DLN: 93493318019333 OMB No. 1545-0047 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 www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury

For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization CAPITAL RESEARCH CENTER D Employer identification number B Check if applicable: ☐ Address change 52-1289734 ■ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1513 16TH STREET NW ☐ Amended return  $\square$  Application pending (202) 483-6900 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC  $\,$  20036 G Gross receipts \$ 8,295,781 Name and address of principal officer: H(a) Is this a group return for SCOTT WALTER □Yes ☑No subordinates? 1513 16TH STREET NW H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No included? 4947(a)(1) or If "No," attach a list. See instructions. Website: ► WWW.CAPITALRESEARCH.ORG **H(c)** Group exemption number ▶ L Year of formation: 1983 M State of legal domicile: DC K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ 1 Briefly describe the organization's mission or most significant activities: CRC CONDUCTS RESEARCH ON THE INFLUENCE SECTOR, INCLUDING THE ADVOCACY GROUPS, THINK TANKS, FOUNDATIONS, ACTIVISTS, OTHER OPINION LEADERS, AND GROUPS INFLUENCING THE PUBLIC POLICY PROCESS Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 29 8 6 Total number of volunteers (estimate if necessary) . . Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, Part I, line 11 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . 5,737,290 7,055,273 Ravenue **9** Program service revenue (Part VIII, line 2g) . . . 3,818 1,428 317,783 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . 115,693 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 24,117 8,743 6,083,008 7,181,137 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . 135,000 10,000 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 2,711,238 3,070,488 0 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶2,194,233 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 3,950,706 4,176,228 6,796,944 7,256,716 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 . -713,936 -75,579 Net Assets or Fund Balances Beginning of Current Year **End of Year** 9,012,118 20 Total assets (Part X, line 16) . 10,585,659 21 Total liabilities (Part X, line 26) . . . . . 558,457 519,827 22 Net assets or fund balances. Subtract line 21 from line 20 . 10,027,202 8,492,291 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here SCOTT WALTER PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check  $\square$  if 2023-11-14 P00633304 Paid

Firm's address ► 1020 19TH STREET NW SUITE 800

WASHINGTON, DC 20036

May the IRS discuss this return with the preparer shown above? (see instructions) .

Firm's name ► HAN GROUP LLC

**Preparer** Use Only self-employed

Firm's FIN

Phone no. (202) 293-7000

☑ Yes ☐ No

Form	990 (2022)					Page <b>2</b>					
Pa	rt III Statement	of Program Servi	ce Accomplis	hments							
	Check if Scheo	dule O contains a resp	onse or note to	any line in this Part III		🗹					
1	Briefly describe the o	rganization's mission:		•							
					GROUPS, THINK TANKS, FOUNDATIO	ONS, ACTIVISTS, OTHER					
OPIN	ION LEADERS, AND GR	ROUPS INFLUENCING	THE PUBLIC POL	ICY PROCESS.							
	Did the americation				which was not listed as						
2	3	, ,	, ,	,	which were not listed on	□Yes ☑No					
	'					∟ Yes ⊻ No					
_	,	se new services on So									
3	Did the organization cease conducting, or make significant changes in how it conducts, any program										
						☐ Yes 🗹 No					
	If "Yes," describe the	se changes on Schedu	ıle O.								
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total										
		ue, if any, for each pro			or grants and anocations to others,	the total					
4a	(Code:	) (Expenses \$	1,777,171	including grants of \$	) (Revenue \$	1,428 )					
	See Additional Data				· ·						
4b	(Code:	) (Expenses \$	1,108,845	including grants of \$	) (Revenue \$	)					
	See Additional Data	, , , ,	, ,			,					
4c	(Code:	) (Expenses \$	386,079	including grants of \$	10,000 ) (Revenue \$	)					
	See Additional Data										
	See Additional Data	Table									
4d	Other program service	ces (Describe in Sched	lule O.)								
	(Expenses \$	1,264,979 ind	luding grants of	\$	) (Revenue \$	)					
4e	Total program serv	/ice expenses ►	4,537,0	74							

15

16

17

18

19

Checklist of Required Schedules

13

14a

14b

15

16

17

18

19

20a

20b

21

Yes

Form **990** (2022)

Nο

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🔰	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> 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 to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> 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," complete Schedule D,</i> 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
0	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
1	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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	Yes	
	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b		No

С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. . . . . .

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

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'a	tiv Checklist of Required Schedules (continued)			
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22	Yes	No No
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III  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? If "Yes,"	23	Yes	
3	complete Schedule J			
	complete Schedule K. If "No," go to line 25a	24a		No
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		N
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		N
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		N
	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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		N
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		N
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		N
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		N
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		N
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		N
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	26		N
	organization? If "Yes," complete Schedule R, Part V, line 2	36		I
	organization? If "Yes," complete Schedule R, Part V, line 2	36		N

	is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No				
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes					
Pa	tV 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   65							
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b	Ī						
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 <sub>c</sub>	Yes					

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
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	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	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)?  If "Yes," enter the name of the foreign country:	4a		No
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b		
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?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
e	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?	71 7g		INO
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> 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		
LO	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
L1	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
_	12b			
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	The organization is needed to issue quantities plants			
	150	142		No
	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		
L5	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 other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?. If "Yes," complete Form 6069.	17		

Pai	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "Nines 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			
	Enter the number of voting members of the governing body at the end of the tax year   1a   7	$\longrightarrow$	Yes	No
14	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			
b	similar committee, explain in Schedule O.  Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
3		3		No No
4	of officers, directors or trustees, or key employees to a management company or other person?	4		No
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No No
6	Did the organization become aware during the year of a significant diversion of the organization sassets:	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 Revenu	e Code	Yes	N -
10-	Did the organization have local chapters, branches, or affiliates?	10a	res	No 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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  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	Yes	
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	104	163	
	status with respect to such arrangements?	16b	Yes	
	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CT , GA , IL , KS , , MO , NH , NJ , NY , NC , OH , OR , PA , R WV , WI , FL , OK			
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 Cother (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: >SCOTT WALTER 1513 16TH STREET NW WASHINGTON, DC 20036 (202) 483-6900			

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

- year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (box 5 of Form W-2, box 6 of 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

Check this box if neither the organization no (A)  Name and title	(B) Average hours per week (list any hours	Position than of is b	on (de one be	(C o no ox, u in of	) t ch unle fice	eck moss pers	ore son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related 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) MICHAEL FRANC	1.00			,,						
CHAIRMAN (UNTIL NOVEMBER 2022)		×		Х				0	0	0
(2) ROBERT E CHALLEY TRUSTEE	1.00	х						0	0	0
(3) GORDON CUMMINGS TRUSTEE	1.00	х						0	0	0
(4) EDWIN MEESE III TRUSTEE	1.00	х						0	0	0
(5) WILLIAM MEYERSOHN TRUSTEE	1.00	х						0	0	0
(6) ERIC O'KEEFE TRUSTEE	1.00	х						0	0	0
(7) THOMAS S WINTER TRUSTEE	1.00	×						0	0	0
(8) SARAH ATKINS TRUSTEE (SINCE NOV 2022)	1.00	х						0	0	0
(9) SCOTT WALTER PRESIDENT	40.00			х				358,024	0	74,496
(10) CHRISTOPHER KRUKEWITT CHIEF FINANCIAL & OPERATIONS OFFICER	40.00			х				101,880	0	25,249
(11) KRISTEN EASTLICK SENIOR VICE PRESIDENT	40.00				×			178,674	0	35,149
(12) MICHAEL E HARTMANN SENIOR FELLOW AND DIRECTOR	40.00				x			168,021	0	34,977
(13) DAN THOMPSON  VP OF PHILANTHROPY & DEVELOPMENT	40.00					х		147,419	0	36,764
(14) JON RODEBACK MANAGING EDITOR&DIRECTOR OF CONTENT	40.00					х		115,612	0	13,118
(15) MICHAEL K WATSON RESEARCH DIRECTOR	40.00					х		108,922	0	15,603
(16) SARAH LEE DIRECTOR OF COMMS. & EXT. RELATIONS	40.00					х		100,341	0	19,393

	990 (2022)														Page <b>8</b>
Par	t VII Section A. Officers, Direct		s, Key	Emp			and	High			ate		(cont		
	<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related	than o	one bo	oox, u an of tor/t	ot che unles fficer trust		son a	Rep comp fro orga	(D) portable pensation om the anization •2/1099-		(E) Reportable compensation from related organizations (W-2/1099-		Estim amount comper from organiza	nated of other nsation the
		organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		1099-NEG	2)	MISC/1099-NE		rela organiz	ted
				<u> </u>		<u></u>	<u></u>		<u> </u>		$\exists$		+		
				<del>-</del>			_				$\overline{}$		<del>-</del>		
													$\pm$		
				_	-		_				$\dashv$		+		
				<u></u>		F	$\vdash$					<u> </u>	$\downarrow$		
156	Sub-Total	!	<u></u>						<u></u>	—			$\dashv$		
c T	otal from continuation sheets to Pa	•					<b>&gt;</b>	_					$\pm$		
d T	Total (add lines 1b and 1c)		to thos			-bov	e) who	rec		.,278,893 ore than	\$10		0		254,749
3				· L			1	h:	· hast or	neal		····leves on		Yes	No
	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>	J for such individ	idual .	•	•	•	•	•	• •		•	· .	3		No
4	For any individual listed on line 1a, is organization and related organization individual											the	4	Yes	
5	Did any person listed on line 1a receive services rendered to the organization									ation or in	ndi\ •	/idual for	5		No
	ction B. Independent Contract			<del></del>		_					_				<u>'</u>
1	Complete this table for your five high from the organization. Report comper											n's tax year.	mpen		
	Name	(A) and business addre	ess		_	_						(B) ription of services			<b>C)</b> ensation
22780	SAN MEREDITH  D INDIAN CREEK DRIVE SUITE 100										TER	OUTREACH / SUPPO	ORT		627,714
НВР	ES, VA 20166									SUPPORT	ΓER	OUTREACH	-		275,926
HAGEF	REDERICK STREET RSTOWN, MD 21740 ADD FIREWATER LLC									MEDIA PI	ROE	ALCTION			200,000
706 N	CAROLINA AVENUE SE IINGTON, DC 20003										10	UCIIC.			E,
RIGHT	T OF CENTER LLC RIDGEWATER DRIVE									WEB TRA	FFI	C CONSULTANTS			165,000
	HENS CITY, VA 22655									ADVERTI	ISIN	.G	—		156,128
LOS AI	0X 883654 NGELES, CA 90088		. 12						- 1	<u> </u>					
	otal number of independent contractor ompensation from the organization • {		; not IIm	itea ı	;o th	ose	listea	abov	/e) who i	receivea	mo	re than \$100,00	)0 or	Form <b>9</b> 9	2 (202
														Form 95	<b>20</b> (202.

		(2022)	of F	Pavar						Page <b>9</b>
Part	VIII				resno	onse or note to any	line in this Part VIII			$\square$
		Check if Sched	uuie	O CONCAINS A	тезро	inse of flote to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s	1a	Federated campaig	gns	1	La		L	revenue		312 311
Gifts, Grants ilar Amounts	b	Membership dues		. [1	lb					
S. Gr	С	Fundraising events	s.	· [1	Lc					
ifts, ar A		Related organization		<u> </u>	Ld					
s, G imil	_	Government grants (		· <u></u>	Le					
lion sr Si	Ť	All other contributions and similar amounts above	not in	actuded	1f	7,055,273				
ibu Othe	g	Noncash contributions lines 1a - 1f:\$	s incl							
Contributions, Gifts and Other Similar	L	Total. Add lines 1a	. 16		Lg	25,994 <b>&gt;</b>				
<u>ۃ ت</u>	_"	Total. Add lines 18	a-11	• • •		Business Code	7,055,273			
	2a	PUBLICATION					1,428	1,428		+
ë						900099				
Nen	Ь									
Program Service Revenue	_	-								
ar vic	C									
Š	d									
graf	e									
Æ										
		All other program								
		Total. Add lines 2 Investment income				1,428	1	1		
	s	imilar amounts) .	•		•	<b>&gt;</b>	115,711			115,711
		Income from invest Royalties			npt bo	ond proceeds				
		Royalties	г. П	(i) Rea	<u>.                                      </u>	(ii) Personal				
	<u>_</u> _	Gross rents	ا ا			,	1			
		Less: rental	6a				+			
		expenses	6b							
	C	Rental income or (loss)	6с							
	d	Net rental income	or (	(loss)						
	(i) Secur			ies	(ii) Other	_				
	7a Gross amount from sales of assets other 7a 1,114,63		14,626	5						
		than inventory			_					
	b Less: cost or other basis and 7b 1,114,644			ı						
		sales expenses					+			
	l	Gain or (loss)	7c		-18	3				
		Net gain or (loss) Gross income from fu			· ·		-18			-18
ne	"			of						
ve		See Part IV, line 18			8a					
Other Revenue	Ь	Less: direct expen	ises		8b					
the	C	Net income or (los	ss) fr	om fundraisi	ng ev	ents 🕨	1			
0	9a	Gross income from	gami	ing activities.						
	١.	See Part IV, line 19			9a		_			
	l	Less: direct expen Net income or (los			9b	ies	_			
			,,,,,,	om gammig c		les •				
	10a	Gross sales of inve returns and allowa	entor	ry, less	10a					
	   b	Less: cost of good			10a		-			
		: Net income or (los			nvent	ory <b>&gt;</b>	_			
		Miscellaneo				Business Code	6 407			6 407
	11	<b>a</b> MISCELLANEOUS	INC	OME		900099	6,497			6,497
		DEIMPURCEMENT	DEV	(ENILIE		900099	2,246			2,246
		REIMBURSEMENT	κEV	ENUE		300033				2,210
	۰									
	d	All other revenue								
	e	Total. Add lines 1	1a-1	11d		>	8,743			
	12	Total revenue. S	ee ir	nstructions .			7,181,137			0 124,436
							/,101,13/	1,420	İ	50rm 000 (2022)

orm	990 (2022)				Page <b>1(</b>
Par	t IX Statement of Functional Expenses		All able and annual state of		(4)
	Section 501(c)(3) and 501(c)(4) organizations must co		<u> </u>	<u> </u>	
	Check if Schedule O contains a response or note to an	,	(B)	(C)	🗸
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,000	10,000		
	Grants and other assistance to domestic individuals. See Part IV, line 22				
Ç	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	976,470	660,814	113,223	202,433
(	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7 (	Other salaries and wages	1,588,351	1,074,896	184,173	329,282
	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	138,188	93,519	16,022	28,647
9 (	Other employee benefits	191,776	129,784	22,235	39,757
10	Payroll taxes	175,703	118,906	20,372	36,425
11	Fees for services (non-employees):				
a l	Management				
b l	Legal	12,297	12,297		
c /	Accounting	27,232		27,232	
d l	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f I	Investment management fees	61,338		61,338	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	1,574,821	1,446,340	12,768	115,713
12 /	Advertising and promotion	376,239	269,154		107,085
13 (	Office expenses	1,667,720	457,338	40,697	1,169,685
	Information technology	62,739	43,147	5,993	13,599
15	Royalties				
16	Occupancy	74,217	55,899	6,570	11,748
17	Travel	194,963	109,730	5,320	79,913
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
<b>22</b> [	Depreciation, depletion, and amortization	60,121	40,686	6,971	12,464
23	Insurance	21,520	14,564	2,495	4,461
1	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	DONOR PREMIUMS	43,021			43,021
b					
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	7,256,716	4,537,074	525,409	2,194,233
26 :	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
(	Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2022)

Assets 30

31

32

33

Page **11** 

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

		Beginning of year		End of year
1	Cash-non-interest-bearing	694,462	1	946,2
2	Savings and temporary cash investments		2	

469.405 Pledges and grants receivable, net . . 3 4 Accounts receivable, net Loans and other receivables from any current or former officer, director,

96,752 trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6

7 Notes and loans receivable, net . . . Assets 8 Inventories for sale or use . . Prepaid expenses and deferred charges . 49,116 9 97,990 10a Land, buildings, and equipment: cost or other

10a 2.019,413 basis. Complete Part VI of Schedule D 10b 1,599,789 386,783 10c 419,624 b Less: accumulated depreciation 11 Investments—publicly traded securities . 8,412,784 11 6,506,077 12 Investments—other securities. See Part IV, line 11 . 12 573,109 13 573,109 13 Investments—program-related. See Part IV, line 11 14 14 Intangible assets .

0 15 38,492 15 Other assets. See Part IV, line 11 . . . 10,585,659 16 16 Total assets. Add lines 1 through 15 (must equal line 33) . 17 Accounts payable and accrued expenses 558,457 17 481,335 18 18 Grants payable . 19 19 Deferred revenue . . 20 Tax-exempt bond liabilities . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D

9,012,118 Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 22 23 Secured mortgages and notes payable to unrelated third parties 23

24 24 Unsecured notes and loans payable to unrelated third parties .

0 25 38,492 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D

558.457 519.827 26 Total liabilities. Add lines 17 through 25 . . 26 Organizations that follow FASB ASC 958, check here <a> \square</a> and complete lines 27, 28, 32, and 33. 27 9,164,996 27 7.940,559 Net assets without donor restrictions

28 862,206 28 551,732 Net assets with donor restrictions .

Fund Balances Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \\ \text{and} \end{align\*}

complete lines 29 through 33. ō 29 29 Capital stock or trust principal, or current funds

30

31

32

33

8,492,291

9,012,118

Form 990 (2022)

10,027,202

10,585,659

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

9	Other	changes in net assets or fund balances (explain in Schedule O) 9	9				
10	Net as	sets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	)	8,492,29			
Pa	art XII	Financial Statements and Reporting					
		Check if Schedule O contains a response or note to any line in this Part XII				<b>✓</b>	
					Yes	No	
1		nting method used to prepare the Form 990:					

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3a

3h

Yes

Yes

Nο

No

Form 990 (2022)

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

separate basis, consolidated basis, or both:

Separate basis

consolidated basis, or both: ✓ Separate basis

Audit Act and OMB Circular A-133?

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

## Additional Data

Software ID:

Software Version:

**EIN:** 52-1289734

Name: CAPITAL RESEARCH CENTER

Form 990 (2022)

### Form 990, Part III, Line 4a:

CRC CONDUCTS RESEARCH ON THE INFLUENCE SECTOR, INCLUDING THE ADVOCACY GROUPS, THINK TANKS, FOUNDATIONS, ACTIVISTS, OTHER OPINION LEADERS, AND

GROUPS INFLUENCING THE PUBLIC POLICY PROCESS. CRC STRIVES TO PRODUCE IRONCLAD RESEARCH THAT IS USED TO DEVELOP COMMUNICATIONS PRODUCTS TO EDUCATE THE PUBLIC ON HOW SPECIAL INTERESTS ARE PROTECTED. CRC SHARES ITS RESEARCH THROUGH REGULAR PRINT PUBLICATIONS. A DYNAMIC WEBSITE (CAPITALRESEARCH ORG), EDUCATIONAL VIDEOS, SOCIAL MEDIA CHANNELS, A PODCAST AND OTHER OUTLETS, CRC'S RESEARCH SPECIALTIES INCLUDE INVESTIGATING

CHARITABLE GROUPS ENGAGING IN POLICY (AND POTENTIALLY POLITICAL) ADVOCACY; OTHER TAX-EXEMPT SPECIAL INTEREST ENTITIES AND SOCIAL WELFARE GROUPS; FOUNDATIONS, INDIVIDUAL DONORS, AND GRANT-MAKING ORGANIZATIONS; LABOR UNIONS, THEIR MISSION, FINANCIAL SUPPORT, ORGANIZING CAMPAIGNS, SOURCES OF SUPPORT, AND POLITICAL ACTIVITIES. CRC ALSO PROFILES OTHER INFLUENCERS, INCLUDING THE MEDIA AND WELL-KNOWN ACTIVISTS AND POLICYMAKERS, CRC PRODUCED EIGHT (8) PRINT/MAGAZINE PUBLICATIONS OF LONG-FORM ARTICLES AND POPULATED THE WEBSITE WITH ROUGHLY TEN POSTS PER WEEK OF ORIGINAL RESEARCH AND COMMENTARY.

### Form 990, Part III, Line 4b: INFLUENCE WATCH: CRC MAINTAINS INFLUENCEWATCH.ORG, A WIKI-STYLE ONLINE RESOURCE OF FACT-BASED, ACCURATE DESCRIPTIONS OF THE VARIOUS INFLUENCERS OF PUBLIC POLICY DEBATES. INFLUENCEWATCH STRIVES TO BE COMPREHENSIVE, PROVIDING FREQUENTLY UPDATED PROFILES COMPLETE WITH RELIABLE SOURCING. PROFILES INCLUDE ACTIVISTS, NON-PROFIT ENTITIES, FOR-PROFIT ENTITIES, LABOR UNIONS, POLITICAL ACTION COMMITTEES, AGENCIES, LEGISLATION, AND MOVEMENTS. THE WEBSITE GREW TO 10,000 TOTAL ENTRIES, WITH APPROXIMATELY 5,700 LONG PROFILES COMPLETED. WEBSITE TRAFFIC GREW TO 2.1 MILLION

UNIQUE USERS AND 4.85 MILLION PAGEVIEWS.

# COMMUNICATIONS: CRC DISSEMINATES ITS RESEARCH (VIA PRESS RELEASE, MEDIA STATEMENTS, AND OTHER MEDIA RELATIONS EFFORTS) TO NEWS OUTLETS THAT COVER THE TOPIC OF PUBLIC POLICY INFLUENCE. CRC'S MEDIA APPEARANCES (INCLUDING OP-EDS, INTERVIEWS, REFERENCES IN THE MEDIA, AND OTHER CITATIONS IN OUTLETS LIKE TIME MAGAZINE. NEW YORK POST. ESSENCE MAGAZINE. THE WALL STREET JOURNAL. FOX NEWS. REAL CLEAR INVESTIGATIONS. THE WASHINGTON

TIMES, THE DAILY CALLER, NATIONAL REVIEW, THE WASHINGTON EXAMINER) QUADRUPLED IN 2022, REACHIGN OVER 1200 MEDIA APPEARANCES. CRC'S MANY EDUCATIONAL VIDEOS WERE VIEWED NEARLY 8 MILLION TIMES ON YOUTUBE AND FACEBOOK. CRC'S COMBINED SOCIAL MEDIA REACHING ON META AND TWITTER

REACHED 2 MILLION, AND THE INFLUENCEWATCH PODCAST EJOYED AN AVERAGE EPISODE RATE OF NEARLY 750 LIFETIME DOWNLOADS PER EPISODE.

Form 990, Part III, Line 4c:

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations	tions to
others, the total expenses, and revenue, if any, for each program service reported.	

(Code: ) (Expenses \$ 305.619 including grants of \$ ) (Revenue \$ DANGEROUS DOCUMENTARIES

(Code: ) (Expenses \$ 321,112 including grants of \$ (Revenue \$

OUTREACH

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

/C	\ /E +	000.000	) /D +								
others, the total expenses, and revenue, if any, for each program service reported.											
Section SUL(C)(3) a	ina (4) organizations and 4	947(a)(1) trusts are required to report ti	ie amount of grants and allocat	lions to							

Section E01(a)(2) and (4) againstians and 4047(a)(1) twists are required to report the amount of grants and allegations to

(Code: ) (Expenses \$ 296.496 including grants of \$ ) (Revenue \$ SOCIAL MEDIA

(Code: ) (Expenses \$ 239,535 including grants of \$ (Revenue \$

CENTER FOR STRATEGIC GIVING

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: ) (Expenses \$ 102,217 including grants of \$ ) (Revenue \$ )

RESEARCH ARCHIVES

<u>efil</u> e	GR/	APHIC prin	t - DO NOT PROCE	SS	As Filed Data -			DLN: 9	3493318019333
SCH	IFD	ULE A	Dubli	ic C	agrity Statu	e and Dul	hlic Sunn		OMB No. 1545-0047
	n 990				narity Statu				2022
		,	Complete ii ti	49	ZUZZ				
-		the Treasury ue Service	► Go to www		Attach to Form 9 ov/Form990 for in			ermation.	Open to Public
									Inspection
		n <b>e organiza</b> EARCH CENTER						Employer identific	ation number
					(41)			52-1289734	
Par he or			for Public Charity S a private foundation bec					see instructions.	
1			onvention of churches, o		•	-	. ,	(A)(i).	
2			scribed in <b>section 170(</b>						
3			or a cooperative hospital			,	, ,	iii)	
4		·			-			-	
7	Ш	name, city,	esearch organization op and state:	perated	in conjunction with	a nospital descr	iped in <b>section</b> .	170(B)(1)(A)(III). E	nter the nospital s
5	П	An organiza	ition operated for the be	enefit of	f a college or univer	rsity owned or o	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
6	_		( <b>iv).</b> (Complete Part II.)	•			470(1)(4)(4		
6	Ш		tate, or local governmer	_					
7	✓		ition that normally recei O(b)(1)(A)(vi). (Comp			s support from a	ı governmental u	nit or from the genera	al public described in
8			ty trust described in <b>sec</b>	-		(Complete Part I	I.)		
9			ural research organization ant college of agricultur						ege or university or a
10			tion that normally recei						
		from activit	ies related to its exempt income and unrelated b	t function business	ons—subject to cert s taxable income (le	tain exceptions, ess section 511 t	and (2) no more ax) from busines	than 33 1/3% of its s ses acquired by the c	upport from gross rganization after June
			ee section 509(a)(2).						. gaa
l1		An organiza	ition organized and oper	rated ex	xclusively to test for	r public safety. S	See section 509	(a)(4).	
12		more public	ition organized and oper ly supported organization through 12d that descr	ons des	cribed in section 5	09(a)(1) or se	ction 509(a)(2	). See <mark>section 509(</mark> a	
а		<b>Type I.</b> A so	supporting organization on (s) the power to regula	operate arly app	d, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by	
b		-	Part IV, Sections A an supporting organization		vised or controlled in	n connection wit	h its supported o	organization(s) by hav	ving control or
	Ш	manageme	nt of the supporting organizations  plete Part IV, Sections	anizatio	on vested in the san				
С			unctionally integrated organization(s) (see inst						ted with, its
d		Type III n functionally	on-functionally integr integrated. The organiz	<b>rated.</b> / zation g	A supporting organi enerally must satist	zation operated fy a distribution	in connection wirequirement and	th its supported orgar	
e		Check this	). <b>You must complete</b> box if the organization re or Type III non-function	received	l a written determin	ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organization						
g	Provid	de the follow	ing information about th	he supp	orted organization(	s).			
	(i) N	lame of supp organizatior		((	(iii) Type of organization described on lines 1- 10 above (see instructions))	ration in your governing document? monetary sup I on lines ove (see		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
			1	$\dashv$					
Γotal									1

Page 2

85.470 %

Schedule A (Form 990) 2022

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

	•	<del></del>					
:	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	2,920,163	4,352,988	4,666,258	5,737,290	7,055,273	24,731,972
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,920,163	4,352,988	4,666,258	5,737,290	7,055,273	24,731,972
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,960,562
6	<b>Public support.</b> Subtract line 5 from line 4.						21,771,410
_:	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	2,920,163	4,352,988	4,666,258	5,737,290	7,055,273	24,731,972
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	153,083	232,417	163,944	146,481	115,711	811,636
9	Net income from unrelated business						

	Calendar year (or fiscal year beginning in) ▶	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	2,920,163	4,352,988	4,666,258	5,737,290	7,055,273	24,731,972
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	153,083	232,417	163,944	146,481	115,711	811,636
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
LO	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,941	33,144	44,998	24,117	6,497	113,697
L1	<b>Total support.</b> Add lines 7 through 10						25,657,305

	ection C. Computation of Publi							
	this box and <b>stop here</b>					<b>&gt;</b>	<u> </u>	
13	First 5 years. If the Form 990 is for t	he organization's f	first, second, third	, fourth, or fifth ta	ax year as a sectio	n 501(c)(	(3 <u>)</u> organ	ization, check
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		16,718
11	<b>Total support.</b> Add lines 7 through 10							25,657,305
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,941	33,144	44,998	24,117		6,497	113,697
9	Net income from unrelated business activities, whether or not the business is regularly carried on.							
	dividends, payments received on securities loans, rents, royalties and income from similar sources.	153,083	232,417	163,944	146,481		115,711	811,636

	10						25,657,30
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	16,71
13	First 5 years. If the Form 990 is for t	the organization's	first, second, third	, fourth, or fifth ta	ax year as a section	501(c)	(3) organization, check
	this box and <b>stop here</b>					)	▶□
S	ection C. Computation of Publi	c Support Perc	entage				
14	Public support percentage for 2022 (li	ne 6. column (f) d	ivided by line 11.	column (f))		14	84 850 9

h 33 1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . .

16a 33 1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Public support percentage for 2020 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . .

	assets (Explain in Part VI.)							
11	Total support. Add lines 7 through							25,657,305
	10							23,037,303
12	${\it Gross \ receipts \ from \ related \ activities},$	related activities, etc. (see instructions)						16,718
13	First 5 years. If the Form 990 is for t	he organization's f	first, second, third	, fourth, or fifth ta	ax year as a sectio	n 501(c)	(3) orgar	nization, check
	this hoy and ston here					1	▶ □	

P	art III Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	qualify under	the tests listed	pelow, please co	mplete Part II.	)	
56	ection A. Public Support  Calendar year		I	I		<u> </u>	
	(or fiscal year beginning in) ▶	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and						
/a	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
_	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
_	13 for the year.						
8 8	Add lines 7a and 7b <b>Public support.</b> (Subtract line 7c						
0	from line 6.)						
Se	ection B. Total Support						
	Calendar year	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	(or fiscal year beginning in) ▶	(a) 2010	(b) 2019	(0) 2020	(u) 2021	(e) 2022	(I) Iotai
9	Amounts from line 6						
L0a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975.						
	Add lines 10a and 10b.  Net income from unrelated business						
11	activities not included on line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
13							
13	11, and 12.).						
14	First 5 years. If the Form 990 is for the	ne organization's	first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) orga	nization, check
	this box and <b>stop here</b>						▶ □
Se	ection C. Computation of Public S						
15	Public support percentage for 2022 (lin	ie 8, column (f) d	ivided by line 13,	column (f))		15	
16	Public support percentage from 2021 S	Schedule A, Part I	II, line 15			16	
Se	ection D. Computation of Investi	ment Income	Percentage				
17	Investment income percentage for 202			line 13, column (f	))	17	
18	Investment income percentage from 2	-			•	18	
19a							e 17 is not
139	• • •	-		-			_
ı.	more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the						
b		-			·		_
	not more than 33 1/3%, check this box						
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	9a, or 19b, check	this box and see	instructions	. ▶ 📙

5a

6

7

8

10a

Part IV Supporting Organizations

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b Schedule A (Form 990) 2022

Page 4

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,		
	describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described		
	in section 509(a)(1) or (2).		

	describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described		
	in section 509(a)(1) or (2).	2	
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and		
	3c below.	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied		

	(m, continue 500(c)(d) (m) (2)		
	in section 509(a)(1) or (2).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and		
	3c below.	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the		
	determination.	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		

	2 / /					
	3c below.	3a				
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ? If "Yes," describe in <b>Part VI</b> when and how the organization made the					
	determination.	3b				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					

	, and the second se				
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the				
	determination.	3b			
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
		$\overline{}$			

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

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

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"

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

Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

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

in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

supervised by or in connection with its supported organizations.

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).

organization had an interest? If "Yes," provide detail in Part VI.

amendment to the organizing document).

complete Part I of Schedule L (Form 990).

the organization had excess business holdings).

provide detail in Part VI.

answer line 10b below.

organization's organizing document?

SCH	ledule A (Form 990) 2022			age <b>5</b>
Pa	Supporting Organizations (continued)			
			Yes	No
	. Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>
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?	11b		
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		
-	<i>VI.</i> Section B. Type I Supporting Organizations			
	ection b. Type I 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 <b>Part VI</b> 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.	1	100	
2	Did the organization energic for the handlit of any supported organization other than the supported organization (s) that			<del></del>
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	Section 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 <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	Section D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing	!		
	documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	Section E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	<b>a</b> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	b  The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	the supported organizations? If "Yes" or "No", provide details in <b>Part VI</b> .  b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> , the role played by the organization in this regard.			

instructions)

Page **6** 

1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	tegrate	ed Type III supporting or	ganization (see

excess of income from activity

1 Amounts paid to supported organizations to accomplish exempt purposes

Section D - Distributions

1

2

Page 7

3 Administrative expenses paid to accomplish exempt pu	3			
4 Amounts paid to acquire exempt-use assets			4	
5 Qualified set-aside amounts (prior IRS approval require	ed - provide details in <b>Part VI</b> )		5	
6 Other distributions (describe in Part VI). See instruction	ons		6	
7 Total annual distributions. Add lines 1 through 6.			7	
Distributions to attentive supported organizations to widetails in <b>Part VI</b> ). See instructions	hich the organization is respon	sive ( <i>provide</i>	8	
9 Distributable amount for 2022 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2022	ons	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required explain in <b>Part VI</b> ). See instructions.				
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
<b>b</b> From 2018				
c From 2019				
<b>d</b> From 2020				
e From 2021				
f Total of lines 3a through e				
g Applied to underdistributions of prior years				
h Applied to 2022 distributable amount				
i Carryover from 2017 not applied (see instructions)				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4 Distributions for 2022 from Section D, line 7:				
a Applied to underdistributions of prior years				
<b>b</b> Applied to 2022 distributable amount				
c Remainder. Subtract lines 4a and 4b from line 4.				
5 Remaining underdistributions for years prior to				

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in

2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

See instructions. 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater

than zero, explain in Part VI. See instructions.

7 Excess distributions carryover to 2023. Add lines 3j and 4c.

8 Breakdown of line 7: a Excess from 2018. . . . . **b** Excess from 2019. . . .

c Excess from 2020. . . . . d Excess from 2021. . . . . e Excess from 2022. . . . .

Schedule A (Form 990) (2022)

Schedule A (Form 990) 2022 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D. lines 5, 6, and 8; and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions). **Facts And Circumstances Test** 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A. PART II, LINE 10. MISCELLANEOUS INCOME - 2018 AMOUNT: \$ 4,941, 2019 AMOUNT: \$ 3,344, 2020 AMOUNT: \$ 44,998.

INCOME:

EXPLANATION OF OTHER 2021 AMOUNT: \$ 24,117. 2022 AMOUNT: \$ 6,497. MANAGEMENT FEES - 2019 AMOUNT: \$ 29,800. efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493318019333

OMB No. 1545-0047

## **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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

	me of the organization		Employer identification number
CAP	THAL RESEARCH CEIVIER		52-1289734
Pa	organizations Maintaining Donor Adv		Accounts.
	Complete if the organization answered "Ye	(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
1	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex		
5	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?	r or donor advisor, or for any other purpose co	
Pa	<b>rt II</b> Conservation Easements.  Complete if the organization answered "Ye	es" on Form 990, Part IV, line 7.	
L	Purpose(s) of conservation easements held by the orga	anization (check all that apply).	
	Preservation of land for public use (e.g., recreation	on or education) $\qed$ Preservation of an $\ensuremath{P}$	historically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in the form	n of a conservation  Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified histor	ic structure included in (a)	2c
d	Number of conservation easements included in (c) acqu historic structure listed in the National Register	ired after July 25, 2006, and not on a	2d
3	Number of conservation easements modified, transferretax year ▶	ed, released, extinguished, or terminated by th	ne organization during the
1	Number of states where property subject to conservation	on easement is located <b>&gt;</b>	
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		f violations,  Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting  \$ \\$	, handling of violations, and enforcing conserva	ation easements during the year
3	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?		0(h)(4)(B)(i) ☐ <b>Yes</b> ☐ <b>No</b>
9	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the	e footnote to the organization's financial staten	
ar	the organization's accounting for conservation easement III Organizations Maintaining Collections	of Art, Historical Treasures, or Othe	er Similar Assets.
La	Complete if the organization answered "Ye If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pub	SC 958, not to report in its revenue statement olic exhibition, education, or research in further	
b	Part XIII, the text of the footnote to its financial statem If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pub	SC 958, to report in its revenue statement and	
,	following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1		▶ ¢
(i	ii)Assets included in Form 990, Part X		
2	If the organization received or held works of art, histor following amounts required to be reported under FASB	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		·
b	Assets included in Form 990, Part X		▶\$

Cat. No. 52283D

Schedule D (Form 990) 2022

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

Par	3111	Organizations Ma	aintaining Collec	tions of Art, I	Histori	cal Tr	easure	s, or Other	Similar As	ssets (cont	inued)	
3		g the organization's acq s (check all that apply):		nd other records,	, check a	any of	the follo	wing that are a	significant (	use of its col	lection	
а		Public exhibition			d		Loan or	exchange prog	ırams			
b		Scholarly research			е		Other					
c		Preservation for future	e generations									
4	Provi Part )	de a description of the XIII.	organization's collect	ions and explain	how the	y furth	er the o	rganization's e	xempt purpo	se in		
5	Durin	ng the year, did the orgons ts to be sold to raise fur								☐ Yes	□ N	o
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			rm 990	, Part	IV, line	9, or reporte	ed an amou	unt on Forn	า 990,	Part
1a		e organization an agent ded on Form 990, Part )								Yes	□ N	o
b	If "Ye	es," explain the arrange	ement in Part VIII and	d complete the fo	llowing	table:			Δ	mount		_
c		nning balance						1c		inounc		_
d	_	tions during the year .										_
e		ibutions during the year						1e				_
f		ng balance						1.5				_
2a		he organization include							ability?	Yes	N	— О
b		es," explain the arrange								_		
	rt V	Endowment Fund			71,1-1-1111-1-1							
		Complete if the org	ganization answere	ed "Yes" on For	rm 990	, Part	IV, line	10.				
			<del></del>	a) Current year	<b>(b)</b> P	rior yea	(c)	Two years back	(d) Three ye	ars back (e)	Four yea	rs back
	-	ning of year balance .										
b	Contrib	butions										
С	Net in	vestment earnings, gair	ns, and losses									
d	Grants	or scholarships										
		expenditures for facilitie ograms	es									
f	Admini	istrative expenses .										
g	End of	year balance										
2 a		de the estimated perce d designated or quasi-e	•	year end balance	e (line 1g	g, colur	nn (a)) l	neld as:				
b		nanent endowment >		••••••								
c		n endowment ►										
·		percentages on lines 2a	 2b, and 2c should e	gual 100%								
3a		here endowment funds		•	tion that	are he	eld and a	dministered fo	r the			
		nization by:	'	J							Yes	No
	<b>(i)</b> ∪	nrelated organizations								3a(i)		
		Related organizations								3a(ii)		
		es" on 3a(ii), are the rel								3b		
4		ribe in Part XIII the inte		anization's endo	wment f	unds.						
æ	rt VI	Land, Buildings, Complete if the org		ed "Yes" on For	rm 990	Part	[V. lin≏	11a. See Fo	rm 990 Pa	rt X. line 1	0.	
	Descri	iption of property	(a) Cost or other b (investment)		or other			c) Accumulated			ook valu	e
1 -	Land					11	4,686					114,686
	Land						6,429		866,412			240,017
	Buildin	-				1,10	·, 729		550,412			270,017
		nold improvements				70	8 200		722 277			64 021
a	Equipn	ment				/9	8,298		733,377			64,921

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

Part VII			T		005	N- 1 X 12 - 40
	Complete if the organization answered "Yes" on Form 990,  (a) Description of security or category		IV, ∣i <b>b)</b>			Part X, line 12. d of valuation:
	(including name of security)	Во	ook Iue			year market value
(1) Financia	l derivatives					
(2) Closely-l (3)Other	held equity interests					
(A)						
(C)						
(D)						
(E)						
(F)		+				
(G)		+				
(H)		+				
(H)		+				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.)	•				
Part VIII	Investments - Program Related.			11 0 -	222	
	Complete if the organization answered 'Yes' on Form 990,  (a) Description of investment	Part		ne 11c. See Fo  Book value		Part X, line 13.  Method of valuation:
(1)NO SAFE	SPACES DOCUMENTARY			573,109	Cost or	end-of-year market value C
(2)				,		-
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)		+				
(10)		+				
Total (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)	•		573,109		
Part IX	Other Assets.					
	Complete if the organization answered 'Yes' on Form 990, F  (a) Description	Part I	v, iir	16 11d. See Fori	n 990, Par	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15.)					<b>•</b>
Part X	Other Liabilities.					<u>'</u>
1.	Complete if the organization answered 'Yes' on Form 990, F  (a) Description of liability	Part I	v, III	ie Tie or Tir.S	ee Form	(b) Book value
	income taxes					29 402
(2)	LEASE LIABILITY					38,492
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)				•	20,402
	or uncertain tax positions. In Part XIII, provide the text of the footno	te to t	he or	ganization's fina	ncial stater	
organization	's liability for uncertain tax positions under FIN 48 (ASC 740). Check	here i	if the	text of the footn	ote has be	en provided in Part XIII 🔽

2

а

b

1

2

C

d

е 3

b

5

Part XIII

See Additional Data Table

4

Schedule D (Form 990) 2022

Page 4

-1,459,332

7,119,799

61,338

7,195,378

61,338

7.256.716

Schedule D (Form 990) 2022

d Other (Describe in Part XIII.)

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Investment expenses not included on Form 990, Part VIII, line 7b . 

Add lines **4a** and **4b** . . . . . . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . .

b C 5

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . .

Part XII

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Subtract line 2e from line 1 . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

4b

2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

-1,459,332

4c 5

2e

3

4c

5

61.338

61,338

2e

3

7,181,137 7,195,378

chedule D (Form 990) 2022		Page <b>5</b>
Part XIII Supplemental Info	ormation (continued)	
Return Reference	Explanation	

Schedule D (Form 990) 2022

## Additional Data

Software ID: Software Version:

**EIN:** 52-1289734

Name: CAPITAL RESEARCH CENTER

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE CENTER FOLLOWS THE AUTHORITATIVE GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY COME TAXES INCLUDED IN ACCOUNTING STANDARDS CODIFICATION TOPIC 740-10, INCOME TAXES. THE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THE PROPERTY OF THE

TY IN IN THESE TAXES ΞLΥ THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CENTER PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YE AR ENDED DECEMBER 31, 2022 AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RE COGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS . THE STATUTE OF LIMITATIONS GENERALLY REMAINS OPEN FOR THREE TAX YEARS WITH THE U.S. FEDE RAL JURISDICTION OR THE VARIOUS STATES AND LOCAL JURISDICTIONS IN WHICH THE CENTER FILES T AX RETURNS.

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DL	N: 93493318019333
Note: To capture the full of Schedule I (Form 990)  Department of the Treasury Internal Revenue Service	(	Grants and C Governments mplete if the organiza	Plect landscape mode  Other Assistance  and Individuals  ation answered "Yes," o  Attach to Form  w.irs.gov/Form990	ce to Organiz in the Unite on Form 990, Part IV 990.	ations, d States , line 21 or 22.			2022 Open to Public Inspection
Name of the organization CAPITAL RESEARCH CENTER						'	•	cation number
Part I General Inform	nation on Grants					52-12	189734	
the selection criteria used  Describe in Part IV the org  Part II Grants and Other	to award the grants panization's procedur Assistance to Dom	or assistance? es for monitoring the us estic Organizations a	e of grant funds in the Un	ited States.	for the grants or assistance		ption of	Yes V No e 21, for any recipient  (h) Purpose of grant or assistance
(1) TALENT MARKET CO AMERICA'S FUTURE 1633 CONNECTICUT AVENUE NW 300 WASHINGTON, DC 20009	52-1928321	501(C)(3)	10,000	0				GENERAL SUPPORT
2 Enter total number of sect	ion 501(c)(3) and go	vernment organizations	listed in the line 1 table .				<b></b>	1
3 Enter total number of other							. ▶	0
For Paperwork Reduction Act Notice	ce, see the Instructio	ns for Form 990.		Cat. No. 50055	5P		Sch	nedule I (Form 990) 2022

Schedule I (Form 990) 2022

(7)

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

Part IV

**Explanation** 

(6)

**Return Reference** 

efile GRAPHIC print - DO NOT PROCESS						18019	333
Schedule J (Form 990)		C	ompensatio	on Information	OMB No.	1545-0	)047
		For certain Officers, Directors, Trustees, Key Employees, and Highest					
		Compensated Employees  ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2
		<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for instructions and the latest information.</li> </ul>				Open to Public	
Interna	al Revenue Service				Insp	ectio	n
	ne of the organiza ITAL RESEARCH CEN			Employer ide	ntification nu	ımber	
	0	B		52-1289734			
Ра	rt I Questi	ons Regarding Compensa	ition			Yes	No
1a				he following to or for a person listed on Form relevant information regarding these items.		163	_ <del></del>
	☐ First-class	s or charter travel		Housing allowance or residence for personal use			
	Travel for	companions		Payments for business use of personal residence			
	☐ Tax idemi	nification and gross-up paymen		Health or social club dues or initiation fees			
	☐ Discretion	nary spending account		Personal services (e.g., maid, chauffeur, chef)			
b				ollow a written policy regarding payment or ? If "No," complete Part III to explain	1b		
2				allowing expenses incurred by all regarding the items checked on Line 1a?	2		
	unectors, truste	es, officers, including the CEO/	executive Director,	regarding the items checked on line ia:			
3				to establish the compensation of the			
		EO/Executive Director. Check a ed organization to establish com		ot check any boxes for methods EO/Executive Director, but explain in Part III.			
	✓ Compens	ation committee		Muittan amplayment contract			
		ation committee ent compensation consultant		Written employment contract Compensation survey or study			
		of other organizations		Approval by the board or compensation committee			
4	During the year related organiza		990, Part VII, Sect	ion A, line 1a, with respect to the filing organization	n or a		
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .		4a		No
b		r receive payment from, a supp			. 4b		No
С				ation arrangement?	. 4c		No
	Only <b>E01</b> (a)(2	), 501(c)(4), and 501(c)(29	)	nuct complete lines E O			
5				e organization pay or accrue any			
		ontingent on the revenues of:					
а	The organization	n?			5a		No
b					5b		No
	If "Yes," on line	5a or 5b, describe in Part III.					
6		ed on Form 990, Part VII, Section Ontingent on the net earnings o		e organization pay or accrue any			
а	The organization	n?			6a		No
b					6b		No
_	•	6a or 6b, describe in Part III.	A 15 4				
7				e organization provide any nonfixed III	7		No
8	subject to the ir	nitial contract exception describe	ed in Regulations s	d pursuant to a contract that was ection 53.4958-4(a)(3)? If "Yes," describe			
9		8, did the organization also follo	ow the rebuttable p	resumption procedure described in Regulations sec	etion 8		No_
For F	. ,	iction Act Notice, see the Ins				1 990)	2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

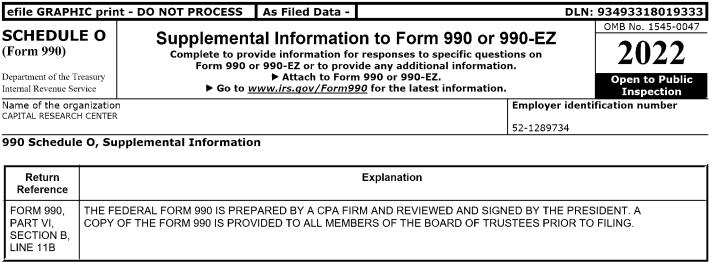
Note. The sum of column	ns (B)	(i)-(iii) for each listed inc	dividual must equal the to	otal amount of Form 990,	Part VII, Section A, line	1a, applicable column (D)	and (E) amounts for tha	t individual.
(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC (i) Base (ii) Bonus & incentive (iii) Other		(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	<b>(F)</b> Compensation in column (B) reported	
		compensation	compensation	reportable compensation	compensation			as deferred on prior Form 990
1 SCOTT WALTER PRESIDENT	(i)	358,024	0	0	44,950	29,546	432,520	0
	(ii)	0	0	0	0	0	0	0
2 KRISTEN EASTLICK SENIOR VICE PRESIDENT	(i)	178,674	0	0	27,177	7,972	213,823	0
I SENTON VIOL I NESIDENI	(ii)	0	0	0	0	0	0	0
3 MICHAEL E HARTMANN SENIOR FELLOW AND	(i)	168,021	0	0	25,659	9,318	202,998	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
4 DAN THOMPSON VP OF PHILANTHROPY &	(i)	147,419	0	0	23,354	13,410	184,183	0
DEVELOPMENT	(ii)	0	0	0	0	0	0	0
I								
. <u> </u>								-
	$\dagger \dagger$							
							Schedule	J (Form 990) 2022

Schedule J (Form 990) 2022 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Explanation PART I, LINE 3 ICRC REVIEWS THE FORM 990S OF SIMILAR ORGANIZATIONS IN THE WASHINGTON DC AREA AND THE ANNUAL THINK TANK COMPENSATION STUDY WHICH COLLECTS COMPENSATION AND BENEFITS DATA RELEVANT TO THINK TANKS AND RESEARCH ORGANIZATIONS LOCATED IN THE U.S. THAT CONDUCT RESEARCH IN THE PUBLIC POLICY, FOREIGN POLICY, AND INTERNATIONAL RELATIONS ARENAS. THIRTY-FOUR RESPONDENTS PROVIDED SUFFICIENT INFORMATION TO BE INCLUDED IN THE 2021 SURVEY, IN ADDITION, THE BOARD OF TRUSTEES UTILIZES ITS EXPERIENCE AND EXPERTISE.

Schedule 1 (Form 990) 2022

DLN: 93493318019333 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2022 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** CAPITAL RESEARCH CENTER 52-1289734 Part I **Types of Property** (d) (a) (b) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications 5 Clothing and household aoods . . . . . Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 25,994 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . **14** Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . . 25 Other ▶ ( \_\_\_\_\_\_) Other ▶ ( \_\_\_\_\_\_) 26 Other ► ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) 28 29 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . No 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Νo 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2022) Cat. No. 51227J

Schedule M (Form 990) (2022)	Page <b>2</b>				
Part III Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Return Reference	Explanation				
PART I, COLUMN (B):	THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED DECEMBER 31, 2022.				
	Schedule M (Form 990) (2022)				



Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES OF CRC ARE COVERED BY THE CONFLICT OF INTEREST POLICY DESCRIBED IN THE EMPLOYEE MANUAL AND ARE REQUIRED TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST TO MANAG EMENT OF CRC OR THE BOARD OF TRUSTEES, AS APPROPRIATE. THE BOARD OF TRUSTEES OF CRC CONSIS TS OF 7 INDIVIDUALS AND CONFLICTS OF INTEREST ARE NOT PERMITTED UNDER ITS WRITTEN CONFLICT OF INTEREST POLICY PROHIBITING THE TRANSACTION OF BUSINESS WITH A BOARD MEMBER.

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,
PART VI,
SECTION B,
LINE 15A
BLIC POLICY, FOREIGN POLICY, AND INTERNATIONAL RELATIONS ARENAS. THIRTY-FOUR RESPONDENTS P
ROVIDED SUFFICIENT INFORMATION TO BE INCLUDED IN THE 2021 SURVEY. IN ADDITION, THE BOARD O
F TRUSTESS UTILIZES ITS EXPERIENCE AND EXPERTISE.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CRC PROVIDES AUDITED FINANCIAL STATEMENTS TO DONORS AND OTHERS UPON REQUEST ON A CASE BY C ASE BASIS. OTHER ORGANIZATIONAL DOCUMENTS HAVE NOT BEEN REQUESTED IN THE PAST AND CRC WILL EVALUATE SUCH REQUESTS WHEN RECEIVED. HOWEVER, CRC FULLY COMPLIES WITH INFORMATION RETURN S AND OTHER DOCUMENTS REQUIRED UNDER INTERNAL REVENUE SERVICE REGULATIONS TO BE DISCLOSED TO THE PUBLIC UPON REQUEST.

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	VIDEO PRODUCTION: PROGRAM SERVICE EXPENSES 220,325. MANAGEMENT AND GENERAL EXPENSES 0. FUN DRAISING EXPENSES 0. TOTAL EXPENSES 220,325. OTHER CONSULTANTS: PROGRAM SERVICE EXPENSES 1,226,015. MANAGEMENT AND GENERAL EXPENSES 12,768. FUNDRAISING EXPENSES 105,740. TOTAL EXPE NSES 1,344,523. TEMPORARY HELP: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSE S 0. FUNDRAISING EXPENSES 9,973. TOTAL EXPENSES 9,973.

Return Explanation
Reference

FORM 990, PART XII, LINE 2C