org		vered "Yes" or	Form 990	, Part I	V, line 10.				
				(a) Current ye		Prior year		years back	(d) Three years	s back (e) Fe	our years back
1a	Beginn	ing of year balance .									
b	Contrib	outions									
С	Net inv	estment earnings, gair	ns, and losses								
d	Grants	or scholarships									
е		expenditures for facilition	es								
f	Admini	strative expenses .									
g	End of	year balance									
2 a		de the estimated perce designated or quasi-e	ndowment >	•	lance (line 1	g, colum	ın (a)) held a	as:			
b	Perma	anent endowment									
c	Term	endowment 🕨									
_		ercentages on lines 2a	, 2b, and 2c shou	ld equal 100%.							
За		nere endowment funds ization by:	not in the posses	sion of the orga	nization tha	t are hel	d and admir	nistered fo	r the	ſ	Yes No
	(i)	nrelated organizations								3a(i)	
		elated organizations								3a(ii)	
ь		s" on 3a(ii), are the rel								3b	
4		ibe in Part XIII the inte			endowment	funds.					
Pa	rt VI	Land, Buildings, Complete if the or			Form 990	Part I	V line 11a	See For	m 990 Part	Χ line 10	
	Descri	ption of property	(a) Cost or oth (investme	ner basis (b)			her) (c) Ac				ok value
1a	Land					142	2,301				142,301
b	Buildin	gs									
		old improvements				45	5,340		45,069		271
d	Equipm	nent				12	2,939		12,763		176
						463	3,275		56,734		406,541
		lines 1a through 1e. (C	Column (d) must e	equal Form 990,	Part X, colu	ımn (B),	line 10(c).)		>		549,289

Schedule D (Form 990) 2021

Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990	Part IV	line 11h See For	m 990 Part	X line 12
(a) Description of security or category (including name of security)	(b) Book value	Cost	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII Investments - Program Related.	Dowt IV	line 11e Coe Fo	em 000 David	t V line 12
Complete if the organization answered 'Yes' on Form 990 (a) Description of investment	, Part IV,	(b) Book value	(c) M	lethod of valuation:
<u>(1)</u>			Cost or er	nd-of-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX Other Assets.	D T/ /	: 11 d O F	000 5	
Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, I	ine 11a. See Forn	1 990, Part X,	(b) Book value
(1)Archival Collection (1)				1,050,197
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			. •	1,050,197
Part X Other Liabilities.			Į	
Complete if the organization answered 'Yes' on Form 990, 1. (a) Description of liability	rart IV, I	ine 11e or 11f.S	ee Form 990), Part X, line 25. (b) Book value

(1) Federal income taxes	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	6,868
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial state	ments that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has be	<u>'</u>
	- - - D (F 000) 0001

Schedule D (Form 990) 2021

efile Public Visual Render

ObjectId: 202332079349300218 - Submission: 2023-07-26

TIN: 77-0473818 OMB No. 1545-0047

Open to Public Inspection

SCHEDULE 0

(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 990-EZ.

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

Name of the organization Henry Miller Memorial Library

Employer identification number

77-0473818

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	No review was or will be conducted.
Form 990, Part VI, Section C, Line 19	No other documents available to the public.
Form 990, Part XI, Line 9	= \$597395
Form 990, Part III, Line 1 - Organization Mission	The Henry Miller Memorial Library is a public benefit, non-profit organization championing the literary, artistic and cultural contributions of the later writer, artist, and Big Sur resident, Henry Miller. The Library also serves as a cultural resource center, functioning as a public gallery/performance/workshop space for artists, writers, musicians, and students. In addition, the Library supports education in the arts and the local environment. Finally, the Library serves as a social center for the community.
Form 990, Part VI, Line 11b - Form 990 Review Process	The complete Form 990 and all attachments are emailed to all board members prior to a regularly scheduled board meeting, where they are reviewed and signed.
Form 990,	Any request for governing documents, conflict of interest policy, and/or financial statements are responded to within one week by