

2020 Exempt Org. Return
prepared for:

DORIS & VICTOR DAY FOUNDATION INC
1800 3RD AVENUE, STE 302
ROCK ISLAND, IL 61201

Hoffman & Tranel, PC
2514 24th Street
Rock Island, IL 61201

**IRS e-file Signature Authorization
for an Exempt Organization**

For calendar year 2020, or fiscal year beginning 7/01, 2020, and ending 6/30, 20 2021

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

▶ **Go to www.irs.gov/Form8879EO for the latest information.**

2020

Department of the Treasury
Internal Revenue Service

Name of exempt organization or person subject to tax: DORIS & VICTOR DAY FOUNDATION INC
Taxpayer identification number: 36-6131596

Name and title of officer or person subject to tax: WILLIAM STENDEL PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1 a Form 990 check here.	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b	
2 a Form 990-EZ check here.	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2 b	
3 a Form 1120-POL check here.	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b	
4 a Form 990-PF check here.	<input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b	<u>13,620.</u>
5 a Form 8868 check here.	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5 b	
6 a Form 990-T check here.	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6 b	
7 a Form 4720 check here.	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7 b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize HOFFMAN & TRANEL, PC to enter my PIN 20200 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency (ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 15893247098
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ Kimberly S. Hoffmann **COPY** Date ▶ 05/13/22
KIMBERLY S. HOFFMAN CPA

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. DORIS & VICTOR DAY FOUNDATION INC	Taxpayer identification number (TIN) 36-6131596
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. 1800 3RD AVENUE, STE 302	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ROCK ISLAND, IL 61201	

Enter the Return Code for the return that this application is for (file a separate application for each return)..... 04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

● The books are in the care of ▶ WILLIAM STENGEL -----

Telephone No. ▶ (309) 788-0471 ----- Fax No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box..... ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box..... ▶ . If it is for part of the group, check this box... ▶ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 5/15, 20 22, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 20 ____ or
- ▶ tax year beginning 7/01, 20 20, and ending 6/30, 20 21.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.....	3a	\$ 14,500.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.....	3b	\$ 22,500.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.....	3c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2020)

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

2020

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For calendar year 2020 or tax year beginning 7/01, 2020, **and ending** 6/30, 2021

DORIS & VICTOR DAY FOUNDATION INC
1800 3RD AVENUE, STE 302
ROCK ISLAND, IL 61201

A Employer identification number
36-6131596

B Telephone number (see instructions)
(309) 788-2300

G Check all that apply: Initial return Initial return of a former public charity
 Final return Amended return
 Address change Name change

C If exemption application is pending, check here.

D 1 Foreign organizations, check here.

2 Foreign organizations meeting the 85% test, check here and attach computation.

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here.

I Fair market value of all assets at end of year (from Part II, column (c), line 16)
\$ 18,316,678.
J Accounting method: Cash Accrual
 Other (specify) _____
(Part I, column (d), must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule) . . .				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	467.	467.	467.	
	4 Dividends and interest from securities	299,186.	299,186.	299,186.	
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain or (loss) from sale of assets not on line 10	380,065.			
	b Gross sales price for all assets on line 6a.	1,611,265.			
	7 Capital gain net income (from Part IV, line 2)		380,065.		
	8 Net short-term capital gain				
	9 Income modifications				
	10 a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	SEE STATEMENT 1				
12 Total. Add lines 1 through 11	388,122.	339,881.	25,444.		
	1,067,840.	1,019,599.	325,097.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	81,100.	4,055.		77,055.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	9,592.	480.		9,112.
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach sch)	SEE ST. 2	5,020.		5,020.
	c Other professional fees (attach sch)	SEE ST. 3	29,338.	27,718.	1,620.
	17 Interest				
	18 Taxes (attach schedule)(see instrs)	SEE STM 4	9,295.	3,401.	5,894.
	19 Depreciation (attach schedule) and depletion	SEE STMT 5	824.		
	20 Occupancy	10,816.	1,081.		9,735.
	21 Travel, conferences, and meetings	3,858.	385.		3,473.
	22 Printing and publications	1,372.	137.		1,235.
	23 Other expenses (attach schedule)	SEE STATEMENT 6	24,723.	2,471.	22,252.
	24 Total operating and administrative expenses. Add lines 13 through 23	175,938.	39,728.		135,396.
25 Contributions, gifts, grants paid	PART XV	797,050.		797,050.	
26 Total expenses and disbursements. Add lines 24 and 25	972,988.	39,728.	0.	932,446.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements.	94,852.				
b Net investment income (if negative, enter -0-)		979,871.			
c Adjusted net income (if negative, enter -0-)			325,097.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	314,634.	152,585.	152,585.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U.S. and state government obligations (attach schedule) STATEMENT 7	27,500.	27,500.	26,347.
	b	Investments – corporate stock (attach schedule) STATEMENT 8	9,264,819.	8,490,527.	12,824,905.
	c	Investments – corporate bonds (attach schedule) STATEMENT 9	3,707,858.	4,678,526.	4,812,841.
	11	Investments – land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)				
12	Investments – mortgage loans				
13	Investments – other (attach schedule) STATEMENT 10			500,000.	
14	Land, buildings, and equipment: basis	13,094.			
	Less: accumulated depreciation (attach schedule) SEE STMT 11	11,838.			
15	Other assets (describe SEE STATEMENT 12)	1.	40,333.		
16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	13,316,892.	13,390,727.	18,316,678.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe SEE STATEMENT 13)	22,797.	1,780.	
	23	Total liabilities (add lines 17 through 22)	22,797.	1,780.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>				
	26	Capital stock, trust principal, or current funds	13,294,095.	13,388,947.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds			
29	Total net assets or fund balances (see instructions)	13,294,095.	13,388,947.		
30	Total liabilities and net assets/fund balances (see instructions)	13,316,892.	13,390,727.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	13,294,095.
2	Enter amount from Part I, line 27a	2	94,852.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	13,388,947.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	13,388,947.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SEE STATEMENT 14			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss).....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	380,065.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8. </div>	3	0.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 – DO NOT COMPLETE.

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
Reserved				
Reserved				
Reserved				
Reserved				
Reserved				
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 – see instructions)			
1 a Exempt operating foundations described in section 4940(d)(2), check here. <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instructions)			
b Reserved		1	13,620.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	13,620.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	13,620.
6 Credits/Payments:			
a 2020 estimated tax pymts and 2019 overpayment credited to 2020	6 a		22,500.
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d		7	22,500.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	3.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	8,877.
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax 8,000. Refunded		11	877.

Part VII-A Statements Regarding Activities			Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition.		1 b		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c Did the foundation file Form 1120-POL for this year?		1 c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ 0. (2) On foundation managers ▶ \$ 0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0.				
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.		2		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.		3		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by <i>General Instruction T</i> .		5		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV.		7	X	
8 a Enter the states to which the foundation reports or with which it is registered. See instructions IL				
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation.		8 b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If 'Yes,' complete Part XIV.		9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		X

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions.		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions.		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address: ▶ N/A	X	
14 The books are in care of ▶ WILLIAM STENGEL Telephone no. ▶ (309) 788-0471 Located at ▶ 1800 3RD AVENUE, STE 302 ROCK ISLAND IL ZIP + 4 ▶ 61201		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. ▶ 15 N/A		
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1 a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1 b	N/A
Organizations relying on a current notice regarding disaster assistance, check here. ▶ <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?	1 c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions.)	2 b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 __ , 20 __ , 20 __ , 20 __		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If 'Yes,' did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2020.)	3 b	N/A
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4 b	X

BAA

Form 990-PF (2020)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5 a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is 'Yes' to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5 b	N/A
Organizations relying on a current notice regarding disaster assistance, check here.	<input type="checkbox"/>		
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).			
6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6 b	X
If 'Yes' to 6b, file Form 8870.			
7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ...	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7 b	
8 Is the foundation 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 15		89,892.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services.....		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	

2	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		

2		

All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3.....		0.

BAA

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1 a	16,041,431.
b	Average of monthly cash balances	1 b	274,741.
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	16,316,172.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	16,316,172.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	244,743.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,071,429.
6	Minimum investment return. Enter 5% of line 5	6	803,571.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	803,571.
2 a	Tax on investment income for 2020 from Part VI, line 5	2 a	13,620.
b	Income tax for 2020. (This does not include the tax from Part VI.)	2 b	
c	Add lines 2a and 2b	2 c	13,620.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	789,951.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	789,951.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	789,951.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	932,446.
b	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	932,446.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	932,446.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7.....				789,951.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.....			0.	
b Total for prior years: 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.....	141,364.			
b From 2016.....	159,696.			
c From 2017.....	129,601.			
d From 2018.....	122,286.			
e From 2019.....	7,770.			
f Total of lines 3a through e.....	560,717.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>932,446.</u>				
a Applied to 2019, but not more than line 2a...			0.	
b Applied to undistributed income of prior years (Election required – see instructions).....		0.		
c Treated as distributions out of corpus (Election required – see instructions).....	0.			
d Applied to 2020 distributable amount.....				789,951.
e Remaining amount distributed out of corpus..	142,495.			
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5.....	703,212.			
b Prior years' undistributed income. Subtract line 4b from line 2b.....		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.....		0.		
d Subtract line 6c from line 6b. Taxable amount – see instructions.....		0.		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount – see instructions.....			0.	
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021.....				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions).....	0.			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)..	141,364.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.....	561,848.			
10 Analysis of line 9:				
a Excess from 2016....	159,696.			
b Excess from 2017....	129,601.			
c Excess from 2018....	122,286.			
d Excess from 2019....	7,770.			
e Excess from 2020....	142,495.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶					
b Check box to indicate whether the foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test – enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed.					
c 'Support' alternative test – enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)

- 1 Information Regarding Foundation Managers:**
- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
 NONE
- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
 NONE
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
- Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.
- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:
 SEE STATEMENT 16
- b** The form in which applications should be submitted and information and materials they should include:
 SEE STATEMENT FOR LINE 2A
- c** Any submission deadlines:
 SEE STATEMENT FOR LINE 2A
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
 SEE STATEMENT FOR LINE 2A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 17				
Total				3 a ▶ 797,050.
b Approved for future payment				
Total				3 b ▶

Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return.

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

2020

Name DORIS & VICTOR DAY FOUNDATION INC	Employer identification number 36-6131596
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Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1 Total tax (see instructions).....		1	13,620.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1.....	2 a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method.....	2 b		
c Credit for federal tax paid on fuels (see instructions).....	2 c		
d Total. Add lines 2a through 2c.....		2 d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty.....		3	13,620.
4 Enter the tax shown on the corporation's 2019 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. ..		4	7,091.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3.....		5	7,091.

Part II Reasons for Filing – Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions. . .	9	11/15/20	12/15/20	3/15/21	6/15/21
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column.....	10	1,772.	1,773.	1,773.	1,773.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions.....	11	4,909.			3,091.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column.....	12		3,137.	1,364.	
13 Add lines 11 and 12.....	13		3,137.	1,364.	3,091.
14 Add amounts on lines 16 and 17 of the preceding column.....	14				409.
15 Subtract line 14 from line 13. If zero or less, enter -0-.....	15	4,909.	3,137.	1,364.	2,682.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-.....	16		0.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18.....	17			409.	
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column.....	18	3,137.	1,364.		

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 – no penalty is owed.

Part IV Figuring the Penalty

		(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (<i>C corporations with tax years ending June 30 and S corporations</i> : Use 3rd month instead of 4th month. <i>Form 990-PF and Form 990-T filers</i> : Use 5th month instead of 4th month.) See instructions.	19		6/15/21	
20	Number of days from due date of installment on line 9 to the date shown on line 19	20		92	
21	Number of days on line 20 after 4/15/2020 and before 7/1/2020	21			
22	Underpayment on line 17 $\times \frac{\text{Number of days on line 21}}{366} \times 5\% (0.05)$	22			
23	Number of days on line 20 after 6/30/2020 and before 10/1/2020	23			
24	Underpayment on line 17 $\times \frac{\text{Number of days on line 23}}{366} \times 3\% (0.03)$	24			
25	Number of days on line 20 after 9/30/2020 and before 1/1/2021	25			
26	Underpayment on line 17 $\times \frac{\text{Number of days on line 25}}{366} \times 3\% (0.03)$	26			
27	Number of days on line 20 after 12/31/2020 and before 4/1/2021	27		16	
28	Underpayment on line 17 $\times \frac{\text{Number of days on line 27}}{365} \times 3\% (0.03)$	28		0.54	
29	Number of days on line 20 after 3/31/2021 and before 7/1/2021	29		76	
30	Underpayment on line 17 $\times \frac{\text{Number of days on line 29}}{365} \times 3\%$	30		2.55	
31	Number of days on line 20 after 6/30/2021 and before 10/1/2021	31			
32	Underpayment on line 17 $\times \frac{\text{Number of days on line 31}}{365} \times \text{ \% }$	32			
33	Number of days on line 20 after 9/30/2021 and before 1/1/2022	33			
34	Underpayment on line 17 $\times \frac{\text{Number of days on line 33}}{365} \times \text{ \% }$	34			
35	Number of days on line 20 after 12/31/2021 and before 3/16/2022	35			
36	Underpayment on line 17 $\times \frac{\text{Number of days on line 35}}{365} \times \text{ \% }$	36			
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37		3.09	
38	Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns.	38			3.

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

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DORIS & VICTOR DAY FOUNDATION INC

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**STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME**

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME.....	\$ 248,582.	\$ 248,582.	
OTHER MISCELLANEOUS.....	3,154.		\$ 3,154.
PPP LOAN FORGIVENESS.....	22,797.		
ROYALTIES.....	91,299.	91,299.	
SHARED SERVICE REIMBURSED.....	22,290.		22,290.
TOTAL	<u>\$ 388,122.</u>	<u>\$ 339,881.</u>	<u>\$ 25,444.</u>

**STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TIMMER & ASSOCIATES.....	\$ 5,020.			\$ 5,020.
TOTAL	<u>\$ 5,020.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 5,020.</u>

**STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT.....	\$ 27,718.	\$ 27,718.		
OTHER CONTRACT SERVICES.....	1,620.			\$ 1,620.
TOTAL	<u>\$ 29,338.</u>	<u>\$ 27,718.</u>	<u>\$ 0.</u>	<u>\$ 1,620.</u>

**STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES.....	\$ 3,091.	\$ 3,091.		
PAYROLL TAXES.....	6,204.	310.		\$ 5,894.
TOTAL	<u>\$ 9,295.</u>	<u>\$ 3,401.</u>	<u>\$ 0.</u>	<u>\$ 5,894.</u>

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**STATEMENT 5
FORM 990-PF, PART I, LINE 19
ALLOCATED DEPRECIATION**

DATE ACQUIRED	COST BASIS	PRIOR YR DEPR	METHOD	RATE	LIFE	CURRENT YR DEPR	NET INVEST INCOME	ADJUSTED NET INCOME
10/15/07	11,682	9,737	S/L		15	779	0	0
MS SURFACE 9/01/15	1,363	1,228	S/L		5	45	0	0

**STATEMENT 6
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EQUIPMENT RENTAL AND MAINTENANCE..	\$ 669.	\$ 67.		\$ 602.
INSURANCE.....	5,049.	505.		4,544.
MEMBERSHIPS.....	1,340.	134.		1,206.
MISCELLANEOUS.....	3,446.	345.		3,101.
OFFICE SUPPLIES.....	12,968.	1,297.		11,671.
PROFESSIONAL DEVELOPMENT.....	20.			20.
SUBSCRIPTIONS.....	1,231.	123.		1,108.
TOTAL	\$ 24,723.	\$ 2,471.	\$ 0.	\$ 22,252.

**STATEMENT 7
FORM 990-PF, PART II, LINE 10A
INVESTMENTS - U.S. AND STATE GOVERNMENT OBLIGATIONS**

U.S. GOVERNMENT OBLIGATIONS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
VANGUARD US GOVT	COST	\$ 27,500.	\$ 26,347.
	TOTAL	\$ 27,500.	\$ 26,347.

**STATEMENT 8
FORM 990-PF, PART II, LINE 10B
INVESTMENTS - CORPORATE STOCKS**

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
VANGUARD MID-CAP GROWTH FUND	COST	\$ 346,040.	\$ 531,347.
VANGUARD PRIMECAP FUND ADMIRAL	COST	920,583.	1,402,515.
VANGUARD STRATEGIC EQUITY FUND	COST	393,129.	561,553.
VANGUARD TOT INTL STOCK IX ADMIRAL	COST	0.	0.
VANGUARD TOT INTL STOCK IX INST	COST	3,639,758.	4,996,755.
VANGUARD TOTAL STOCK MKT IDX ADM	COST	2,120,571.	3,933,557.
VANGUARD WINDSOR II FUND ADM	COST	1,070,446.	1,399,178.
TOTAL		\$ 8,490,527.	\$ 12,824,905.

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STATEMENT 9
FORM 990-PF, PART II, LINE 10C
INVESTMENTS - CORPORATE BONDS

<u>CORPORATE BONDS</u>	<u>VALUATION METHOD</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
VANGUARD INTER-TERM INVEST-GR ADM	COST	\$ 507,784.	\$ 527,412.
VANGUARD LONG-TERM INVEST-GR ADM	COST	445,580.	435,953.
VANGUARD SHORT-TERM INVEST-GR ADM	COST	786,593.	803,816.
VANGUARD TOT INTL BOND IX ADMIRAL	COST	1,235,855.	1,277,728.
VANGUARD TOTAL BOND MKT INDEX ADM	COST	1,702,714.	1,767,932.
	TOTAL	\$ <u>4,678,526.</u>	\$ <u>4,812,841.</u>

STATEMENT 10
FORM 990-PF, PART II, LINE 13
INVESTMENTS - OTHER

<u>OTHER SECURITIES</u>	<u>VALUATION METHOD</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
MINERAL RIGHTS	COST	\$ 0.	\$ 500,000.
	TOTAL	\$ <u>0.</u>	\$ <u>500,000.</u>

STATEMENT 11
FORM 990-PF, PART II, LINE 14
LAND, BUILDINGS, AND EQUIPMENT

<u>CATEGORY</u>	<u>BASIS</u>	<u>ACCUM. DEPREC.</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
MISCELLANEOUS	\$ 13,094.	\$ 11,838.	\$ 1,256.	\$ 0.
TOTAL	\$ <u>13,094.</u>	\$ <u>11,838.</u>	\$ <u>1,256.</u>	\$ <u>0.</u>

STATEMENT 12
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

<u>OTHER ASSETS</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
OTHER ASSETS.....	\$ 40,333.	
TOTAL	\$ <u>40,333.</u>	\$ <u>0.</u>

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**STATEMENT 13
FORM 990-PF, PART II, LINE 22
OTHER LIABILITIES**

PAYROLL LIABILITIES.....	\$	1,779.
ROUNDING.....		1.
	TOTAL \$	<u>1,780.</u>

**STATEMENT 14
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	1833.96 MID-CAP GROWTH FUND	PURCHASED	VARIOUS	7/02/2020
2	432.60 MID-CAP GROWTH FUND	PURCHASED	VARIOUS	12/17/2020
3	1367.578 MID-CAP GROWTH FUND	PURCHASED	VARIOUS	12/29/2020
4	137.847 MID-CAP GROWTH FUND	PURCHASED	VARIOUS	12/29/2020
5	1.522 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	7/02/2020
6	86.817 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	12/17/2020
7	118.058 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	12/29/2020
8	455.383 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	12/29/2020
9	47.798 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	12/29/2020
10	305.371 PRIMECAP FUND ADMIRAL	PURCHASED	VARIOUS	6/22/2021
11	583.645 SHORT-TERM INVEST-GR ADM	PURCHASED	VARIOUS	8/05/2020
12	603.003 SHORT-TERM INVEST-GR ADM	PURCHASED	VARIOUS	11/03/2020
13	656.345 SHORT-TERM INVEST-GR ADM	PURCHASED	VARIOUS	2/04/2021
14	678.526 SHORT-TERM INVEST-GR ADM	PURCHASED	VARIOUS	5/06/2021
15	679.267 STRATEGIC EQUITY FUND	PURCHASED	VARIOUS	7/02/2020
16	740.618 STRATEGIC EQUITY FUND	PURCHASED	VARIOUS	12/17/2020
17	8.582 STRATEGIC EQUITY FUND	PURCHASED	VARIOUS	12/29/2020
18	1311.383 STRATEGIC EQUITY FUND	PURCHASED	VARIOUS	12/29/2020
19	812.554 STRATEGIC EQUITY FUND	PURCHASED	VARIOUS	6/22/2021
20	3163.918 TOT INTL STOCK IX ADMIRAL	PURCHASED	VARIOUS	7/02/2020
21	1366.39 TOT INTL STOCK IX ADMIRAL	PURCHASED	VARIOUS	12/17/2020
22	7886.177 TOT INTL STOCK IX ADMIRAL	PURCHASED	VARIOUS	12/29/2020
23	506.297 TOT INTL STOCK IX ADMIRAL	PURCHASED	VARIOUS	6/22/2021
24	1694.494 TOTAL STOCK MKT IDX ADM	PURCHASED	VARIOUS	7/02/2020
25	174.862 TOTAL STOCK MKT IDX ADM	PURCHASED	VARIOUS	12/17/2020
26	3442.132 TOTAL STOCK MKT IDX ADM	PURCHASED	VARIOUS	12/29/2020
27	213.896 TOTAL STOCK MKT IDX ADM	PURCHASED	VARIOUS	6/22/2021
28	235.055 WINDSOR II FUND ADM	PURCHASED	VARIOUS	7/02/2020
29	435.755 WINDSOR II FUND ADM	PURCHASED	VARIOUS	12/17/2020
30	1660.427 WINDSOR II FUND ADM	PURCHASED	VARIOUS	12/29/2020
31	811.423 WINDSOR II FUND ADM	PURCHASED	VARIOUS	6/22/2021

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	51,222.		42,458.	8,764.			\$	8,764.
2	15,422.		10,015.	5,407.				5,407.
3	45,554.		32,508.	13,046.				13,046.
4	4,592.		3,277.	1,315.				1,315.
5	208.		176.	32.				32.
6	14,665.		10,038.	4,627.				4,627.
7	17,961.		14,038.	3,923.				3,923.
8	69,282.		54,149.	15,133.				15,133.

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STATEMENT 14 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
9	7,272.		5,684.	1,588.				\$ 1,588.
10	54,616.		36,312.	18,304.				18,304.
11	6,420.		6,215.	205.				205.
12	6,615.		6,422.	193.				193.
13	7,233.		7,038.	195.				195.
14	7,450.		7,277.	173.				173.
15	19,339.		21,062.	-1,723.				-1,723.
16	27,299.		22,965.	4,334.				4,334.
17	308.		267.	41.				41.
18	47,079.		40,780.	6,299.				6,299.
19	35,614.		25,268.	10,346.				10,346.
20	85,141.		80,645.	4,496.				4,496.
21	44,476.		34,854.	9,622.				9,622.
22	254,960.		201,668.	53,292.				53,292.
23	71,479.		51,971.	19,508.				19,508.
24	130,442.		98,238.	32,204.				32,204.
25	16,511.		10,153.	6,358.				6,358.
26	323,664.		200,356.	123,308.				123,308.
27	22,996.		12,478.	10,518.				10,518.
28	13,647.		14,502.	-855.				-855.
29	31,627.		26,884.	4,743.				4,743.
30	112,876.		103,057.	9,819.				9,819.
31	65,295.		50,445.	14,850.				14,850.
								TOTAL \$ 380,065.

STATEMENT 15
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
WILLIAM STENGEL JR 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	PRESIDENT 1.00	\$ 0.	\$ 0.	\$ 0.
REV. STACIE FIDLAR 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	VICE PRESIDENT 1.00	0.	0.	0.
KAI SWANSON 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	SECRETARY 1.00	0.	0.	0.
DAN FETES 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	TREASURER 4.00	0.	0.	0.

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STATEMENT 15 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JOHN PHILLIPS 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
JESSEY HULLON 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201-8019	DIRECTOR 1.00	0.	0.	0.
DAVID GEENEN 1800 3RD AVENUE, STE 302 ROCK ISLAND, IL 61201	EXECUTIVE DIR. 40.00	89,892.	0.	0.
		TOTAL \$ 89,892.	\$ 0.	\$ 0.

STATEMENT 16
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:
NAME: DORIS & VICTOR DAY FOUNDATION INC
CARE OF: BOARD OF DIRECTORS
STREET ADDRESS: 1800 3RD AVENUE, SUITE 302
CITY, STATE, ZIP CODE: ROCK ISLAND, IL 61201-8019
TELEPHONE: (309) 788-2300
E-MAIL ADDRESS:
FORM AND CONTENT: APPLICATION AVAILABLE ONLINE AT WWW.DAYFOUNDATION.ORG
SUBMISSION DEADLINES: MAY 1ST ANNUALLY
RESTRICTIONS ON AWARDS: RESTRICTED TO ILLINOIS AND IOWA QUAD CITIES AREA. NO RELIGIOUS PROGRAMS.

STATEMENT 17
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ALTERNATIVES FOR OLDER ADULTS 1803 7TH STREET MOLINE IL 61265		PC	EMERGENCY ASSISTANCE PROGRAM	\$ 60,000.

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**STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR**

<u>NAME AND ADDRESS</u>	<u>DONEE RELATIONSHIP</u>	<u>FOUND- ATION STATUS</u>	<u>PURPOSE OF GRANT</u>	<u>AMOUNT</u>
AMERICAN RED CROSS 1100 RIVER DRIVE MOLINE IL 61265		PC	CORONAVIRUS DISASTER RELIEF	\$ 2,000.
AUGUSTANA COLLEGE 639 38TH STREET ROCK ISLAND IL 61201		PC	SPEECH, LANGUAGE & HEARING SCHOLARSHIPS	3,000.
AZUBUIKE AFRICAN AMERICAN COUNCIL 225 E 2ND STREET, SUITE 108 DAVENPORT IA 52801		PC	FILM PROJECT	3,000.
BALLET QUAD CITIES 613 17TH STREET ROCK ISLAND IL 61201		PC	EDUCATIONAL PROGRAM	6,000.
BIG BROTHERS/BIG SISTERS 3247 E 35TH ST DAVENPORT IA 52801		PC	OPERATIONS FUNDING	1,500.
CAFE ON VINE PO BOX 3375 DAVENPORT IA 52808		PC	OPERATIONS FUNDING	3,000.
CHILD ABUSE COUNCIL 524 15TH STREET MOLINE IL 61265		PC	ABUSE PREVENTION	2,500.
CHILDREN'S THERAPY CENTER 4450 48TH AVENUE CT ROCK ISLAND IL 61201		PC	DISABLED CHILD BIKE CAMP	2,000.
CHRIST UMC OF THE QUAD CITIES 3801 7TH STREET EAST MOLINE IL 61244		PC	LITERACY PROGRAM	1,000.
CHRISTIAN CARE PO BOX 4176 ROCK ISLAND IL 61204		PC	MEAL SITE PROJECT	8,000.
CLOCK INC 321 24TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS FUNDING	4,000.
ROCK ISLAND COMMUNITY CARING CONFERENCE 1114 12TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS FUNDING	3,500.

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STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
COMMUNITY HOME PARTNERS 227 21ST STREET ROCK ISLAND IL 61201		PC	OPERATIONS SUPPORT	\$ 2,000.
DENKMANN ELEMENTARY 4101 22ND AVENUE ROCK ISLAND IL 61201		PC	YOUTH PROGRAM	1,000.
FAMILY RESOURCES 2800 EASTERN AVENUE DAVENPORT IA 52803		PC	SURVIVORS ASSISTANCE	1,000.
FIGGE ART MUSEUM 225 WEST SECOND STREET DAVENPORT IA 52801		PC	ART EDUCATION	2,000.
FIRST TEE OF THE QUAD CITIES 2430 RIVER DRIVE MOLINE IL 61265		PC	EDUCATIONAL PROGRAM	2,500.
FRIENDS OF HAUBERG CIVIC CENTER PO BOX 3174 ROCK ISLAND IL 61201		PC	STEM EDUCATION	2,000.
FRIENDS OF DOUGLAS PARK 2924 13TH AVENUE ROCK ISLAND IL 61201		PC	LIGHTING PROJECT	5,000.
GENESIS PHILANTHROPY 1227 E RUSHOLME STREET DAVENPORT IA 52803		PC	OPERATIONS SUPPORT	1,000.
GENESIUS THEATRE FOUNDATION 1120 40TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS FUNDING	1,000.
HABITAT FOR HUMANITY 3625 MISSISSIPPI AVENUE DAVENPORT IA 52807		PC	HOME REPAIR	2,000.
HAND IN HAND 3860 MIDDLE ROAD BETTENDORF IA 52722		PC	OPERATIONAL SUPPORT	3,800.
HEART OF HOPE MINISTRIES 1740 9TH AVENUE ROCK ISLAND IL 61201		PC	FOOD PANTRY	5,000.

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DORIS & VICTOR DAY FOUNDATION INC

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**STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR**

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
HUMILITY HOMES AND SERVICES 3805 MISSISSIPPI AVENUE DAVENPORT IA 52807		PC	PANDEMIC RESPONSE	\$ 5,000.
IA ABORTION ACCESS FUND PO BOX 721 CEDAR RAPIDS IA 52406		PC	OPERATIONAL SUPPORT	20,000.
ILLINOIS MAYA MINISTRIES 1800 3RD AVENUE, STE 618 ROCK ISLAND IL 61291		PC	OPERATIONS SUPPORT	1,500.
IOWA COUNCIL OF FOUNDATIONS 6919 VISTA DRIVE WEST DES MOINES IA 50266		PC	OPERATIONS SUPPORT	1,000.
IOWA JOBS FOR AMERICA'S GRADUATES 400 E 14TH STREET DES MOINES IA 50319		PC	EDUCATION MENTORING	2,500.
MARTIN LUTHER KING CENTER 630 MARTIN LUTHER KING DRIVE ROCK ISLAND IL 61201		PC	EDUCATION PROGRAM	10,000.
MILAN CHRISTIAN FOOD PANTRY PO BOX 333 MILAN IL 61264		PC	FOOD PANTRY	1,000.
NAHANT MARSH 4220 WAPELLO AVENUE DAVENPORT IA 52802		PC	EDUCATION PROGRAM	1,500.
NEST CAFE 830 43RD STREET ROCK ISLAND IL 61201		PC	RENT ASSISTANCE	2,000.
NEW KINGDOM TRAIL RIDERS 18929 81ST STREET SHERRARD IL 61281		PC	THERAPEUTIC PROGRAM	1,000.
PRAIRIE STATES LEGAL SERVICES 303 NORTH MAIN STREET #606 ROCKFORD IL 61101		PC	OPERATIONAL SUPPORT	5,000.
PUTNAM MUSEUM 1717 WEST 12TH STREET DAVENPORT IA 52804		PC	EDUCATION PROGRAM	2,000.

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STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

<u>NAME AND ADDRESS</u>	<u>DONEE RELATIONSHIP</u>	<u>FOUND- ATION STATUS</u>	<u>PURPOSE OF GRANT</u>	<u>AMOUNT</u>
QC BOTANICAL CENTER 2525 FOURTH AVENUE ROCK ISLAND IL 61201		PC	MORTGAGE ASSISTANCE	\$ 15,750.
QC HAVEN OF HOPE 901 20TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS SUPPORT	4,000.
QC SYMPHONY ORCHESTRA 327 NORTH BRADY STREET DAVENPORT IA 52801		PC	EDUCATIONAL SERIES	2,000.
QCCA WETLANDS CENTER 5100 8TH AVENUE MOLINE IL 61265		PC	EDUCATION PROGRAM	750.
QUAD CITIES CHAMBER OF COMMERCE 1601 RIVER DRIVE, STE 310 MOLINE IL 61265		PC	OPERATIONS SUPPORT	2,000.
QUAD CITIES HARM REDUCTION 1411 BRADY STREET DAVENPORT IA 52802		PC	OPERATIONS SUPPORT	3,000.
RI COUNTY 4H EXTENSION 321 WEST 2ND AVENUE MILAN IL 61264		PC	EDUCATION MENTORING	1,000.
RI-MILAN EDUCATION FOUNDATION 2101 6TH AVENUE ROCK ISLAND IL 61201		PC	STUDENT COMPUTER PURCHASE	5,000.
RIVERBEND FOOD BANK 4010 KIMMEL DRIVE DAVENPORT IA 52802		PC	FOOD PANTRY	2,500.
ROCK ISLAND PARKS FOUNDATION 4303 24TH STREET ROCK ISLAND IL 61201		PC	YOUTH SCHOLARSHIPS	2,000.
ROCKY RESOURCE ROOM 1400 25TH AVENUE ROCK ISLAND IL 61201		PC	BASIC NECESSITIES PROGRAM	3,000.
SCHOOL HEALTH LINK INC 2508 25TH STREET, STE A ROCK ISLAND IL 61201		PC	YOUTH HEALTHCARE	15,000.

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STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SCOTT COUNTY HOUSING COUNCIL 1212 WEST THIRD STREET, STE A DAVENPORT IA 52802		PC	AFFORDABLE HOUSING	\$ 3,000.
SKIP-A-LONG CHILD DEVELOPMENT 4210 44TH AVENUE MOLINE IL 61265		PC	OPERATIONS SUPPORT	1,000.
SPRING FORWARD LEARNING CENTER 2101 6TH AVENUE ROCK ISLAND IL 61201		PC	SUMMER LEARNING PROGRAM	132,500.
TAPESTRY FARMS 3009 GRAND AVENUE DAVENPORT IA 52803		PC	OPERATIONS SUPPORT	3,500.
TESTIMONIES OF HOPE 2216 N BLANCHARD STREET DAVENPORT IA 52804		PC	REMOTE COUNSELING	1,000.
THE ARC OF THE QUAD CITIES 4016 9TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS SUPPORT	2,000.
THY LOVING KINDNESS MINISTRY 2906 38TH STREET, APT A ROCK ISLAND IL 61201		PC	SOCKS FOR THE HOMELESS	1,000.
TRANSITIONS MENTAL HEALTH REHABILITATION PO BOX 4238 ROCK ISLAND IL 61204		PC	CHILD TRAUMA INTERVENTION	35,000.
TRINITY COLLEGE OF NURSING 2122 25TH AVENUE ROCK ISLAND IL 61201		PC	NURSING SCHOLARSHIPS	2,000.
UNITY HOUSE OF DAVENPORT 2625 CRESTVIEW DRIVE BETTENDORF IA 52722		PC	HOMELESS HOUSING	2,000.
WESTERN ILLINOIS UNIVERSITY FOUNDATION 1 UNIVERSITY CIRCLE MACOMB IL 61455		PC	COLLEGE SCHOLARSHIPS	5,000.

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**STATEMENT 17 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR**

<u>NAME AND ADDRESS</u>	<u>DONEE RELATIONSHIP</u>	<u>FOUND- ATION STATUS</u>	<u>PURPOSE OF GRANT</u>	<u>AMOUNT</u>
WORLD RELIEF 1852 16TH STREET MOLINE IL 61265		PC	FAMILY LITERACY PROGRAM	\$ 46,000.
WQPT 3300 RIVER DRIVE MOLINE IL 61265		PC	OPERATIONS SUPPORT	10,000.
WVIK 639 38TH STREET ROCK ISLAND IL 61201		PC	OPERATIONS SUPPORT	10,000.
YWCA OF THE QUAD CITIES 229 16TH STREET ROCK ISLAND IL 61201		PC	NEW BUILDING FUNDING	301,500.
CHAD UNTERSCHIEDT FUND 2049 42ND STREET ROCK ISLAND IL 61201		PC	SCHOLARSHIP FUND	1,000.
DELACERDA HOUSE 2827 7TH AVENUE, STE 11 ROCK ISLAND IL 61204		PC	HOMELESS HOUSING INSULATION	1,000.
GAINES CHAPEL 311 19TH STREET EAST MOLINE IL 61244		PC	OPERATIONS SUPPORT	750.
KINNA'S HOUSE OF LOVE 215 E 14TH STREET DAVENPORT IA 52803		PC	DOMESTIC ABUSE PREVENTION	1,000.
ONE HUMAN FAMILY QCA 2930 W LOCUST DAVENPORT IA 52804		PC	OPERATIONS SUPPORT	500.
RI COUNTY NAACP PO BOX 4701 ROCK ISLAND IL 61204		PC	OPERATIONS SUPPORT	1,000.
TOTAL				\$ <u>797,050.</u>

ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT
 Attorney General **KWAME RAOUL** State of Illinois
 Charitable Trust Bureau, 100 West Randolph
 11th Floor, Chicago, Illinois 60601

PMT #	_____
AMT	_____
INIT	_____

CO# 01003439

Report for the Fiscal Period:

Beginning 7/01/20

& Ending 6/30/21

Make Checks Payable to the Illinois Charity Bureau Fund

Check all items attached:

- Copy of IRS Return
- Audited Financial Statements
- Copy of Form IFC
- \$15.00 Annual Report Filing Fee
- \$100.00 Late Report Filing Fee

Federal ID # 36-6131596

Are contributions to the organization tax deductible? Yes No

Date Organization was created: 7/21/1965

LEGAL NAME DORIS & VICTOR DAY FOUNDATION INC	Year-end amounts	
MAIL ADDRESS 1800 3RD AVENUE, STE 302	A ASSETS	A \$ 13,390,727.
CITY, STATE ZIP CODE ROCK ISLAND, IL 61201	B LIABILITIES	B \$ 1,779.
	C NET ASSETS	C \$ 13,388,947.
I SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
D PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	%	D \$
E GOVERNMENT GRANTS & MEMBERSHIP DUES	%	E \$
F OTHER REVENUES SEE STATEMENT 1	100.00 %	F \$ 1,067,840.
G TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G \$ 1,067,840.
II SUMMARY OF ALL EXPENDITURES DURING THE YEAR:		
H OPERATING CHARITABLE PROGRAM EXPENSE	13.92 %	H \$ 135,396.
I EDUCATION PROGRAM SERVICE EXPENSE	%	I \$
J TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	13.92 %	J \$ 135,396.
J1 JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$		
K GRANTS TO OTHER CHARITABLE ORGANIZATIONS	81.92 %	K \$ 797,050.
L TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	95.83 %	L \$ 932,446.
M MANAGEMENT AND GENERAL EXPENSE	4.17 %	M \$ 40,542.
N FUNDRAISING EXPENSE	%	N \$
O TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100 %	O \$ 972,988.
III SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES: (Attach Attorney General Report of Individual Fundraising Campaign — Form IFC. One for each PFR.)		
PROFESSIONAL FUNDRAISERS:		
P TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100 %	P \$ 0.
Q TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q \$ 0.
R NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R \$ 0.
PROFESSIONAL FUNDRAISING CONSULTANTS:		
S TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S \$ 0.
IV COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:		
T NAME, TITLE: DAVID GEENEN, EXEC DIRECTOR		T \$ 81,100.
U NAME, TITLE:		U \$
V NAME, TITLE:		V \$
V CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) CODE CATEGORIES		List on back side of instructions CODE
W DESCRIPTION: YWCA OF THE QUAD CITIES		W # 111
X DESCRIPTION: SPRING FORWARD LEARNING CENTER		X # 111
Y DESCRIPTION: ALTERNATIVES FOR OLDER ADULTS		Y # 111

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

	YES	NO
1 WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?		X
2 HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?		X
3 DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?		X
4 HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?		X
5 IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		X
6 DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)		X
7a DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?		X
7b IF 'YES', ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ _____ ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ _____ ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ _____ ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$ _____		
8 DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?		X
9 HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?		X
10 WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?		X
11 LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS: <u>SEE STATEMENT 2</u>		
12 NAME AND TELEPHONE NUMBER OF CONTACT PERSON: <u>DANIEL FETES (309) 788-2300</u>		

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT – SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:
1 REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
2 FOR FEES DUE SEE INSTRUCTIONS.
3 REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

WILLIAM STENDEL

PRESIDENT or TRUSTEE (PRINT NAME)

COPY
 SIGNATURE

DATE

DANIEL FETES

TREASURER or TRUSTEE (PRINT NAME)

SIGNATURE

DATE

KIMBERLY S HOFFMAN CPA

PREPARER (PRINT NAME)
 ILVA0212L 11/05/19 ID: 2BN

Kimberly S. Hoffman 05/13/22
 SIGNATURE DATE

5/13/22

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STATEMENT 1
FORM AG990-IL, PAGE 1, LINE F
OTHER REVENUES

SHARED SERVICE REIMBURSED.....	\$	22,290.
PPP LOAN FORGIVENESS.....		22,797.
CAPITAL GAIN DISTRIBUTIONS.....		248,582.
DIVIDENDS.....		299,186.
OTHER MISCELLANEOUS.....		3,154.
REALIZED GAINS ON INVESTMENTS.....		380,065.
INTEREST.....		467.
GAS AND OIL ROYALTIES.....		91,299.
	TOTAL	<u>\$ 1,067,840.</u>

STATEMENT 2
FORM AG990-IL, PAGE 2, QUESTION 11
NAME AND ADDRESS OF INSTITUTIONS HOLDING THREE LARGEST ACCOUNTS

VANGUARD
MONROE, WI

TIAA BANK
CHARLOTTE, NC

QUAD CITY BANK & TRUST
BETTENDORF, IA

CLIENT 202003

DORIS & VICTOR DAY FOUNDATION INC

36-6131596

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	2020	2019	DIFF
REVENUE PER BOOKS			
INTEREST ON SAVINGS/TEMP CASH INVEST.....	467	1,254	-787
DIVIDENDS & INTEREST FROM SECURITIES.....	299,186	521,228	-222,042
NET GAIN (LOSS) - NONINV. ASSETS/DISP.....	380,065	138,036	242,029
OTHER INCOME.....	388,122	203,308	184,814
TOTAL REVENUE.....	1,067,840	863,826	204,014
EXPENSES PER BOOKS			
COMPENSATION OF OFFICERS, DIR, ETC.....	81,100	81,100	0
OTHER EMPLOYEE SALARIES AND WAGES.....	0	7,596	-7,596
PENSION PLANS, EMPLOYEE BENEFITS.....	9,592	7,992	1,600
ACCOUNTING FEES.....	5,020	65	4,955
OTHER PROFESSIONAL FEES.....	29,338	25,613	3,725
TAXES.....	9,295	14,187	-4,892
DEPRECIATION.....	824	1,056	-232
OCCUPANCY.....	10,816	11,962	-1,146
TRAVEL, CONFERENCES, AND MEETINGS.....	3,858	2,189	1,669
PRINTING AND PUBLICATIONS.....	1,372	0	1,372
OTHER EXPENSES.....	24,723	41,506	-16,783
TOTAL OPERATING/ADMINISTRATIVE EXP.....	175,938	193,266	-17,328
CONTRIBUTIONS, GIFTS, GRANTS PAID.....	797,050	639,382	157,668
TOTAL EXPENSES.....	972,988	832,648	140,340
EXCESS OF REVENUE OVER EXPENSES.....	94,852	0	94,852
NET INVESTMENT REVENUE			
INTEREST ON SAVINGS/TEMP CASH INVEST.....	467	1,254	-787
DIVIDENDS & INTEREST FROM SECURITIES.....	299,186	521,228	-222,042
CAPITAL GAIN NET INCOME.....	380,065	138,036	242,029
OTHER INCOME.....	339,881	89,284	250,597
TOTAL REVENUE.....	1,019,599	749,802	269,797
NET INVESTMENT EXPENSES			
COMPENSATION OF OFFICERS, DIR, ETC.....	4,055	4,055	0
PENSION PLANS, EMPLOYEE BENEFITS.....	480	400	80
ACCOUNTING FEES.....	0	65	-65
OTHER PROFESSIONAL FEES.....	27,718	25,115	2,603
TAXES.....	3,401	7,751	-4,350
OCCUPANCY.....	1,081	1,196	-115
TRAVEL, CONFERENCES, AND MEETINGS.....	385	219	166
PRINTING AND PUBLICATIONS.....	137	0	137
OTHER EXPENSES.....	2,471	1,885	586
TOTAL OPERATING/ADMINISTRATIVE EXP.....	39,728	40,686	-958
TOTAL EXPENSES.....	39,728	40,686	-958
NET INVESTMENT INCOME.....	979,871	709,116	270,755
TAX COMPUTATION			
TAX ON NET INVESTMENT INCOME.....	13,620	7,091	6,529
TAX ON INVESTMENT INCOME.....	13,620	0	13,620
PAYMENTS AND CREDITS			
OVERPAYMENT CREDITED FROM PRIOR YEAR.....	4,909	0	4,909
ESTIMATED TAX PAYMENTS.....	17,591	12,000	5,591
TOTAL PAYMENTS AND CREDITS.....	22,500	12,000	10,500

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	2020	2019	DIFF
REFUND OR AMOUNT DUE			
UNDERPAYMENT PENALTY.....	3	0	3
TAX DUE.....	0	0	0
OVERPAYMENT.....	8,877	4,909	3,968
OVERPAYMENT CREDITED TO NEXT YEAR.....	8,000	4,909	3,091
REFUND.....	877	0	877
TAX RATES			
MARGINAL TAX RATE.....	1.0%	0.0%	1.0%
EFFECTIVE TAX RATE.....	1.4%	0.0%	1.4%
ADJUSTED NET INCOME REVENUE			
INTEREST ON SAVINGS/TEMP CASH INVEST.....	467	1,254	-787
DIVIDENDS & INTEREST FROM SECURITIES.....	299,186	521,228	-222,042
INCOME MODIFICATIONS.....	0	82,461	-82,461
OTHER INCOME.....	25,444	18,220	7,224
TOTAL REVENUE.....	325,097	623,163	-298,066
ADJUSTED NET INCOME EXPENSES			
TOTAL OPERATING/ADMINISTRATIVE EXP.....	0	0	0
TOTAL EXPENSES.....	0	0	0
ADJUSTED NET INCOME.....	325,097	0	325,097
CHARITABLE PURPOSES DISBURSEMENTS			
COMPENSATION OF OFFICERS, DIR, ETC.....	77,055	77,045	10
OTHER EMPLOYEE SALARIES AND WAGES.....	0	7,596	-7,596
PENSION PLANS, EMPLOYEE BENEFITS.....	9,112	7,592	1,520
ACCOUNTING FEES.....	5,020	0	5,020
OTHER PROFESSIONAL FEES.....	1,620	498	1,122
TAXES.....	5,894	6,436	-542
OCCUPANCY.....	9,735	10,766	-1,031
TRAVEL, CONFERENCES, AND MEETINGS.....	3,473	1,970	1,503
PRINTING AND PUBLICATIONS.....	1,235	0	1,235
OTHER EXPENSES.....	22,252	32,762	-10,510
TOTAL OPERATING/ADMINISTRATIVE EXP.....	135,396	144,665	-9,269
CONTRIBUTIONS, GIFTS, GRANTS PAID.....	797,050	639,382	157,668
TOTAL EXPENSES AND DISBURSEMENTS.....	932,446	784,047	148,399
NET ASSETS OR FUND BALANCES			
NET ASSETS/FUND BAL. AT BEG. OF YEAR.....	13,294,095	13,258,751	35,344
EXCESS OF REVENUE OVER EXPENSES.....	94,852	31,178	63,674
NET ASSETS/FUND BAL. AT END OF YEAR.....	13,388,947	13,289,929	99,018

2020**ILLINOIS AG990-IL TAX SUMMARY****PAGE 1****CLIENT 202003****DORIS & VICTOR DAY FOUNDATION INC****36-6131596**

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	2020	2019	DIFF
YEAR-END AMOUNTS			
ASSETS.....	13,390,727	13,312,726	78,001
LIABILITIES.....	1,779	22,797	-21,018
NET ASSETS.....	13,388,947	13,289,929	99,018
REVENUE ITEMS			
OTHER REVENUES.....	1,067,840	863,826	204,014
TOTAL REVENUE, INCOME, AND CONTRIBS.....	1,067,840	863,826	204,014
EXPENDITURES			
OPERATING CHAR. PROGRAM EXP.....	135,396	144,665	-9,269
TOTAL CHAR. PROGRAM SERVICE EXP.....	135,396	144,665	-9,269
GRANTS TO OTHER CHAR ORGANIZATIONS.....	797,050	639,382	157,668
TOTAL CHAR. PROGRAM EXPENDITURE.....	932,446	784,047	148,399
MANAGEMENT AND GENERAL EXPENSE.....	40,542	48,601	-8,059
TOTAL EXPENDITURES THIS PERIOD.....	972,988	832,648	140,340
PAID FUNDRAISER AND CONSULTANT ACTIVITIES			
NET RECEIVED BY THE CHARITY.....	0	0	0
TOTAL AMT PAID TO PF CONSULTANTS.....	0	0	0

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FORMS NEEDED FOR THIS RETURN

FEDERAL: 990-PF, 990-W, 2220, 8868
ILLINOIS: AG990-IL

TAX RATES

PRIVATE FOUNDATION	MARGINAL	EFFECTIVE
FEDERAL	1.0 %	1.4 %

UNDERPAYMENT PENALTY

FEDERAL PRIVATE FOUNDATION	3.
----------------------------	----

CARRYOVERS TO 2021

NONE

UNDISTRIBUTED INCOME CARRYOVERS TO 2021

2016 EXCESS DISTRIBUTIONS	159,696.
2017 EXCESS DISTRIBUTIONS	129,601.
2018 EXCESS DISTRIBUTIONS	122,286.
2019 EXCESS DISTRIBUTIONS	7,770.
2020 EXCESS DISTRIBUTIONS	142,495.

FEDERAL ESTIMATES

FORM 990-PF

	ESTIMATE	OVERPAYMENT	BALANCE
11/15/21	4,000.	4,000.	0.
12/15/21	4,000.	4,000.	0.
3/15/22	4,000.	0.	4,000. PAID
6/15/22	4,000.	0.	4,000. PAID
TOTAL	\$ 16,000.	\$ 8,000.	\$ 8,000.

2020

FEDERAL WORKSHEETS

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DORIS & VICTOR DAY FOUNDATION INC

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AVERAGE MONTHLY CASH BALANCES
FORM 990-PF, PART X, LINE 1B

CASH BAL.	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
	461,961	462,265	310,734	274,426	235,527	292,279	326,852	294,524	287,027	175,210	66,939	109,143
AVERAGES	461,961	462,265	310,734	274,426	235,527	292,279	326,852	294,524	287,027	175,210	66,939	109,143
TOTALS	3,296,887											

NUMBER OF MONTHS 12

AVERAGE MONTHLY CASH BALANCES 274,741

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	CUR 179 BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179 BONUS/SP. DEPR.	PRIOR DEC. BAL DEPR.	PRIOR SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF															
1	LEASEHOLD IMPROVEMENTS	10/15/07			11,682					11,682	9,737	S/L	15		779
2	DESK	2/05/13			49					49	49	S/L	5		0
3	MS SURFACE	9/01/15			1,363					1,363	1,228	S/L	5		45
	TOTAL				13,094	0	0	0	0	13,094	11,014				824
	TOTAL DEPRECIATION				13,094	0	0	0	0	13,094	11,014				824
	GRAND TOTAL DEPRECIATION				13,094	0	0	0	0	13,094	11,014				824

Form **990-W**

FOR FORM 990-PF PURPOSES
**Estimated Tax on Unrelated Business Taxable
 Income for Tax-Exempt Organizations**
 (and on Investment Income for Private Foundations)

OMB No. 1545-0047

(Worksheet)

2021

Department of the Treasury
 Internal Revenue Service

► Go to www.irs.gov/Form990W for instructions and the latest information.
 ► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year.....	1	
2	Tax on the amount on line 1. See instructions for tax computation.....	2	
3	Alternative minimum tax for trusts. See instructions.....	3	
4	Total. Add lines 2 and 3.....	4	
5	Estimated tax credits. See instructions.....	5	
6	Subtract line 5 from line 4.....	6	
7	Other taxes. See instructions.....	7	
8	Total. Add lines 6 and 7.....	8	
9	Credit for federal tax paid on fuels. See instructions.....	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions.....	10a	16,000.
b	Enter the tax shown on the 2020 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c.....	10b	
c	2021 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c.....	10c	16,000.

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions.....	11	11/15/21	12/15/21	3/15/22	6/15/22
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization".....	12	4,000.	4,000.	4,000.	4,000.
13	2020 Overpayment. See instructions.....	13	4,000.	4,000.	0.	0.
14	Payment due (Subtract line 13 from line 12).....	14	0.	0.	4,000.	4,000.

BAA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2021)

PAID

PAID