TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING

JUNE 30, 2023

PREPARED FOR:

PROSPECT HILL FOUNDATION INC. 99 PARK AVENUE 2220 NEW YORK, NY 10016-1601

PREPARED BY:

PKF O'CONNOR DAVIES ADVISORY, LLC 245 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10167

AMOUNT DUE OR REFUND:

AN OVERPAYMENT OF \$67,136. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

MAKE CHECK PAYABLE TO:

NO AMOUNT IS DUE.

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$30,421. THIS MAY BE APPLIED TO TAX YEAR 2023 AND SUBSEQUENT YEARS.

WE RECOMMEND ALL MAILINGS TO TAXING AUTHORITIES BE MADE BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. PLEASE RETAIN THE RECEIPT AS PROOF OF TIMELY FILING.

PLEASE REVIEW YOUR RETURN FOR COMPLETENESS AND ACCURACY.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THE COPY INDEFINITELY.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Form 8868 (Rev. 1-2022)

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print PROSPECT HILL FOUNDATION INC. 13-6075567 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 99 PARK AVENUE, 2220 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions NEW YORK, NY 10016-1601 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) MAUREEN HOWLEY, TREASURER The books are in the care of ▶ 99 PARK AVENUE, #2220 - NEW YORK, NY 10016-1601 Telephone No. ▶ 212 370-1165 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2024 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or $\underline{\hspace{0.5cm}}$, and ending $\underline{\hspace{0.5cm}}$ $\underline{\hspace{0.5cm}}$ JUN $\underline{\hspace{0.5cm}}$ 30 , $\underline{\hspace{0.5cm}}$ 2023 ► X tax year beginning JUL 1, 2022 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 86,962. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 86,962. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

LHA

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

Form **990-PF**Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

JUL 1, 2022 and ending JUN 30, 2023 For calendar year 2022 or tax year beginning Name of foundation A Employer identification number PROSPECT HILL FOUNDATION INC. 13-6075567 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 99 PARK AVENUE 2220 212 370-1165 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW YORK, NY 10016-1601 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Cash Accrual If the foundation is in a 60-month termination X Other (specify) MODIFIED CASH (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ... 74,142,105. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (b) Net investment (c) Adjusted net (d) Disbursements for charitable purposes (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) 238,405. Contributions, gifts, grants, etc., received N/A2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 26,974. 26,974. STATEMENT 890,832. 889,617. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 808,585. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,775,444. 798,392. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 539,711. 499,949. STATEMENT 11 Other income 504,507. 2,214,932. 12 Total. Add lines 1 through 11 0. 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 521,742. 521,742. 0. 100,659. 0. 100,659. 15 Pension plans, employee benefits 16a Legal fees Administrative Expenses b Accounting fees STMT 4 0. 39,950. 39,950. c Other professional fees STMT 5 59,500. 90,200. 30.700. 21,817. 21,396. 0. 17 Interest Taxes STMT 6 46,915.106,915. 0. Depreciation and depletion 19 60,849. 60,849. 0. 20 Occupancy 21 Travel, conferences, and meetings 35,305. 35,305. 0. 22 Printing and publications 5,195. 0. 5,195. 23 Other expenses STMT 7 660,790. 813,544. 148,455. 24 Total operating and administrative 942,855. 1,796,176. 788,601. expenses. Add lines 13 through 23 3,122,048. 3,122,048. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 4,918,224 4,064,903. Add lines 24 and 25 788,601. 27 Subtract line 26 from line 12: -2,413,717**a** Excess of revenue over expenses and disbursements 1,426,331. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

23501 12-06-22 LHA For Paperwork Reduction Act Notice, see instructions.

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
•	ui t	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	2,046,390.	909,918.	909,918.
		Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5				
		Grants receivable Receivables due from officers, directors, trustees, and other			
	١	, , ,			
	_	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
•	104	Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	72,451,532.	72,871,561.	72,871,561.
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	15	Other assets (describe STATEMENT 10)	360,626.	360,626.	360,626.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	74,858,548.	74,142,105.	74,142,105.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ig		Mortgages and other notes payable			
Ë		Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
s		and complete lines 24, 25, 29, and 30.			
Š	24	Net assets without donor restrictions	74,858,548.	74,142,105.	
alar	25	Net assets with donor restrictions			
Ä		Foundations that do not follow FASB ASC 958, check here			
or Fund Balance		and complete lines 26 through 30.			
Ē	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
sse	28	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	29	Total net assets or fund balances	74,858,548.	74,142,105.	
Š		Total not about of fund buildhood	/ 000 / 0 _ 0 0	. = / = = / = 000	
	30	Total liabilities and net assets/fund balances	74,858,548.	74,142,105.	
П	art				
	arı	Analysis of onlinges in Net Assets of Fund Bul			
1		net assets or fund balances at beginning of year - Part II, column (a), line 2 $$	9		
	•			1	74,858,548.
		amount from Part I, line 27a		2	-2,413,717.
		r increases not included in line 2 (itemize)		ATEMENT 8 3	1,697,274.
4	Add I	ines 1, 2, and 3			74,142,105.
		eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 29	6	74,142,105.
					Form 990-PF (2022)

Part IV Capital Gains	and Losses for Tax on In	vestment In	come	SE	E ATTAC	HED ST	ГАТЕМЕ	INT
(a) List and describe the kind(s) of property sold (for example, real estate,		How acquired - Purchase - Donation	(c) Date a		(d) Date sold (mo., day, yr.)			
b								
С								
d								
е								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other bas ense of sale				ain or (loss) (f) minus (
a								
b								
_ C								
_ d								
<u>e</u>			10/01/00					798,392.
Complete only for assets showing	ng gain in column (h) and owned by	I				(I) Gains (C		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) l. (j), if any)		ol. (k), but n Losses ((from col. (f	1)))
<u>a</u>								
_ b								
_ C								
_ <u>d</u>								
_ e								798,392.
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{If gain, also ente} \\ & \text{If (loss), enter -C} \end{cases} $			}	2			798,392.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar	nd (6):						
If gain, also enter in Part I, line 8, Part I, line 8	, column (c). See instructions. If (los	s), enter -0- in		}	3		N/A	
Part V Excise Tax Bas	sed on Investment Incom	ne (Section 4	1940(a),	4940(I	o), or 4948	- see ins	struction	ns)
1a Exempt operating foundations	described in section 4940(d)(2), che	ck here	and ente	r "N/A" or	i line 1.			
Date of ruling or determination				ary - see	instructions)	1		19,826.
	enter 1.39% (0.0139) of line 27b. Ex							
	12, col. (b)							
2 Tax under section 511 (domest	tic section 4947(a)(1) trusts and taxa	able foundations o	only; others,	, enter -0	-)	2		0.
						3		19,826.
	stic section 4947(a)(1) trusts and tax			s, enter -()-)			0.
	me . Subtract line 4 from line 3. If ze	ero or less, enter -	0			5		19,826.
6 Credits/Payments:			. 1		06.06	,		
	and 2021 overpayment credited to 20		6a		86,96			
	tax withheld at source		6b			0.		
	ktension of time to file (Form 8868)		6c			0.		
	ly withheld		6d			0.		06 060
7 Total credits and payments. Ad		V						86,962.
	ment of estimated tax. Check here		zu is attache	ed				0.
	and 8 is more than 7, enter amount							67 126
	than the total of lines 5 and 8, enter	trie amount over						67,136.
11 Enter the amount of line 10 to I	be: Credited to 2023 estimated tax		0	7,13	• Refund	ed 11		000 PE

Page 4

Pa	irt VI-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	
	any political campaign?	L	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	L	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	L	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \$ (2) On foundation managers. \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	L	4a	X	<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	L	4b	X	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	L	5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?	L	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	L	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	NY				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	L	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				
	year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII		9		<u>X</u>
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule. See instructions		11	X	—
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges				
	If "Yes," attach statement. See instructions		12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	L	13	X	<u> </u>
	Website address HTTP://PROSPECT-HILL.ORG/	0 270		1.65	
14	The books are in care of MAUREEN HOWLEY, TREASURER Telephone no. 21				
		+4 100		-тр	뉴
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here				
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		/A	N/a
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,	_		Yes	No
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
	foreign country		001) DE	(22
		Form	33 (<i>-</i> -۲	(2022)

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Part VI-B	Statements Regarding Activities for Which Form 4720 May Be Required			
File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the	year, did the foundation (either directly or indirectly):			
(1) Engag	e in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		X
(2) Borrov	noney from, lend money to, or otherwise extend credit to (or accept it from)			
a disqı	ialified person?	1a(2)		X
(3) Furnis	n goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	Х	
(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X	
(5) Transf	er any income or assets to a disqualified person (or make any of either available			
for the	benefit or use of a disqualified person)?	1a(5)		X
(6) Agree	to pay money or property to a government official? (Exception. Check "No"			
if the f	oundation agreed to make a grant to or to employ the official for a period after			
termin	ation of government service, if terminating within 90 days.)	1a(6)		_X_
b If any answ	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.	4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		_X_
c Organizatio	ns relying on a current notice regarding disaster assistance, check here			
d Did the fou	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the	irst day of the tax year beginning in 2022?	1d		X
2 Taxes on fa	ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in s	ection 4942(j)(3) or 4942(j)(5)):			
a At the end	of tax year 2022, did the foundation have any undistributed income (Part XII, lines			
6d and 6e)	for tax year(s) beginning before 2022?	2a		_X_
If "Yes," list	the years , , , , ,			
b Are there a	ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation o	assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement -	see instructions.) N/A	2b		
c If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a Did the fou	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the	/ear?	3a		_X_
b If "Yes," did	it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 19	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
Schedule C	, to determine if the foundation had excess business holdings in 2022.) N/A	3b		
	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the fou	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
had not bee	en removed from jeopardy before the first day of the tax year beginning in 2022?	4b		X
		orm 99 0)-PF	(2022)

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Form 990-PF (2022) PROSPECT HILL FOUNDATION Part VI-B Statements Regarding Activities for Which F	INC.	equired (contin	13-6075	567	F	Page 6	
5a During the year, did the foundation pay or incur any amount to:		COntin	<u>ueu)</u>		Yes	No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e)) ?			5a(1)		X	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive?							
(4) Provide a grant to an organization other than a charitable, etc., organizatio				5a(3)			
4945(d)(4)(A)? See instructions							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?				5a(5)		X	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un			/-				
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b			
c Organizations relying on a current notice regarding disaster assistance, check h							
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			37 / 3				
expenditure responsibility for the grant?			N/A	5d			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).							
6a Did the foundation, during the year, receive any funds, directly or indirectly, to						37	
a personal benefit contract?				6a		X	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X	
If "Yes" to 6b, file Form 8870.				_		37	
7a At any time during the tax year, was the foundation a party to a prohibited tax s				7a		<u> </u>	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or					v	
excess parachute payment(s) during the year? Part VII Information About Officers, Directors, Truste	oc Foundation Mar	nagore Highly		8		X	
Paid Employees, and Contractors	ees, Foundation Mai	iagers, nignly					
List all officers, directors, trustees, and foundation managers and the second se	neir compensation.						
. List all silions, all sociols, a assess, and loan added in managers and a		(c) Compensation	(d) Contributions to		(e) Exp	ense	
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plan and deferred	is a	ccount, allowar	other	
	το ροσιτίοι	enter -0-)	compensation	+	anowai	1003	
	1						
SEE STATEMENT 11	1	0.	0			0.	
				+			
	1						
	1						
	1						
	1						
	1						
	1						
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plan	ns a	(e) Exp	ense	
(a) Name and address of each employee paid more than \$00,000	devoted to position	(C) Compensation	and deferred compensation		allowar	100S	
PENNY F. WILLGERODT - 99 PARK AVE,	EXECUTIVE DIR	ECTOR					
#2220, NEW YORK, NY 10016-1601	40.00	265,120.	55,012			0.	
RAJKO KRAMAR - 99 PARK AVE, #2220,	DIRECTOR OF F	INANCE ANI	_	- 1	1S		
NEW YORK, NY 10016-1601	40.00	98,256.	11,295			0.	
ZENOBIA LOVE - 99 PARK AVE, #2220,	GRANTS ADMINI						
NEW YORK, NY 10016-1601	40.00	61,576.	16,884	•		0.	
				\bot			
				\perp			
Total number of other employees paid over \$50,000						0	
			For	m 99 ()-PF	(2022)	

Part VII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MCLENDON CONSULTING LLC	STRATEGIC REVIEW AND)
225 LINCOLN PLACE, #3H, BROOKLYN, NY 11217	NEW HIRE CONSULTING	93,750.
ANTAEUS ENTERPRISES - 99 PARK AVENUE, #2200,	ADMINISTRATIVE	
NEW YORK, NY 10016-1601	SERVICES	88,700.
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta number of organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
27/2	oudcou, cic.	
1N/A		
3		
4		
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

Page 8

P	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	71,892,461.
	Average of monthly cash balances	1b	1,085,504.
	Fair market value of all other assets (see instructions)	1c	, ,
	Total (add lines 1a, b, and c)	1d	72,977,965.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	72,977,965.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	1,094,669.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	71,883,296.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	3,594,165.
P	Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certai	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	3,594,165.
2a	Tax on investment income for 2022 from Part V, line 5 2a 19,826.		
b			
С		2c	19,826.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,574,339.
4	Recoveries of amounts treated as qualifying distributions	4	7,108.
5	Add lines 3 and 4	5	3,581,447.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	3,581,447.
P	Part XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,064,903.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4		4	4,064,903.

PROSPECT HILL FOUNDATION INC.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				3,581,447.
2 Undistributed income, if any, as of the end of 2022:				3,331,11,1
a Enter amount for 2021 only			453,035.	
b Total for prior years:		_		
Excess distributions carryover, if any, to 2022:		0.		
a From 2017				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2022 from				
Part XI, line 4: \$ 4,064,903.				
a Applied to 2021, but not more than line 2a			453,035.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	•			
(Election required - see instructions)	0.			2 501 445
d Applied to 2022 distributable amount	20 421			3,581,447.
e Remaining amount distributed out of corpus	30,421.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	30,421.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0.		
assessed		U •		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions e Undistributed income for 2021. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2022. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2023				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2017				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023.	20 121			
Subtract lines 7 and 8 from line 6a	30,421.			
10 Analysis of line 9:				
a Excess from 2018				
b Excess from 2019				
c Excess from 2020 d Excess from 2021				
e Excess from 2022 30 , 421 •				
0 EA0000 HUIH ZUZZ 50 / 421 6				

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	HILL FOUN			13-60	75567 Page 10
Part XIII Private Operating Fo	undations (see in:	structions and Part VI-	A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for					
b Check box to indicate whether the foundate		ig foundation described in		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	
income from Part I or the minimum	(a) 2022	(b) 2021	(c) 2020	(d) 2019	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part IX, line 6, for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XIV Supplementary Infor			the foundation	had \$5,000 or mor	e in assets
at any time during th	e year-see instr	uctions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who			butions received by the	foundation before the close	e of any tax
year (but only if they have contributed mo	ore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who			or an equally large portic	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	a 10% or greater interes	it.			
NONE					
2 Information Regarding Contribution		• • • •	-		
				s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc., t					
a The name, address, and telephone number	er or email address of th	e person to whom applica	itions snould be address	ea:	
h The form in which applications of sold be	outhmitted and informati	ion and materials there are	ould include:		
b The form in which applications should be	submitted and informat	ion and materials they sh	oulu iliciude:		
c Any submission deadlines:					
- , my oubimosion doddinos,					
d Any restrictions or limitations on awards,	, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	other factors:	

PROSPECT HILL FOUNDATION INC. 13-6075567 Form_990-PF (2022) Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AAPI MONTCLAIR N/A PC GENERAL SUPPORT 30 NORMAN ROAD MONTCLAIR, NJ 07043 55. ADIRONDACK EXPLORER N/A PC GENERAL SUPPORT 36 CHURCH STREET SARANAC LAKE, NY 12983 1,500. ADKACTION N/A PC HAMILTON COUNTY FOOD CONNECTIONS P.O. BOX 64 KEESEVILLE, NY 12944 12,500. ADKACTTON N/A PC GENERAL SUPPORT P.O. BOX 64 KEESEVILLE, NY 12944 7,500. PC GENERAL SUPPORT ADKACTION N/A PO BOX 64 KEESEVILLE, NY 12944 1,000. SEE CONTINUATION SHEET(S) 3,122,048. Total 3a **b** Approved for future payment BK ROT, INC. N/A PC GENERAL SUPPORT PO BOX 370538 BROOKLYN, NY 11237 25,000. DEAR BLACK GIRL INC N/A PC GENERAL SUPPORT 2029 LAFONTAINE AVENUE THE BRONX, NY 10457 25,000. GLOBAL GREENGRANTS FUND N/A PC CAPITAL 2840 WILDERNESS PLACE, SUITE A GRANT/ORGANIZATIONAL

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50,000.

525,000.

Total

BOULDER, CO 80301

SHEET (S)

CONTINUATION

SEE

STRENGTHENING

Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)	
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code			
a						
b						
c						
a						
e	_					
T	_					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash			14	26 074		
investments		1,215.		26,974. 889,617.		
4 Dividends and interest from securities	901101	1,413.	14	009,017.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property		22 (54	0.1	400 040		
7 Other investment income	901101	32,654.	01	499,949.		
8 Gain or (loss) from sales of assets other	001101	10 102	10	700 202		
than inventory		10,193.	18	798,392.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:				E 100		
a GRANT REFUNDS	_		01	7,108.		
b	_					
c	_					
d	_					
e		44.060		0.000.040		
12 Subtotal. Add columns (b), (d), and (e)		44,062.		2,222,040.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	2,266,102.	
(See worksheet in line 13 instructions to verify calculations.)					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2022)

Part XV-B

Page 13

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

		Exempt Organiza	ations						
1 Di	d the or	ganization directly or indirec	tly engage in any o	of the followin	g with any other organizati	on described in secti	on 501(c)		Yes No
•		n section 501(c)(3) organiza							
a Tr	ansfers	from the reporting foundation	on to a noncharitab	ole exempt org	anization of:				
								I	X
		assets						1a(2)	X
		sactions:							77
(1) Sales	of assets to a noncharitable	exempt organizati	on				1b(1)	X
		ases of assets from a nonch							X
		l of facilities, equipment, or							X
		oursement arrangements							X
•	•								X
•	•	rmance of services or memb	•	-					X
		facilities, equipment, mailin							
		ver to any of the above is "Ye		-	• •	-			ets,
		s given by the reporting four) the value of the goods, oth			d less than fair market valt	ue in any transaction	or snaring arranger	nent, snow in	
(a) Line		(b) Amount involved	-		exempt organization	(d) Description	of two potons, two possible	no and should a sur	
(a) Line	10.	(b) Amount involved	(c) Name of		exempt organization	(u) Description	of transfers, transactio	ris, and sharing arra	angements
				N/A					
	-								
		ndation directly or indirectly							
in	section	501(c) (other than section 5	501(c)(3)) or in sec	ction 527?				Yes	X No
b If	"Yes," co	mplete the following schedu				_			
		(a) Name of organ	ization		(b) Type of organization		(c) Description of re	elationship	
		N/A							
	000	r penalties of perjury, I declare that belief, it is true, correct, and complete						May the IRS of	liscuss this
Sign		relier, it is true, correct, and comp	lete. Declaration of pre	eparer (other than		lation of which preparer	ias any knowledge.	return with the shown below?	
Here						TREASURE	R	X Yes	☐ No
	Sign	ature of officer or trustee			Date	Title			
		Print/Type preparer's name	e	Preparer's si	gnature	Date	Check if	PTIN	
							self- employed		
Paid		JOSEPH L. AL:	I, CPA	JOSEPH	L. ALI, CP	02/28/24		P02093	808
Prep	arer	Firm's name PKF O					Firm's EIN 87	-323166	6
Use	Only				,				
		Firm's address 245	PARK AVE	NUE, 1	2TH FLOOR				
			YORK, NY				Phone no. 21	2-286-2	600
			,)-PF (2022)
									\ -/

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Part IV	Capital Gains and Lo	sses for Tax on Investment Income				
	(a) List an	d describe the kind(s) of property so	d, e.g., real estate,	r - rui ciiasc	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
4- 0011		PROSPECT CAPITA		D - Donation P	(o., day, yi.)	(o., uuy, yı.)
		VENTURE INVESTM				
			ENT ASSOCIATES, L.F.	P		
			ENT ASSOCIATES IV,	P		
			ESTMENT ASSOCIATES	P		
f		<u> </u>		 		
g						
h						
i						
k						
1						
m						
n						
0						
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) blus (f) minus (g)	
a						716,597.
b						33,007.
С						24,371.
d						9,218.
е						15,199.
f						
g						
h						
i						
<u>j</u>						
k						
m						
<u>n</u>						
0 Compl	ata anly for accets about	ng gain in column (b) and owned by	the foundation on 19/21/60	<i>m</i> .	(6 1 (1))	
	M.V. as of 12/31/69	ng gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of	sses (from col. (h)) of col. (h) gain over ot less than "-0-")	col. (k),
.,,		as of 12/3 1/03	Over coil (j), it arry		<u> </u>	716,597.
<u>a</u>		+				$\frac{710,397.}{33,007.}$
<u>b</u>		1				24,371.
<u>C</u>		1				9,218.
<u>d</u> e		<u> </u>				15,199.
f						13,133.
g						
у h						
<u> </u>						
i						
k						
I						
m						
n						
0						
		. 12	r in Dort I line 7			
		apital loss) { If gain, also enter "-	, I		ı	798,392.
If gain,	rt-term capital gain or (lo also enter in Part I, line 8 Lenter "-0-" in Part I, line		iu (0).		N / A	

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor ADKACTION N/A PC GENERAL SUPPORT PO BOX 64 KEESEVILLE, NY 12944 4,305. AICARDI SYNDROME FOUNDATION N/A PC GENERAL SUPPORT PO BOX 3202 ST. CHARLES, IL 60174 50. ALL SAINTS' EPISCOPAL CHURCH PC GENERAL SUPPORT N/A 286 7TH AVENUE BROOKLYN, NY 11215 3,300. ALLEY CAT ALLIES N/A PC GENERAL SUPPORT 7920 NORFOLK AVENUE SUITE 600 BETHESDA, MD 20814 300. ALLIANCE OF FAMILIES FOR JUSTICE N/A PC GENERAL SUPPORT 8 WEST 126ST 3RD FLOOR NEW YORK, NY 10027 200. AMERICAN CANCER SOCIETY N/A PC GENERAL SUPPORT 30 SPEEN STREET FRAMINGHAM, MA 01701-1800 211. AMERICAN CIVIL LIBERTIES UNION N/A PC DRAG DEFENSE FUND FOUNDATION 125 BROAD STREET, 18TH FLOOR NEW YORK, NY 10004 70. ANTI-DEFAMATION LEAGUE N/A PC GENERAL SUPPORT 605 3RD AVENUE NEW YORK, NY 10158 100. APPALACHIAN WILDLIFE REFUGE N/A PC GENERAL SUPPORT P.O. BOX 824 CANDLER, NC 28715 300. ARMONK INDEPENDENT FIRE COMPANY N/A PC GENERAL SUPPORT PO BOX 116 ARMONK, NY 10504 100. 3,099,493. Total from continuation sheets

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the		_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
ARMS CONTROL ASSOCIATION 1200 18TH STREET NW, SUITE 1175	N/A	PC	ARMS CONTROL STRATEGIES TO MOVE US	
WASHINGTON, DC 20036			BACK FROM THE BRINK	75,000.
ARMS CONTROL ASSOCIATION 1200 18TH STREET NW, SUITE 1175 WASHINGTON, DC 20036	N/A	PC	CAPACITY BUILDING	50,000.
ARMS CONTROL ASSOCIATION 1200 18TH STREET NW, SUITE 1175 WASHINGTON, DC 20036	N/A	PC	COMMITTEE GRANT	10,000.
ASPCA 424 EAST 92ND STREET NEW YORK, NY 10128	N/A	PC	GENERAL SUPPORT	200.
ATCHAFALAYA BASINKEEPER 162 CROYDON AVENUE BATON ROUGE, LA 70806	N/A	PC	GENERAL SUPPORT	400.
AUTISM SPEAKS PO BOX 37148 BOONE, IA 50037-0148	N/A	PC	GENERAL SUPPORT	1,000.
BALLET HISPANICO OF NEW YORK 167 WEST 89TH STREET NEW YORK, NY 10024	N/A	PC	GENERAL SUPPORT	13,500.
BERKSHIRE AGRICULTURE VENTURES 314 MAIN STREET #11 GREAT BARRINGTON, MA 01230	N/A	PC	MARKET MATCH FUND	20,000.
BERKSHIRE AGRICULTURE VENTURES 314 MAIN STREET #11 GREAT BARRINGTON, MA 01230	N/A	PC	PROJECT GRANT	15,000.
BERKSHIRE NATURAL RESOURCES COUNCIL TWENTY BANK ROW PITTSFIELD, MA 01201-6297	N/A	PC	GENERAL SUPPORT	500.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)	_	_	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BERKSHIRE SOUTH REGIONAL COMMUNITY CENTER	N/A	PC	GENERAL SUPPORT	
15 CRISSEY RD.				
GREAT BARRINGTON, MA 01230				3,400.
BEST FRIENDS ANIMAL SOCIETY	N/A	PC	GENERAL SUPPORT	
307 WEST BROADWAY				
NEW YORK, NY 10013				400.
BEYOND BOND & LEGAL DEFENSE FUND INC	AT / A	D.G.	GENERAL GURRORM	
394 CENTRAL STREET	N/A	PC	GENERAL SUPPORT	
SAUGUS, MA 01906				900.
BAUGUS, MA 01700				300.
BK ROT, INC.	N/A	PC	KD WELLNESS FUND	
PO BOX 370538				
BROOKLYN, NY 11237				200.
BK ROT, INC.	N/A	PC	KD WELLNESS FUND	
PO BOX 370538	N/A		ND WEDDNESS FOND	
BROOKLYN, NY 11237				200.
·				
BK ROT, INC.	N/A	PC	BK ROT, INC.	
PO BOX 370538				25 000
BROOKLYN, NY 11237				25,000.
BK ROT, INC.	N/A	PC	KD WELLNESS FUND	
PO BOX 370538				
BROOKLYN, NY 11237				400.
BLAU WEISS GOTTSCHEE	N/A	PC	GENERAL SUPPORT	
6483 82ND PL	N/A		GENERAL BUTTORT	
MIDDLE VILLAGE, NY 11379				5,200.
				,
BOB WOODRUFF FOUNDATION	N/A	PC	GENERAL SUPPORT	
1350 BROADWAY SUITE 905				
NEW YORK, NY 10018				103.
BRONX RIVER ALLIANCE	N/A	PC	GENERAL SUPPORT	
ONE BRONX RIVER PARKWAY				
BRONX, NY 10462				15,000.
Total from continuation sheets				

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor BRONX RIVER ALLIANCE N/A PC BRONX RIVER ALLIANCE ONE BRONX RIVER PARKWAY LEADERSHIP TRANSITION BRONX, NY 10462 SUPPORT 25,000. BRONX RIVER ALLIANCE N/A PC GENERAL SUPPORT ONE BRONX RIVER PARKWAY BRONX, NY 10462 1,000. BRONX RIVER ALLIANCE PC GENERAL SUPPORT N/A ONE BRONX RIVER PARKWAY BRONX, NY 10462 4,294. BROOKLYN BOTANIC GARDEN N/A PC GENERAL SUPPORT 1000 WASHINGTON AVENUE BROOKLYN, NY 11225 500. CAMBRIDGE WOMEN'S CENTER N/A PC GENERAL SUPPORT 25 MOUNT AUBURN STREET CAMBRIDGE, MA 02138 4,000. CAMP TECUMSEH N/A PC GENERAL SUPPORT 95 MOULTONBORO NECK ROAD MOULTONBOROUGH, NH 03254 6,000. CARNEGIE ENDOWMENT FOR INTERNATIONAL N/A PC 2023 CEIP NUCLEAR PEACE POLICY CONFERENCE 1779 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20036 25,000. CARY INSTITUTE OF ECOSYSTEM STUDIES N/A PC GENERAL SUPPORT PO BOX AB, 2801 SHARON TURNPIKE MILLBROOK, NY 12545 3,000. CAT HOUSE ON THE KINGS N/A PC GENERAL SUPPORT 7120 SOUTH KINGS RIVER ROAD PARLIER, CA 93648 300. CENTER FOR ARMS CONTROL AND N/A PC GENERAL SUPPORT NON-PROLIFERATION 820 1ST STREET NE LL-180 WASHINGTON, DC 20002 55,000. Total from continuation sheets

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
CENTER FOR INDEPENDENT DOCUMENTARY PO BOX 95216	N/A	PC	BEYOND YELLOWFACE	
NEWTON, MA 02067				330.
CENTER FOR NULEADERSHIP ON HUMAN	N/A	PC	KD WELLNESS FUND	
JUSTICE & HEALING	,,			
7 MARCUS GARVEY BOULEVARD APT. 423				400
BROOKLYN, NY 11206				400.
CENTER FOR NULEADERSHIP ON HUMAN	N/A	PC	GRANTS FOR GROWTH	
JUSTICE & HEALING 7 MARCUS GARVEY BOULEVARD APT. 423				
BROOKLYN, NY 11206				35,000.
CENTER FOR NULEADERSHIP ON HUMAN	N/A	PC	CENTER FOR	
JUSTICE & HEALING			NULEADERSHIP ON HUMAN	
7 MARCUS GARVEY BOULEVARD APT. 423			JUSTICE & HEALING	25,000.
BROOKLYN, NY 11206				25,000.
CENTER FOR NULEADERSHIP ON HUMAN	N/A	PC	KD WELLNESS FUND	
JUSTICE & HEALING 7 MARCUS GARVEY BOULEVARD APT. 423				
BROOKLYN, NY 11206				400.
CENTRAL PARK CONSERVANCY, INC.	N/A	PC	BEINECKE SMALL GRANTS	
14 EAST 60TH STREET NEW YORK, NY 10022			PROGRAM	25,000.
,				,
CENTURION	N/A	PC	GENERAL SUPPORT	
1000 HERRONTOWN ROAD	,,			
PRINCETON, NJ 08540				30,000.
CHAPLAINS ON THE WAY PO BOX 541236	N/A	PC	GENERAL SUPPORT	
WALTHAM, MA 02454				15,000.
CHAPLAINS ON THE WAY	N/A	PC	GENERAL SUPPORT	
PO BOX 541236				
WALTHAM, MA 02454				500.
CHAPLAINS ON THE WAY PO BOX 541236	N/A	PC	GENERAL SUPPORT	
WALTHAM, MA 02454				2,500.
Total from continuation sheets				

13-6075567 PROSPECT HILL FOUNDATION INC. Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CHAPLAINS ON THE WAY N/A PC GENERAL SUPPORT PO BOX 541236 WALTHAM, MA 02454 4,284. CHINESE FOR AFFIRMATIVE ACTION N/A PC ASIAN REFUGEES UNITED 17 WALTER U. LUM PLACE KD WELLNESS FUND GRANT SAN FRANCISCO, CA 94108 230. CHINESE FOR AFFIRMATIVE ACTION PC ASIAN REFUGEES UNITED N/A 17 WALTER U. LUM PLACE SAN FRANCISCO, CA 94108 25,000. CHINESE FOR AFFIRMATIVE ACTION N/A PC ASIAN REFUGEES UNITED 17 WALTER U. LUM PLACE KD WELLNESS FUND GRANT 230. SAN FRANCISCO, CA 94108 CHINESE FOR AFFIRMATIVE ACTION N/A PC ASIAN REFUGEES UNITED 17 WALTER U. LUM PLACE KD WELLNESS FUND GRANT SAN FRANCISCO, CA 94108 450. CHINESE FOR AFFIRMATIVE ACTION N/A PC ASIAN REFUGEES UNITED 17 WALTER U. LUM PLACE GRANTS FOR GROWTH SAN FRANCISCO, CA 94108 10,000. CHURCH OF THE ANGELS N/A PC GENERAL SUPPORT 5666 MORGAN ROAD NEW ALBANY, OH 43054 300. CHURCH OF THE ANGELS N/A PC GENERAL SUPPORT 5666 MORGAN ROAD NEW ALBANY, OH 43054 300. CITY HARVEST, INC. N/A PC GENERAL SUPPORT

PC

N/A

Total from continuation sheets

6 EAST 32ND ST. 5TH FLOOR

NEW YORK, NY 10016

CITY MEALS ON WHEELS

355 LEXINGTON AVENUE NEW YORK, NY 10017

GENERAL SUPPORT

108.

200.

Part XIV Supplementary Informatio				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CLASSICAL THEATER OF HARLEM	N/A	PC	GENERAL SUPPORT	
520 8TH AVE #313				
NEW YORK, NY 10018				74.
CLEAN + HEALTHY	N/A	PC	GENERAL SUPPORT	
69 STATE STREET SUITE 1400C				694
ALBANY, NY 12207				684.
CLEAN + HEALTHY	N/A	PC	GALA SUPPORT	
69 STATE STREET SUITE 1400C				1 400
ALBANY, NY 12207				1,400.
CLEAN + HEALTHY	N/A	PC	GENERAL SUPPORT	
69 STATE STREET				25 000
ALBANY, NY 12207				25,000.
CLEAN + HEALTHY	N/A	PC	RESERVED FUND	
69 STATE STREET ALBANY, NY 12207				25,000.
ALDANI, NI 12207				23,000.
CLIENTEARTH 23901 CALABASAS ROAD	N/A	PC	GENERAL SUPPORT	
CALABASAS, CA 91302-3308				20,000.
,				
	7.73	7.0	G-11-01-1 G-11-01-5	
CLIMATE CRITICAL EARTH 909 WEST 37TH STREET	N/A	PC	GENERAL SUPPORT	
BALTIMORE, MD 21211				100.
CLOSE ENCOUNTERS WITH MUSIC, INC.	N/A	PC	GENERAL SUPPORT	
P.O. BOX 34	[''		CLINICID BOILONI	
GREAT BARRINGTON, MA 01230				4,000
COLUMBIA UNIVERSITY	N/A	PC	GENERAL SUPPORT	
622 WEST 113TH STREET, MC 4524			332344	
NEW YORK, NY 10025				1,000.
COMMINITAL FOOD DANK OF NEW TERCES	77 / 2	DG.	GENEDAL GUDDODE	
COMMUNITY FOOD BANK OF NEW JERSEY, INC.	N/A	PC	GENERAL SUPPORT	
inc. 37 legal street				
NEWARK, NJ 07114				420.
Total from continuation sheets				

Part XIV Supplementary Information	1			
3 Grants and Contributions Paid During the Y	ear (Continuation)	_		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
- Name and address (name or sasmoss)	or substantial contributor	recipient		
COMMUNITY FOOD BANK OF NEW JERSEY,	N/A	PC	GENERAL SUPPORT	
INC.				
37 LEGAL STREET				
NEWARK, NJ 07114				420.
COMMUNITY FOUNDATION OF PUERTO RICO	N/A	PC	HURACAN FIONA	
1719 PONCE DE LEON AVE.			RESPUESTA	
SAN JUAN, PUERTO RICO 00909				800.
COMMUNITY MUSICWORKS	N/A	PC	GENERAL SUPPORT	
1392 WESTMINSTER STREET	N/A		GENERAL BOTTORT	
PROVIDENCE, RI 02909-1628				25,000.
COMMUNITY MUSICWORKS	N/A	PC	GENERAL SUPPORT	
1392 WESTMINSTER STREET PROVIDENCE, RI 02909-1628				2,400.
INCOLUMN NE CESOS TOPO				2,100.
COMMUNITY PREPARATORY SCHOOL	N/A	PC	GENERAL SUPPORT	
126 SOMERSET STREET				2 000
PROVIDENCE, RI 02907-1041				2,000.
COMPASSIONWORKS INTERNATIONAL	N/A	PC	GENERAL SUPPORT	
PO BOX 92586				
HENDERSON, NV 89009				200.
CORNELL LABORATORY OF ORNITHOLOGY	N/A	PC	GENERAL SUPPORT	
159 SAPSUCKER WOODS ROAD				
ITHACA, NY 14850				200.
CROSSROADS RHODE ISLAND	N/A	PC	ROADS TO HOME CAMPAIGN	
160 BROAD STREET				
PROVIDENCE, RI 02903				25,000.
DANA HALL SCHOOL	N/A	PC	GENERAL SUPPORT	
45 DANA ROAD				
WELLESLEY, MA 02482				6,800.
DAULD GEREEN GOUGOL OF DEAN AN WITH	NT / 2	D.C.	CENEDAL GUDDODE	
DAVID GEFFEN SCHOOL OF DRAMA AT YALE PO. BOX 208325	N/A	PC	GENERAL SUPPORT	
NEW HAVEN, CT 06520-8325				2,000.
Total from continuation sheets				,

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor DAVID GEFFEN SCHOOL OF DRAMA AT YALE N/A PC DAVID GEFFEN SCHOOL OF PO. BOX 208325 DRAMA AT YALE NEW HAVEN, CT 06520-8325 2,000. DEAR BLACK GIRL INC N/A PC KD WELLNESS FUND 2029 LAFONTAINE AVENUE THE BRONX, NY 10457 400. DEAR BLACK GIRL INC PC DEAR BLACK GIRL INC N/A 2029 LAFONTAINE AVENUE THE BRONX, NY 10457 25,000. DEAR BLACK GIRL INC N/A PC GRANTS FOR GROWTH 2029 LAFONTAINE AVENUE THE BRONX, NY 10457 40,000. DEAR BLACK GIRL INC N/A PC KD WELLNESS FUND 2029 LAFONTAINE AVENUE THE BRONX, NY 10457 400. DWIGHT HALL AT YALE N/A PC YALE PRISON EDUCATION P.O. BOX 209008 INITIATIVE NEW HAVEN, CT 06520-9008 15,000. DWIGHT HALL AT YALE N/A PC GENERAL SUPPORT P.O. BOX 209008 NEW HAVEN, CT 06520-9008 1,000. EDUCATION THROUGH MUSIC N/A PC GENERAL SUPPORT 122 E. 42ND STREET SUITE 1501 NEW YORK, NY 10168 213. EL MUSEO DEL BARRIO N/A PC GENERAL SUPPORT 1230 FIFTH AVENUE NEW YORK, NY 10029 5,000. ELEPHANT SANCTUARY N/A PC GENERAL SUPPORT PO BOX 3930804 DARBYTOWN ROAD HOHENWALD, TN 38462 400.

Total from continuation sheets

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
ELEPHANT SANCTUARY	N/A	PC	GENERAL SUPPORT	
PO BOX 393				
HOHENWALD, TN 38462				1,000.
ENVIRONMENTAL DEFENSE FUND NYC 257 PARK AVENUE, SOUTH	N/A	PC	EDUCATING VOTERS ABOUT THE NEW YORK STATE	
NEW YORK, NY 10010			CLEAN WATER, CLEAN	
,			AIR, GREEN JOBS BOND	
			ACT BALLOT MEASURE	25,000.
ETHICAL CULTURE FIELDSTON SCHOOL	N/A	PC	GENERAL SUPPORT	
3901 FIELDSTON ROAD				
BRONX, NY 10471				5,000.
EXALT YOUTH	N/A	PC	GENERAL SUPPORT	
17 BATTERY PL, 3RD FLOOR				
NEW YORK, NY 10004				20,000.
EXALT YOUTH	N/A	PC	GENERAL SUPPORT	
17 BATTERY PL, 3RD FLOOR				
NEW YORK, NY 10004				1,000.
EXALT YOUTH	N/A	PC	GENERAL SUPPORT	
17 BATTERY PL, 3RD FLOOR				
NEW YORK, NY 10004				2,000.
EXALT YOUTH	N/A	PC	GENERAL SUPPORT	
17 BATTERY PL, 3RD FLOOR NEW YORK, NY 10004				10,346.
Man Tokk, MI 10001				10,340.
EXALT YOUTH 17 BATTERY DI. 3DD FLOOP	N/A	PC	GENERAL SUPPORT	
17 BATTERY PL, 3RD FLOOR NEW YORK, NY 10004				10,383.
				20,000.
	7/2	l na	anymny arrang	
FAIRFIELD UNIVERSITY 1073 NORTH BENSON ROAD	N/A	PC	GENERAL SUPPORT	
FAIRFIELD, CT 06824				10,000.
				,•
EARN EDEGLI DUCAR TOLANA	NT / 2	DG.	IIA DUDOM WITHOUTH C. TOP	
FARM FRESH RHODE ISLAND 10 SIMS AVE, UNIT 103	N/A	PC	HARVEST KITCHEN'S JOB INITIATIVE PROGRAM	
PROVIDENCE, RI 02909				15,000.
Total from continuation sheets				, .

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
FARM SANCTUARY	N/A	PC	GENERAL SUPPORT	
P.O. BOX 150 WATKINS GLEN, NY 14891-0150				400.
FEDERATION OF AMERICAN SCIENTISTS	N/A	PC	NUCLEAR INFORMATION	
1112 16TH STREET NW			PROJECT	
WASHINGTON, DC 20036				35,000.
FISHER CENTER FOR ALZHEIMER'S	N/A	PC	GENERAL SUPPORT	
RESEARCH FOUNDATION				
110 EAST 42ND STREETØFLOOR16 NEW YORK, NY 10017				400.
Idi. Tolki, H. 10017				100.
FORGOTTEN FELINES	N/A	PC	GENERAL SUPPORT	
PO BOX 430	N/A	•	GENERAL SUFFORT	
VALHALLA, NY 10595				300.
FOUNDATION FOR A CIVIL SOCIETY	N/A	PC	GENERAL SUPPORT	
25 EAST END AVENUE, 1B				
NEW YORK, NY 10028				15,000.
FRESH AIR FUND 633 THIRD AVENUE, 14TH FLOOR	N/A	PC	GENERAL SUPPORT	
NEW YORK, NY 10017				400.
FRESH AIR FUND	N/A	PC	GENERAL SUPPORT	
633 THIRD AVENUE, 14TH FLOOR				
NEW YORK, NY 10017				400.
FRIENDS OF THE IRVINGTON LIBRARY 125 ASTOR STREET	N/A	PC	GENERAL SUPPORT	
IRVINGTON-ON-HUDSON, NY 10533				50.
·				
FRIENDS OF THE NORTH CASTLE PUBLIC LIBRARY, INC.	N/A	PC	GENERAL SUPPORT	
PO BOX 767				
ARMONK, NY 10504				500.
FRIENDS OF THE SMITHSONIAN	N/A	PC	GENERAL SUPPORT	
PO BOX 37012, MRC 712 WASHINGTON, DC 20005				300.
Total from continuation sheets				330.

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	/ear (Continuation)			
Recipient Name and address (home as business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
FUND FOR PUBLIC SCHOOLS 52 CHAMBERS STREET	N/A	PC	GENERAL SUPPORT	
NEW YORK, NY 10007				100.
FUNDACION DE MUJERES EN PUERTO RICO	N/A	PC	HURRICANE FIONA	
1863 AVE FERNANDEZ JUNCOS APT205	1,,			
SAN JUAN, PUERTO RICO 00909				512.
GATHERING OF NATIONS LIMITED	N/A	PC	GENERAL SUPPORT	
3301 COORS BOULEVARD NORTHWEST				
ALBUQUERQUE, NM 87120				800.
GLOBAL GREENGRANTS FUND	N/A	PC	CAPITAL GRANT	
2840 WILDERNESS PLACE, SUITE A				
BOULDER, CO 80301				50,000.
GLOBAL GREENGRANTS FUND	N/A	PC	GENERAL SUPPORT	
2840 WILDERNESS PLACE, SUITE A				15 000
BOULDER, CO 80301				15,000.
Grant Hand				
GLOBAL ZERO 1835 7TH ST NW, #105	N/A	PC	PREVENTING NUCLEAR ESCALATION IN UKRAINE	
WASHINGTON, DC 20001				25,000.
·				·
GOD'S LOVE WE DELIVER, INC.	N/A	PC	GENERAL SUPPORT	
166 AVENUE OF THE AMERICAS			SENERAL BOTTONT	
NEW YORK, NY 10013				104.
GRANNIES RESPOND	N/A	PC	GENERAL SUPPORT	
P.O. BOX 1106				
BEACON, NY 12508				53.
GREENAGERS	N/A	PC	GENERAL SUPPORT	
PO BOX 157				12 500
SOUTH EGREMONT, MA 01258				12,500.
GRIST MAGAZINE, INC. 710 2ND AVENUE	N/A	PC	GENERAL SUPPORT	
SEATTLE, WA 98104				400.
Total from continuation sheets	······································	······································		

Part XIV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)		-	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
GROUNDSWELL FUND	N/A	PC	GENERAL SUPPORT	
548 MARKET STREET #49734				
SAN FRANCISCO, CA 94104				100,000.
GROUNDSWELL FUND	N/A	PC	RJ GRANT SUPPORT	
548 MARKET STREET #49734	1,11		no dianti borroni	
SAN FRANCISCO, CA 94104				50,000.
·				,
GUIDE DOG FOUNDATION FOR THE BLIND,	N/A	PC	GENERAL SUPPORT	
INC				
371 E MAIN STREET				206
SMITHTOWN, NY 11787-2976				206.
GUIDING EYES FOR THE BLIND	N/A	PC	GENERAL SUPPORT	
611 GRANITE SPRINGS ROAD				
YORKTOWN HEIGHTS, NY 10598				206.
HARLEM PRIDE INC	N/A	PC	GENERAL SUPPORT	
42 MACOMBS PLACE				
NEW YORK, NY 10039				50.
HARMONY PROGRAM	N/A	PC	GENERAL SUPPORT	
1700 BROADWAY, 39TH FLOOR NEW YORK, NY 10019				1,400.
Ida Total, NI 10015				1,100.
HEARTBEAT OPERA	N/A	PC	GENERAL SUPPORT	
509 MADISON AVENUE, SUITE 2300				
NEW YORK, NY 10022				4,000.
HIGH COUNTRY NEWS	N/A	PC	GENERAL SUPPORT	
P.O. BOX 1090				
PAONIA, CO 81428				600.
WIGH ANDED DEGENERAL STREET	7/2	7.0	TN WONOD OF 33	
HIGHLANDER RESEARCH & EDUCATION	N/A	PC	IN HONOR OF AMELIE	
CENTER 1959 HIGHLANDER WAY			RATLIFF	
NEW MARKET, TN 37820				440.
HOW OUR LIVES LINK ALTOGETHER	N/A	PC	KD WELLNESS FUND	
10-41 115TH STREET #3B				400
COLLEGE POINT, NY 11356				400.
Total from continuation sheets				<u> </u>

Part XIV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
HOW OUR LIVES LINK ALTOGETHER 10-41 115TH STREET #3B COLLEGE POINT, NY 11356	N/A	PC	HOW OUR LIVES LINK	25,000.
HOW OUR LIVES LINK ALTOGETHER 10-41 115TH STREET #3B COLLEGE POINT, NY 11356	N/A	PC	KD WELLNESS FUND	400.
HSS FOUNDATION 535 EAST 70TH STREET NEW YORK, NY 10021	N/A	PC	GENERAL SUPPORT	208.
HUMANE SOCIETY OF THE UNITED STATES 2100 L STREET, NW WASHINGTON, DC 20037	N/A	PC	GENERAL SUPPORT	72.
HUNTER COLLEGE FOUNDATION 68TH STREET EAST 1313A NEW YORK, NY 10065	N/A	PC	DISTORTIONS: NON-CONFORMISM AND DISSENT CURATED BY JOACHIM PISSARRO	10,000.
HUNTER COLLEGE FOUNDATION 68TH STREET EAST 1313A NEW YORK, NY 10065	N/A	PC	CENTER FOR PUERTO	50.
HUNTER COLLEGE 425 EAST 25TH STREET, BOX 596 NEW YORK, NY 10010	N/A	PC	HUNTER MFA PROGRAM	1,000.
INDEPENDENT ARTS & MEDIA P.O. BOX 880492 SAN FRANCISCO, CA 94188	N/A	PC	GRANTS FOR GROWTH	40,000.
INDEPENDENT ARTS & MEDIA P.O. BOX 880492 SAN FRANCISCO, CA 94188	N/A	PC	KD WELLNESS FUND	440.
INDEPENDENT ARTS & MEDIA P.O. BOX 880492 SAN FRANCISCO, CA 94188	N/A	PC	5 ELEMENTS	25,000.
Total from continuation sheets				

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor INDEPENDENT ARTS & MEDIA N/A PC KD WELLNESS FUND P.O. BOX 880492 SAN FRANCISCO, CA 94188 220. INDEPENDENT ARTS & MEDIA N/A PC KD WELLNESS FUND P.O. BOX 880492 SAN FRANCISCO, CA 94188 220. INKSTICK MEDIA PC GENERAL SUPPORT N/A 6935 CARDOZO COURT NEW MARKET, MD 21774 20,000. IOBY (IN OUR BACKYARDS) N/A PC GENERAL SUPPORT PO BOX 4668 #74253 NEW YORK, NY 10163-4668 10,000. IRVINGTON VOLUNTEER AMBULANCE CORP N/A PC GENERAL SUPPORT P.O. BOX 101 IRVINGTON, NY 10533 100. JACOB'S PILLOW N/A PC GENERAL SUPPORT 358 GEORGE CARTER ROAD BECKET, MA 01223 10,000. JACOB'S PILLOW N/A PC NEIL CHRISMAN FUND FOR INTERNATIONAL DANCE 358 GEORGE CARTER ROAD BECKET, MA 01223 10,000. JACOB'S PILLOW N/A PC GENERAL SUPPORT 358 GEORGE CARTER ROAD BECKET, MA 01223 20,000. JAMESTOWN ART CENTER N/A PC GENERAL SUPPORT P.O. BOX 97 JAMESTOWN, RI 02835 500. JANE PLACE NEIGHBORHOOD N/A PC GENERAL SUPPORT SUSTAINABILITY INITIATIVE 2533 COLUMBUS STREET NEW ORLEANS, LA 70119 300. Total from continuation sheets

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution JONAH BOKAER ARTS FOUNDATION N/A PC GENERAL SUPPORT JONAH BOKAER, SUITE #23 BROOKLYN, NY 11206 PC GENERAL SUPPORT JUSTICE COMMITTEE N/A PC 2022 JUSTICE STATE OF MIND JUSTICE COMMITTEE N/A PC AND WELLNESS FUND JUSTICE FOR FAMILIES N/A PC PC FAMILIES JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES JUSTICE FOR FAMILIES N/A PC FA	
Show any relationship to status of recipient s	
JONAH BOKAER ARTS FOUNDATION 304 BOERUM STREET, SUITE #23 BROOKLYN, NY 11206 JUSTICE COMMITTEE 3440 79TH ST. #3G JACKSON HEIGHTS, NY 11372 JUSTICE FOR FAMILIES BRONX, NY 10460 JUSTICE FOR FAMILIES N/A PC RD WELLNESS FUND JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES	Amount
304 BOERUM STREET, SUITE #23 BROOKLYN, NY 11206 JUSTICE COMMITTEE 3440 79TH ST. #3G JACKSON HEIGHTS, NY 11372 JUSTICE FOR FAMILIES 800 HONEYWELL AVENUE 800NX, NY 10460 PC JUSTICE FOR FAMILIES 800 HONEYWELL AVENUE 800NX, NY 10460 PC JUSTICE FOR FAMILIES 800 HONEYWELL AVENUE 800NX, NY 10460	
304 BOERUM STREET, SUITE #23 BROOKLYN, NY 11206 JUSTICE COMMITTEE 3440 79TH ST. #3G JACKSON HEIGHTS, NY 11372 JUSTICE FOR FAMILIES 8000 HONEYWELL AVENUE	
BROOKLYN, NY 11206 JUSTICE COMMITTEE 3440 79TH ST. #3G JACKSON HEIGHTS, NY 11372 JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460 MYA PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460	
JUSTICE COMMITTEE 3440 79TH ST. #3G JACKSON HEIGHTS, NY 11372 JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460 N/A PC RD WELLNESS FUND JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460	
JUSTICE FOR FAMILIES BRONX, NY 10460 MIND MIND MIND MIND MIND PC KD WELLNESS FUND PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES N/A PC MIND MIND MIND PC KD WELLNESS FUND JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES	5,000.
JUSTICE FOR FAMILIES DIUSTICE FOR FAMILIES N/A JUSTICE FOR FAMILIES N/A PC KD WELLNESS FUND JUSTICE FOR FAMILIES N/A PC PC PC PC PC PC PC PC PC P	
JUSTICE FOR FAMILIES N/A PC RD WELLNESS FUND 2090 HONEYWELL AVENUE BRONX, NY 10460 JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460	
JUSTICE FOR FAMILIES N/A PC RD WELLNESS FUND 2090 HONEYWELL AVENUE BRONX, NY 10460 PC JUSTICE FOR FAMILIES N/A PC JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460	9.00
2090 HONEYWELL AVENUE BRONX, NY 10460 JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460 PC JUSTICE FOR FAMILIES	800.
2090 HONEYWELL AVENUE BRONX, NY 10460 JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460 PC JUSTICE FOR FAMILIES	
JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460 DESCRIPTION OF THE PROPERTY OF THE	
JUSTICE FOR FAMILIES 2090 HONEYWELL AVENUE BRONX, NY 10460	400.
2090 HONEYWELL AVENUE BRONX, NY 10460	400.
2090 HONEYWELL AVENUE BRONX, NY 10460	
BRONX, NY 10460	
	25,000.
JUSTICE FOR FAMILIES N/A PC KD WELLINESS FIND	
DUSTICE FOR PARILIES IN/A IPI KII WEILINGSS EINNI	
2090 HONEYWELL AVENUE	
BRONX, NY 10460	400.
LA PLAZITA INSTITUTE N/A PC GENERAL SUPPORT	
831 ISLETA BLVD SW	
ALBUQUERQUE, NM 87105-3930	35,000.
LA SALLE ACADEMY N/A PC GENERAL SUPPORT	
215 EAST 6TH STREET	
NEW YORK, NY 10003	200.
LA SALLE ACADEMY N/A PC GENERAL SUPPORT	
215 EAST 6TH STREET	
NEW YORK, NY 10003	200.
LATIN SCHOOL OF CHICAGO N/A PC GENERAL SUPPORT	
59 W. NORTH BOULEVARD	1 000
CHICAGO, IL 60610	1,000.
LEGAL SERVICES FOR PRISONERS WITH N/A PC JUNETEENTH JUBILEE	
CHILDREN	
4400 MARKET STREET	
OAKLAND, CA 94608 Total from continuation sheets	380.

13-6075567 Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor LINCOLN CENTER THEATER N/A PC OPEN STAGES EDUCATION 150 WEST 65TH STREET PROGRAM NEW YORK, NY 10023 25,000. LINCOLN CENTER THEATER N/A PC GENERAL SUPPORT 150 WEST 65TH STREET NEW YORK, NY 10023 5,000. LINEAGE PROJECT PC LINEAGE PROJECT N/A 228 PARK AVENUE SOUTH NEW YORK, NY 10003 25,000. LINEAGE PROJECT N/A PC KD WELLNESS FUND 228 PARK AVENUE SOUTH NEW YORK, NY 10003 400. LIVING REDEMPTION DEVELOPMENT INC. N/A PC GENERAL SUPPORT 302 WEST 124TH STREET NEW YORK, NY 10027 450. LOUISTANA BUCKET BRIGADE N/A PC GENERAL SUPPORT 3416 B CANAL STREET NEW ORLEANS, LA 70119 200. MAHAIWE PERFORMING ARTS CENTER, INC. N/A PC ROOF REPLACEMENT AND P.O. BOX 690 UPPER-STORY EXTERIOR GREAT BARRINGTON, MA 01230 RESTORATION 25,000. MARY MITCHELL FAMILY AND YOUTH CENTER PC THE BLACK FEMINIST 2007 MAPES AVE PROJECT KD WELLNESS BRONX, NY 10457 FUND 220. MARY MITCHELL FAMILY AND YOUTH CENTER REPRODUCTIVE JUSTICE N/A PC 2007 MAPES AVE EDUCATION EVENT FOR BRONX, NY 10457 THE BLACK FEMINIST PROJECT 5,000.

2007 MAPES AVE

BRONX, NY 10457

PC

N/A

Total from continuation sheets

MARY MITCHELL FAMILY AND YOUTH CENTER

FUND

THE BLACK FEMINIST

PROJECT KD WELLNESS

220.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor MARY MITCHELL FAMILY AND YOUTH CENTER PC THE BLACK FEMINIST 2007 MAPES AVE PROJECT BRONX, NY 10457 25,000. MASTER VOICES N/A PC THE LOIS CONWAY FUND 57 WEST 57TH STREET 3RD FLOOR SUITE FOR ARTISTIC 324 NEW YORK, NY 10019 EXCELLENCE 3,400. METROPOLITAN OPERA ASSOCIATION PC GENERAL SUPPORT N/A 30 LINCOLN CENTER NEW YORK, NY 10023 7,000. METROPOLITAN OPERA ASSOCIATION N/A PC GENERAL SUPPORT LINCOLN CENTER NEW YORK, NY 10023 4,000. METROPOLITAN OPERA ASSOCIATION N/A PC GENERAL SUPPORT LINCOLN CENTER NEW YORK, NY 10023 4,000. METROPOLITAN OPERA ASSOCIATION N/A PC GENERAL SUPPORT LINCOLN CENTER NEW YORK, NY 10023 4,000. MICHAEL J. FOX FOUNDATION FOR N/A PC GENERAL SUPPORT PARKINSON'S RESEARCH GRAND CENTRAL STA PO BOX 4777 NEW YORK, NY 10163 258. MONTCLAIR AMBULANCE UNIT N/A PC GENERAL SUPPORT 95 WALNUT STREET MONTCLAIR, NJ 07042 210. MOTHERS OUT FRONT N/A PC GENERAL SUPPORT 30 BOW STREET CAMBRIDGE, MA 02138 1,000. MUSCULAR DYSTROPHY ASSOCIATION N/A PC GENERAL SUPPORT 3300 E. SUNRISE DRIVE TUCSON, AZ 85718 100. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor MYSTIC SEAPORT MUSEUM PC CENTER FOR N/A 75 GREENMANVILLE AVENUE EXPERIENTIAL MYSTIC, CT 06355-0990 EDUCATIONS MARITIME ADVENTURE PROGRAM 50,000. NATIONAL AUDOBON SOCIETY N/A PC AUDOBON CONNECTICUT 225 VARICK ST NEW YORK, NY 10014 1,000. NATIONAL AUDUBON SOCIETY PC N/A GENERAL SUPPORT 225 VARICK STREET NEW YORK, NY 10014 100. NATIONAL GEOGRAPHIC N/A PC GENERAL SUPPORT 1145 17TH STREET NORTHWEST WASHINGTON, DC 20036 300. NATIONAL LATINA INSTITUTE FOR N/A PC GENERAL SUPPORT REPRODUCTIVE JUSTICE 40 EXCHANGE PL 1300 NEW YORK, NY 10005 100,000. NATIONAL LATINA INSTITUTE FOR N/A PC GENERAL SUPPORT REPRODUCTIVE JUSTICE 40 EXCHANGE PL 1300 NEW YORK, NY 10005 50,000. NATIONAL MUSEUM OF WOMEN IN THE ARTS N/A PC GENERAL SUPPORT 1250 NEW YORK AVENUE NW WASHINGTON, DC 22116-9640 300. NATIONAL NETWORK OF ABORTION FUNDS N/A PC GENERAL SUPPORT P.O. BOX 22457 PHILADELPHIA, PA 19110 478. NATURAL HISTORY MUSEUM OF THE N/A PC GENERAL SUPPORT ADTRONDACKS 45 MUSEUM DRIVE TUPPER LAKE, NY 12986 7,500. NATURAL RESOURCES DEFENSE COUNCIL N/A PC FRANCES BEINECKE FUND 40 WEST 20TH STREET NEW YORK, NY 10011 50,000.

Total from continuation sheets

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
NEO PHILANTHROPY 1001 AVENUE OF THE AMERICAS 12TH FLOOR NEW YORK, NY 10018	or šubstantial contributor	PC	GENERAL SUPPORT FOR MEMBERSHIP IN THE PEACE AND SECURITY FUNDERS GROUP	5,000.
NEW YORK CITY BALLET 20 LINCOLN CENTER NEW YORK, NY 10023	N/A	PC	GENERAL SUPPORT	10,000.
NEW YORK PHILHARMONIC 10 LINCOLN CENTER PLAZA NEW YORK, NY 10023-6973	N/A	PC	GENERAL SUPPORT	30,000.
NEW YORK PUBLIC LIBRARY 270 MADISON AVENUE NEW YORK, NY 10016	N/A	PC	GENERAL SUPPORT	80.
NEW YORK PUBLIC LIBRARY 476 5TH AVE NEW YORK, NY 10018	N/A	PC	GENERAL SUPPORT	105.
NEW YORK STATE YOUTH LEADERSHIP COUNCIL 217 CENTRE STREET, SUITE 343 NEW YORK, NY 10007	N/A	PC	NEW YORK STATE YOUTH LEADERSHIP COUNCIL	25,000.
NEW YORK STATE YOUTH LEADERSHIP COUNCIL 217 CENTRE STREET, SUITE 343 NEW YORK, NY 10007	N/A	PC	KD WELLNESS FUND	400.
NEW YORK STATE YOUTH LEADERSHIP COUNCIL 217 CENTRE STREET, SUITE 343 NEW YORK, NY 10007	N/A	PC	KD WELLNESS FUND	400.
NEW YORK THEATRE WORKSHOP 83 EAST 4TH STREET NEW YORK, NY 10003	N/A	PC	GENERAL SUPPORT	80.
NEW YORK TIMES NEEDIEST CASES FUND 229 WEST 43RD STREET NEW YORK, NY 10036	N/A	PC	GENERAL SUPPORT	500.
Total from continuation sheets				

NO LIMITS FOR YOUTH 22319 MERRICK BLVD # 296 LAURELTON, NY 11413 NORTH COUNTRY PUBLIC RADIO (NCPR) ST. LAWRENCE UNIVERSITY CANTON, NY 13617 NORTHERN FOREST ATLAS FOUNDATION A16 PARK AVENUE SARANAC LAKE, NY 12983 PC REVERSE THE TREND 1622 ANACAPA STREET SANTA BARBARA, CA 93108 ORBIS INTERNATIONAL PC SENERAL SUPPORT SENERAL SUPPORT PC SENERAL SUPPORT 20,1 ORBIS INTERNATIONAL PC SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT COUNTRY: YEAR 2 7,5 ORBIS INTERNATIONAL PC SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT OUTRIDER FOUNDATION N/A PC SENERAL SUPPORT SENERAL SUPPORT SENERAL SUPPORT COUNTRIDERS JOURNALISM & MEDIA PROGRAM TS,1 PS 39 PARENT ASSOCIATION INC N/A PC SENERAL SUPPORT SENERAL SUPPORT AMDIA PROGRAM 75,1 PS 39 PARENT ASSOCIATION INC N/A PC SENERAL SUPPORT 1,1	Part XIV Supplementary Information	1			
show any relationship to statistic of statis	3 Grants and Contributions Paid During the \	ear (Continuation)	_		
MEW YORK UNIVERSITY STERN CENTER FOR N/A PC THE EQUITABLE COMMUTE SUSTAINABLE BUSINESS 44 WEST 4TH STREET, SUITE 8-190 NEW YORK, NY 10012		show any relationship to	status of	Purpose of grant or contribution	Amount
22919 MERRICK BLVD # 296 LAURELTON, NY 11413 NORTH COUNTRY PUBLIC RADIO (NCPR) ST, LAWRENCE UNIVERSITY CANTON, NY 13617 NORTH COUNTRY PUBLIC RADIO (NCPR) ST, LAWRENCE UNIVERSITY CANTON, NY 13617 NORTHERN FOREST ATLAS FOUNDATION 162 ANACAPA STREET SANTA CLAKE, NY 12983 NUCLEAR AGE PEACE FOUNDATION 1622 ANACAPA STREET SANTA BARBARA, CA 93108 PC SENERAL SUPPORT 1620 STH AVE 12TH FLR NEW YORK, NY 10018 N/A PC SENERAL SUPPORT SENERAL SUPPORT CUTRIDER FOUNDATION N/A PC SENERAL SUPPORT SENERAL SUPPORT CUTRIDER FOUNDATION N/A PC SENERAL SUPPORT SENERAL SUPPORT CUTRIDER FOUNDATION N/A PC SENERAL SUPPORT	NEW YORK UNIVERSITY STERN CENTER FOR SUSTAINABLE BUSINESS 44 WEST 4TH STREET, SUITE 8-190		·		10,000.
ST. LAWRENCE UNIVERSITY CANTON, NY 13617 RADIO COVERAGE OF FOVERRY IN THE NORTH COUNTRY: YEAR 2 7, 5 NORTHERN FOREST ATLAS FOUNDATION N/A 416 PARK AVENUE SARANAC LARE, NY 12983 N/A PC REVERSE THE TREND SENERAL SUPPORT OUTRIDERS JOURNALISM 6 SANTA CRUZ, CA 95061 CUTRIDER FOUNDATION N/A PC DUTRIDERS JOURNALISM 6 MEDIA PROGRAM ASA E WASHINGTON AVE STE 333 MADISON, WI 53703 P S 39 PARENT ASSOCIATION INC A17 6TH AVENUE BROOKLYN, NY 11215 1,0 FAGE 73 N/A PC SENERAL SUPPORT	22919 MERRICK BLVD # 296	N/A	PC	GENERAL SUPPORT	300.
### 16 PARK AVENUE SARANAC LAKE, NY 12983 22,5	ST. LAWRENCE UNIVERSITY	N/A	PC	RADIO COVERAGE OF POVERTY IN THE NORTH	7,500.
1622 ANACAPA STREET SANTA BARBARA, CA 93108 ORBIS INTERNATIONAL 520 8TH AVE 12TH FLR NEW YORK, NY 10018 ORGANIC FARMING RESEARCH FOUNDATION PO BOX 440 SANTA CRUZ, CA 95061 OUTRIDER FOUNDATION N/A 834 E WASHINGTON AVE STE 333 MADISON, WI 53703 P S 39 PARENT ASSOCIATION INC 417 6TH AVENUE BROOKLYN, NY 11215 N/A PC GENERAL SUPPORT OUTRIDERS JOURNALISM & MEDIA PROGRAM 75,0 F S 39 PARENT ASSOCIATION INC 417 6TH AVENUE BROOKLYN, NY 11215 1,0	416 PARK AVENUE	N/A	PC	GENERAL SUPPORT	22,500.
S20 8TH AVE 12TH FLR NEW YORK, NY 10018 ORGANIC FARMING RESEARCH FOUNDATION N/A PC GENERAL SUPPORT OUTRIDER FOUNDATION N/A 834 E WASHINGTON AVE STE 333 MADISON, WI 53703 P S 39 PARENT ASSOCIATION INC 417 6TH AVENUE BROOKLYN, NY 11215 ANA PC GENERAL SUPPORT	1622 ANACAPA STREET	N/A	PC	REVERSE THE TREND	20,000.
PO BOX 440 SANTA CRUZ, CA 95061 OUTRIDER FOUNDATION N/A PC OUTRIDERS JOURNALISM & MEDIA PROGRAM 75,0 P S 39 PARENT ASSOCIATION INC 417 6TH AVENUE BROOKLYN, NY 11215 PAGE 73 N/A PC GENERAL SUPPORT	520 8TH AVE 12TH FLR	N/A	PC	GENERAL SUPPORT	320.
MADISON, WI 53703 P S 39 PARENT ASSOCIATION INC 417 6TH AVENUE BROOKLYN, NY 11215 PAGE 73 MEDIA PROGRAM 75,0 GENERAL SUPPORT 1,0	PO BOX 440	N/A	PC	GENERAL SUPPORT	200.
417 6TH AVENUE BROOKLYN, NY 11215 1,0 PAGE 73 N/A PC GENERAL SUPPORT	834 E WASHINGTON AVE STE 333	N/A	PC		75,000.
	417 6TH AVENUE	N/A	PC	GENERAL SUPPORT	1,036.
	80 HANSON PLACE, 3RD FLOOR	N/A	PC	GENERAL SUPPORT	21,500.

13-6075567 Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient PAGE 73 N/A PC GENERAL SUPPORT 80 HANSON PLACE, 3RD FLOOR BROOKLYN, NY 11217 414. PAGE SEVENTY-THREE PRODUCTIONS INC. N/A PC GENERAL SUPPORT 138 S. OXFORD ST.NO. 5C BROOKLYN, NY 11217 3,400. PAN-MASS CHALLENGE PC GENERAL SUPPORT N/A 77 4TH AVE NEEDHAM, MA 02494 1,000. PAN-MASS CHALLENGE N/A PC GENERAL SUPPORT 77 4TH AVE NEEDHAM, MA 02494 2,000. PARTNERS IN HEALTH N/A PC GENERAL SUPPORT 888 COMMONWEALTH AVENUE, 3RD FLOOR BOSTON, MA 02215 400. PAWS CROSSED ANIMAL RESCUE N/A PC GENERAL SUPPORT P.O. BOX 970 ELMSFORD, NY 10523 200. PAWS CROSSED ANIMAL RESCUE N/A PC GENERAL SUPPORT P.O. BOX 970 ELMSFORD, NY 10523 1,000. PAWS CROSSED ANIMAL RESCUE N/A PC GENERAL SUPPORT P.O. BOX 970 4,000. ELMSFORD, NY 10523 PBA OF NORTH CASTLE N/A PC GENERAL SUPPORT PO BOX 659 ARMONK, NY 10504 200.

PC

N/A

Total from continuation sheets

PHILLIPS ACADEMY ANDOVER

ANDOVER, MA 01810-4161

180 MAIN STREET

GENERAL SUPPORT

2,000.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor PHILLIPS ACADEMY ANDOVER N/A PC GENERAL SUPPORT 180 MAIN STREET ANDOVER MA 01810-4161 4,000. PLANNED PARENTHOOD OF METROPOLITAN NJ N/A PC GENERAL SUPPORT 238 MULBERRY STREET NEWARK, NJ 07102 413. PLAYERS PHILANTHROPY FUND PC BREATHE CIRCLES KD N/A 1122 KENILWORTH DRIVE #201 WELLNESS FUND TOWSON, MD 21204 440. PLAYERS PHILANTHROPY FUND N/A PC BREATHE CIRCLES 1122 KENILWORTH DRIVE #201 TOWSON, MD 21204 25,000. PLAYERS PHILANTHROPY FUND N/A PC BREATHE CIRCLES KD 1122 KENILWORTH DRIVE #201 WELLNESS FUND TOWSON, MD 21204 400. PLOUGHSHARES FUND, INC. N/A PC EQUITY RISES 315 BAY STREET SUITE 400 SAN FRANCISCO, CA 94133 20,000. PREGNANCY JUSTICE N/A PC GENERAL SUPPORT 575 8TH AVENUE NEW YORK, NY 10018 50,000. GENERAL SUPPORT PRESERVATION SOCIETY OF NEWPORT N/A PC COUNTY 424 BELLEVUE AVENUE NEWPORT, RI 02840 6,700. PROJECT SOUTH N/A PC SISTA FIRE 9 GAMMON ST SE ATLANTA, GA 30315 25,000. PROJECT SOUTH N/A PC SISTA FIRE KD WELLNESS 9 GAMMON ST SE FUND ATLANTA, GA 30315 440.

Total from continuation sheets

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient PROJECT SOUTH N/A PC SISTA FIRE KD WELLNESS 9 GAMMON ST SE FUND ATLANTA, GA 30315 440. PROJECT SOUTH N/A PC SISTA FIRE GRANTS FOR 9 GAMMON ST SE GROWTH ATLANTA, GA 30315 35,000. PROSPECT PARK ALLIANCE PC LANDSCAPE MANAGEMENT N/A 95 PROSPECT PARK WEST BROOKLYN, NY 11215 10,000. PROSPECT PARK ALLIANCE N/A PC GENERAL SUPPORT 95 PROSPECT PARK WEST BROOKLYN, NY 11215 2,064. PROTECT THE ADIRONDACKS! N/A PC GENERAL SUPPORT PO BOX 48 NORTH CREEK, NY 12853 7,500. PROTECT THE ADIRONDACKS! N/A PC GENERAL SUPPORT PO BOX 48 NORTH CREEK, NY 12853 1,000. PROVIDENCE YOUTH STUDENT MOVEMENT N/A PC PROVIDENCE YOUTH PO BOX 6487 STUDENT MOVEMENT PROVIDENCE, RI 02940 25,000. PROVIDENCE YOUTH STUDENT MOVEMENT N/A PC KD WELLNESS FUND PO BOX 6487 PROVIDENCE, RI 02940 400. PS21 N/A PC GENERAL SUPPORT 2980 ROUTE 66, P.O. BOX 321 CHATHAM, NY 12037 3,400. PTO OF THE ACADEMY OF TALENTED N/A PC GENERAL SUPPORT SCHOLARS 50 AVENUE P BROOKLYN, NY 11204 1,000.

Total from continuation sheets

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		_
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
RECESS ACTIVITIES, INC.	N/A	PC	GENERAL SUPPORT	
46 WASHINGTON AVENUE				
BROOKLYN, NY 11205				15,000.
RHODE ISLAND COMMUNITY FOOD BANK	N/A	PC	GENERAL SUPPORT	
ASSOCIATION	11/11		SHAHAH BOLLOKI	
P.O. BOX 817				
PROVIDENCE, RI 02901-0817				2,000.
RHODE ISLAND FOR COMMUNITY AND JUSTICE	N/A	PC	GENERAL SUPPORT	
271 NORTH MAIN STREET				
PROVIDENCE, RI 02903				1,000.
DIVERDAL E NAMEDE DESCRIVANCE	7.73	D.G.	GENERAL GURRORE	
RIVERDALE NATURE PRESERVANCY 5521 MOSHOLU AVENUE	N/A	PC	GENERAL SUPPORT	
BRONX, NY 10471				1,000.
,				,
RIVERDALE NEIGHBORHOOD HOUSE 5521 MOSHOLU AVENUE	N/A	PC	GENERAL SUPPORT	
BRONX, NY 10471-2409				450.
				- _
RIVERDALE PRESBYTERIAN CHURCH	N/A	PC	GENERAL SUPPORT	
4765 HENRY HUDSON PARKWAY WEST BRONX, NY 10471				5,000.
Diolin, NI 10171				3,000.
RIVERDALE PRESBYTERIAN CHURCH	N/A	PC	GENERAL SUPPORT	
4765 HENRY HUDSON PARKWAY WEST BRONX, NY 10471				2 012
DRONA, NI 104/1				2,012.
ROBIN HOOD FOUNDATION	N/A	PC	GENERAL SUPPORT	
826 BROADWAYØ9TH FLOOR				
NEW YORK, NY 10003				500.
RUBIN MUSEUM OF ART	N/A	PC	DEATH IS NOT THE END &	
140 WEST 17TH STREET			AWAKEN PODCAST SEASON	
NEW YORK, NY 10011			3	25,000.
RUBIN MUSEUM OF ART	N/A	PC	GENERAL SUPPORT	
140 WEST 17TH STREET				
NEW YORK, NY 10011				10,000.
Total from continuation sheets				

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor SANCTUARY FOR FAMILIES N/A PC GENERAL SUPPORT PO BOX 1406 WALL STREET STATION NEW YORK, NY 10268 10,000. SAVE THE BAY, INC. N/A PC SAVE THE BAY HAMILTON 100 SAVE THE BAY DRIVE FAMILY NEWPORT PROVIDENCE, RI 02905-4207 AQUARIUM 25,000. PC GENERAL SUPPORT SAVE THE BAY, INC. N/A 100 SAVE THE BAY DRIVE PROVIDENCE, RI 02905-4207 2,000. SCHOMBURG CENTER N/A PC GENERAL SUPPORT 515 LENOX AVENUE 126. NEW YORK, NY 10037 SHRINERS HOSPITALS FOR CHILDREN N/A PC GENERAL SUPPORT 2900 ROCKY POINT DRIVE TAMPA, FL 33607 312. SIPSON ISLAND TRUST N/A PC SIPSON ISLAND 33 COUNTRY LANE REWILDING PROGRAM BREWSTER, MA 02631 25,000. SKOWHEGAN SCHOOL OF PAINTING AND N/A PC GENERAL SUPPORT SCULPTURE 136 WEST 22ND STREET NEW YORK, NY 10011 2,000. SOCIAL GOOD FUND N/A PC SAFE RETURN PROJECT KD 12651 SAN PABLO AVE WELLNESS FUND GRANT RICHMOND, CA 94805 220. SOCIAL GOOD FUND N/A PC SAFE RETURN PROJECT 12651 SAN PABLO AVE RICHMOND, CA 94805 25,000. SOCIAL GOOD FUND N/A PC SAFE RETURN PROJECT KD 12651 SAN PABLO AVE WELLNESS FUND GRANT RICHMOND, CA 94805 440. Total from continuation sheets

Part XIV Supplementary Information

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
SPCA OF WESTCHESTER, INC	N/A	PC	GENERAL SUPPORT	
590 NORTH STATE ROAD				
BRIARCLIFF MANOR, NY 10510				400.
SPECIAL CHILDRENS CHARITIES/SPECIAL	N/A	PC	GENERAL SUPPORT	
OLYMPICS CHICAGO	1,,,,			
2 EAST 8TH STREET SUITE 2M				
CHICAGO, IL 60605				210.
SPECIAL OLYMPICS	N/A	PC	GENERAL SUPPORT	
1133 19TH STREET NW	N/A	PC	GENERAL SUPPORT	
WASHINGTON, DC 20036-3604				100.
,				
SPRING ISLAND TRUST	N/A	PC	GENERAL SUPPORT	
174 CALLAWASSIE DRIVE				2 222
OKATIE, SC 29909	+			3,298.
ST. ANN CHURCH	N/A	PC	GENERAL SUPPORT	
312 EAST 110TH STREET				
NEW YORK, NY 10029				3,200.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	N/A	PC	GENERAL SUPPORT	
501 ST. JUDE PLACE				
MEMPHIS, TN 38105-1942				100.
		7.0	amin min a arrai i n arra	
SUNY ALBANY FOUNDATION PO BOX 761	N/A	PC	STUDENT SCHOLARSHIP FUND	
ALBANY, NY 12201			FOND	500.
TALLER SALUD, INC.	N/A	PC	HURRICANE FIONA	
PO BOX 524				400
LOIZA, PUERTO RICO 00772				400.
TARRYTOWN MUSIC HALL	N/A	PC	GENERAL SUPPORT	
13 MAIN STREET, PO BOX 686				
TARRYTOWN, NY 10591				150.
THE ADIRONDACK COUNCIL	N/A	PC	GENERAL SUPPORT	
P.O. BOX D-2				
ELIZABETHTOWN, NY 12932				7,500.
Total from continuation sheets				

13-6075567 PROSPECT HILL FOUNDATION INC. Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor THE ADIRONDACK HISTORICAL ASSOCIATION PC GENERAL SUPPORT P.O. BOX 99 BLUE MOUNTAIN LAKE, NY 12812-0099 7,500. THE ALEX HOUSE PROJECT N/A PC THE ALEX HOUSE PROJECT 76 LORRAINE STREET BROOKLYN, NY 11231 25,000. THE AMERICAN HEART ASSOCIATION PC GENERAL SUPPORT N/A 7272 GREENVILLE AVENUE DALLAS, TX 75231 210. THE ANDREW GOODMAN FOUNDATION N/A PC GENERAL SUPPORT 55 EXCHANGE PLACE, SUITE 402 NEW YORK, NY 10050 5,000. THE BARNES FOUNDATION N/A PC GENERAL SUPPORT 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 162. THE BOWERY MISSION N/A PC GENERAL SUPPORT 132 MADISON AVENUE NEW YORK, NY 10016 1,000. THE BUSHWICK STARR N/A PC GENERAL SUPPORT 419 ELDERT STREET BROOKLYN, NY 11237 10,000. THE CENTER FOR FOOD SAFETY N/A PC GENERAL SUPPORT 660 PENNSYLVANIA AVENUE, S.E., SUITE 302 WASHINGTON, DC 20003 200. THE COLORADO COLLEGE N/A PC GENERAL SUPPORT 14 EAST CACHE LA POUDRE STREET COLORADO SPRINGS, CO 80903-3298 6,800.

PC

N/A

THE ECONOMIC PROGRESS INSTITUTE

Total from continuation sheets

PROVIDENCE, RI 02908

600 MOUNT PLEASANT AVENUE BLDG. #9

GENERAL SUPPORT

2,000.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor THE ETHEL WALKER SCHOOL N/A PC GENERAL SUPPORT 230 BUSHY HILL ROAD SIMSBURY, CT 06070-0067 1,000. THE IRVINGTON FIRE COMPANY N/A PC GENERAL SUPPORT 90 MAIN STREET IRVINGTON, NY 10533 50. THE KEEWAYDIN FOUNDATION PC THE SPERRY FUND N/A 500 RUSTIC LANE ENDOWED SCHOLARSHIP SALISBURY, VT 05769 50,000. THE LGBT CENTER N/A PC GENERAL SUPPORT 208 WEST 13TH STREET 150. NEW YORK, NY 10011 THE MEDICI ARCHIVE PROJECT N/A PC GENERAL SUPPORT 175 W. MAIN STREET SUITE 2 BABYLON, NY 11702 2,400. THE METROPOLITAN MUSEUM OF ART N/A PC DISCRETIONARY SUPPORT 1000 FIFTH AVENUE FOR DEPARTMENTS OF NEW YORK, NY 10028-0198 GREEK & ROMAN ART AND EUROPEAN SCULPTURE & DECORATIVE ARTS 25,000. THE NATURE CONSERVANCY N/A PC INDIGENOUS PARTNERSHIP PO BOX 65 PROGRAM KEENE VALLEY, NY 12943 20,000. THE NEW YORK WOMEN'S FOUNDATION N/A PC GENERAL SUPPORT 39 BROADWAY, 23RD FLOOR NEW YORK, NY 10006 20,000. THE NEW YORK WOMEN'S FOUNDATION N/A PC GENERAL SUPPORT 39 BROADWAY, 23RD FLOOR NEW YORK, NY 10006 1,000. THE PINGRY SCHOOL N/A PC GENERAL SUPPORT 131 MARTINSVILLE ROAD BASKING RIDGE, NJ 07920 1,000. Total from continuation sheets

13-6075567 PROSPECT HILL FOUNDATION INC. Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor THE PUBLIC'S RADIO N/A PC GENERAL SUPPORT 1 UNION STATION PROVIDENCE, RI 02903 500. THE RONALD MCDONALD HOUSE OF NEW YORK N/A PC GENERAL SUPPORT 405 EAST 73RD STREET NEW YORK, NY 10021 100. THE STERLING AND FRANCINE CLARK ART GENERAL SUPPORT N/A PC INSTITUTE 225 SOUTH STREET WILLIAMSTOWN, MA 01267 10,000. THE UNIVERSITY OF RHODE ISLAND N/A PC LEESON LECTURE FOUNDATION 79 UPPER COLLEGE ROAD SOUTH KINGSTOWN, RI 02881 4,000. THE WOMEN'S FUND OF RHODE ISLAND N/A PC GENERAL SUPPORT 245 WATERMAN ST #503 PROVIDENCE, RI 02906 10,000. THIRD STREET MUSIC SCHOOL SETTLEMENT N/A PC CAPITAL IMPROVEMENT 235 EAST 11TH STREET LAN SUPPORT NEW YORK, NY 10003 25,000. THIRD STREET MUSIC SCHOOL SETTLEMENT N/A PC GENERAL SUPPORT 235 EAST 11TH STREET NEW YORK, NY 10003 15,000. THIRD STREET MUSIC SCHOOL SETTLEMENT N/A PC GENERAL SUPPORT 235 EAST 11TH STREET NEW YORK, NY 10003 800. THIRD STREET MUSIC SCHOOL SETTLEMENT N/A PC GENERAL SUPPORT

THIRTEEN

PO BOX 1313

NEW YORK, NY 10101

N/A

PC

Total from continuation sheets

235 EAST 11TH STREET NEW YORK, NY 10003

GENERAL SUPPORT

1,100.

200.

Part XIV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
TOTAL EQUITY NOW	N/A	PC	GENERAL SUPPORT	
1833 7TH AVENUE				70.
NEW YORK, NY 10026				70.
TRANSPORTATION ALTERNATIVES	N/A	PC	GENERAL SUPPORT	
127 WEST 26TH STREET, SUITE 1002	11, 11			
NEW YORK, NY 10001				1,033.
TRINITY SCHOOL	N/A	PC	GENERAL SUPPORT	
139 WEST 91ST ST				
NEW YORK, NY 10024				2,000.
TUNDI INCORPORATED	N/A	PC	GENERAL SUPPORT	
71 GREEN ST				1 600
BRATTLEBORO, VT 05301				1,600.
UNION OF CONCERNED SCIENTISTS	N/A	PC	MOVING TOWARDS TRUE	
2 BRATTLE SQUARE	N/A	FC	HUMAN SECURITY IN US	
CAMBRIDGE, MA 02238			SECURITY POLICY	30,000.
UNION SETTLEMENT	N/A	PC	GENERAL SUPPORT	
237 EAST 104TH STREET				
NEW YORK, NY 10029				103.
UNITE FOR REPRODUCTIVE & GENDER	N/A	PC	GENERAL SUPPORT	
EQUITY (URGE)				
1012 14TH STREET NW, SUITE 305				100 000
WASHINGTON, DC 20005				100,000.
UNITE FOR REPRODUCTIVE & GENDER	N/A	PC	GENERAL SUPPORT	
EQUITY (URGE) 1012 14TH STREET NW, SUITE 305				
WASHINGTON, DC 20005				50,000.
				·
UNIVERSITY OF WISCONSIN FOUNDATION	N/A	PC	ACG ISLAMIC GARDEN	
1848 UNIVERSITY AVE			FUND	
MADISON, WI 53726-4090				100.
UNTERMYER GARDENS CONSERVANCY	N/A	PC	GENERAL SUPPORT	
945 N. BROADWAY YONKERS, NY 10701				800.
Total from continuation sheets				

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient UNTERMYER GARDENS CONSERVANCY N/A PC GENERAL SUPPORT 945 N. BROADWAY YONKERS, NY 10701 1,000. VAN CORTLANDT PARK ALLIANCE N/A PC GENERAL SUPPORT 80 VAN CORTLANDT PARK SOUTH STE. E1 BRONX, NY 10463 500. VOICES OF ASCENSION PC CAPITAL FUNDING N/A 12 W 11TH ST NEW YORK, NY 10011 25,000. VOICES OF ASCENSION N/A PC HR INFRASTRUCTURE 12 W 11TH ST SUPPORT NEW YORK, NY 10011 25,000. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 15,000. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 206. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 300. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 516. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 1,000. VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 2,000. Total from continuation sheets

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient VOICES OF ASCENSION N/A PC GENERAL SUPPORT 12 W 11TH ST NEW YORK, NY 10011 4,294. WATERFRONT ALLIANCE N/A PC GENERAL SUPPORT 256 W 36TH STREET, 11TH FLOOR NEW YORK, NY 10018 15,000. WAVE HILL, INC. PC FAMILY ART PROJECT N/A 675 WEST 252ND STREET BRONX, NY 10471-2899 10,000. WAVE HILL, INC. N/A PC THE CAMPAIGN FOR WAVE 675 WEST 252ND STREET $_{
m HILL}$ BRONX, NY 10471-2899 25,000. WAVE HILL, INC. N/A PC GENERAL SUPPORT 675 WEST 252ND STREET 1,162. BRONX, NY 10471-2899 WBGO N/A PC GENERAL SUPPORT 54 WAYNE SHORTER WAY NEWARK, NJ 07102 400. WILDLIFE CONSERVATION SOCIETY N/A PC GENERAL SUPPORT 2300 SOUTHERN BOULEVARD BRONX, NY 10460 850. WNYC RADIO N/A PC GENERAL SUPPORT 160 VARICK STREET NEW YORK, NY 10013 50. WNYC RADIO N/A PC GENERAL SUPPORT 160 VARICK STREET NEW YORK, NY 10013 70. WNYC RADIO N/A PC GENERAL SUPPORT 160 VARICK STREET NEW YORK, NY 10013 200. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient WNYC RADIO N/A PC GENERAL SUPPORT 160 VARICK STREET NEW YORK, NY 10013 540. WOMEN IN NEED N/A PC GENERAL SUPPORT 323 WEST 39TH STREET NEW YORK, NY 10018 105. WORLD RESOURCES INSTITUTE PC WRI DEVELOPMENT N/A 10 G STREET, NE EXPANSION FOR CAMPAIGN WASHINGTON, DC 20002 PREPARATION 2023 30,000. WORLD RESOURCES INSTITUTE N/A PC GENERAL SUPPORT 10 G STREET, NE WASHINGTON, DC 20002 20,000. YALE UNIVERSITY N/A PC GENERAL SUPPORT YALE UNIVERSITY NEW HAVEN, CT 06520 1,000. YALE UNIVERSITY N/A PC GENERAL SUPPORT YALE UNIVERSITY NEW HAVEN, CT 06520 1,000. YALE UNIVERSITY N/A PC GENERAL SUPPORT YALE UNIVERSITY NEW HAVEN, CT 06520 4,000. YORKVILLE COMMON PANTRY N/A PC GENERAL SUPPORT 8 EAST 109TH STREET NEW YORK, NY 10029 120. YOUNG VOICES N/A PC KD WELLNESS FUND 204 WESTMINSTER STREET PROVIDENCE, RI 02903 400. YOUNG VOICES N/A PC YOUNG VOICES 204 WESTMINSTER STREET PROVIDENCE, RI 02903 25,000. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient YOUNG VOICES N/A PC KD WELLNESS FUND 204 WESTMINSTER STREET PROVIDENCE, RI 02903 400. Total from continuation sheets

Part XIV Supplementary Information

3 Grants and Contributions Approved for Futu		T		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
(3. 223	or substantial contributor	recipient		
GLOBAL GREENGRANTS FUND	N/A	PC	CAPITAL	
840 WILDERNESS PLACE, SUITE A			GRANT/ORGANIZATIONAL	
BOULDER, CO 80301			STRENGTHENING	50,000
NDEPENDENT ARTS & MEDIA	N/A	PC	GENERAL SUPPORT	
P.O. BOX 880492				
SAN FRANCISCO, CA 94188				25,000
JUSTICE FOR FAMILIES	N/A	PC	GENERAL SUPPORT	
2090 HONEYWELL AVENUE				
BRONX, NY 10460				25,000
LINEAGE PROJECT	N/A	PC	GENERAL SUPPORT	
228 PARK AVENUE SOUTH	,,			
NEW YORK, NY 10003				25,000
IARY MITCHELL FAMILY AND YOUTH CENTER	N/A	PC	THE BLACK FEMINIST	
2007 MAPES AVE	N/A	FC	PROJECT	
BRONX, NY 10457			1.00201	25,000
,				,
THE KEEWAYDIN FOUNDATION	N/A	PC	SCHOLARSHIP SUPPORT	
500 RUSTIC LANE SALISBURY, VT 05769				50,000
SALISBORI, VI 03703				30,000
THE KEEWAYDIN FOUNDATION	N/A	PC	SCHOLARSHIP SUPPORT	
500 RUSTIC LANE SALISBURY, VT 05769				50,000
M2556K1, V1 03705				30,000
CHIRD STREET MUSIC SCHOOL SETTLEMENT	N/A	PC	CAPITAL IMPROVEMENT	
235 EAST 11TH STREET			PLAN SUPPORT	25 000
NEW YORK, NY 10003				25,000
THIRD STREET MUSIC SCHOOL SETTLEMENT	N/A	PC	CAPITAL IMPROVEMENT	
235 EAST 11TH STREET			PLAN SUPPORT	0.5
NEW YORK, NY 10003				25,000
OICES OF ASCENSION	N/A	PC	CAPITAL FUNDING	
L2 W 11TH ST				05 000
NEW YORK, NY 10011			1	25,000

Part XIV Supplementary Information **Grants and Contributions Approved for Future Payment (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient VOICES OF ASCENSION N/A PC CAPITAL FUNDING 12 W 11TH ST NEW YORK, NY 10011 25,000. WAVE HILL, INC. N/A PC THE CAMPAIGN FOR WAVE 675 WEST 252ND STREET HILL BRONX, NY 10471-2899 25,000. WAVE HILL, INC. PC THE CAMPAIGN FOR WAVE N/A 675 WEST 252ND STREET HILL BRONX, NY 10471-2899 25,000. YOUNG VOICES N/A PC YOUNG VOICES 204 WESTMINSTER ST PROVIDENCE, RI 02903 25,000. Total from continuation sheets

Schedule B

(Form 990)

Schedule of Contributors Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PROSPECT HILL FOUNDATION INC. 13-6075567							
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I	Rule. See instructions.					
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total by one contributor. Complete Parts I and II. See instructions for determining a contribut						
Special Rules							
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, ag the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on Z, line 1. Complete Parts I and II.	and that received from any one					
contributor, durin literary, or educat	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the year, total contributions of more than \$1,000 exclusively for religious, charitable, tional purposes, or for the prevention of cruelty to children or animals. Complete Parts (b) instead of the contributor name and address), II, and III.	scientific,					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$							
answer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B to 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-Ing requirements of Schedule B (Form 990).						

Schedule B (Form 990) (2022)

Name of organization Employer identification number

PROSPECT HILL FOUNDATION INC.

13-6075567

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TSNE - THE CARROT PROJECT 89 SOUTH STREET, 7TH FL. BOSTON, MA 02111	\$9,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	1962 COMINGLED TRUSTS JOHN B BEINECKE AS TRUSTEE 99 PARK AVENUE, #2200 NEW YORK, NY 10016-1601	\$ 229,405.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions.)

Name of organization Employer identification number

PROSPECT HILL FOUNDATION INC.

13-6075567

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
223/153 11-15			Schedule B (Form 990) (2022)

Page 4

Schedule B (Form 990) (2022) Name of organization **Employer identification number** PROSPECT HILL FOUNDATION INC. 13-6075567 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

223454 11-15-22

Schedule B (Form 990) (2022)

Department of the Treasury

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123 **2022**

Internal Revenue Service

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

Employer identification number

13-6075567 PROSPECT HILL FOUNDATION INC. Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the

estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

Part I Required Annual Payment		, , , , , , , , , , , , , , , , , , , ,					
1 Total tax (see instructions)						1	19,826.
2 a Personal holding company tax (Schedule PH (Form 1120), lin	o 26) i	included on line 1	2a	ı			
b Look-back interest included on line 1 under section 460(b)(2)			Za				
contracts or section 167(g) for depreciation under the income		, -	2b				
contracts of social for (g) for approbation and the moone	10100	uot motnou	······				
c Credit for federal tax paid on fuels (see instructions)			2c				
d Total. Add lines 2a through 2c						2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do							
does not owe the penalty						3	19,826.
4 Enter the tax shown on the corporation's 2021 income tax ret							
or the tax year was for less than 12 months, skip this line and	enter	the amount from line 3 o	n line 5			4	82,935.
5 Required annual payment. Enter the smaller of line 3 or line	4. If t	he corporation is required	d to skip line 4,				
enter the amount from line 3						5	19,826.
Part II Reasons for Filing - Check the boxes belo	w tha	t apply. If any boxes are c	hecked, the corp	oration	must file Form 22	20	
even if it does not owe a penalty. See instructions.							
The corporation is using the adjusted seasonal installi							
7 X The corporation is using the annualized income install							
8 X The corporation is a "large corporation" figuring its fire Part III Figuring the Underpayment	st requ	<u>uired installment based or</u>	the prior year's	tax.			
Fait III Figuring the Onderpayment		(-)	(1.)		(-)	Т	/ 45
O lostellosest due dates. Foster in columno (a), there in (d) the	\vdash	(a)	(b)		(c)		(d)
9 Installment due dates. Enter in columns (a) through (d) the							
15th day of the 4th (Form 990-PF filers: Use 5th month),	9	11/15/22	12/15/	22	03/15/	23	06/15/23
6th, 9th, and 12th months of the corporation's tax year 10 Required installments. If the box on line 6 and/or line 7	9	11/13/22	12/13/		05/15/	2.5	00/13/23
•							
above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions							
for the amounts to enter. If none of these boxes are checked,							
enter 25% (0.25) of line 5 above in each column	10	4,957.	4 9	56.	4,9	57.	4,956.
11 Estimated tax paid or credited for each period. For		1/33/1		30.	1,5	-	1,3301
column (a) only, enter the amount from line 11 on line 15.							
See instructions	11	41,962.	15,0	00.	30,0	00.	
Complete lines 12 through 18 of one column		,		-			
before going to the next column.							
12 Enter amount, if any, from line 18 of the preceding column	12		37,0	05.	47,0	49.	72,092.
13 Add lines 11 and 12	13		52,0		77,0		72,092.
14 Add amounts on lines 16 and 17 of the preceding column	14						
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	41,962.	52,0	05.	77,0	49.	72,092.
16 If the amount on line 15 is zero, subtract line 13 from line			<u> </u>				
14. Otherwise, enter -0-	16			0.		0.	
17 Underpayment. If line 15 is less than or equal to line 10,							
subtract line 15 from line 10. Then go to line 12 of the next							
column. Otherwise, go to line 18	17						
18 Overpayment. If line 10 is less than line 15, subtract line 10							
from line 15. Then go to line 12 of the next column	18	37,005.	47,0	49.	72,0	92.	

For Paperwork Reduction Act Notice, see separate instructions.

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

Form 2220 (2022)

Form 2220 (2022)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
9	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
0	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
1	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21				
2	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$	\$
3	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23				
4	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$	\$
5	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25		_		
6	Underpayment on line 17 x Number of days on line 25 x 6% (0.06)	26	\$	\$	\$	\$
7	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27				
8	Underpayment on line 17 x Number of days on line 27 x 7% (0.07)	28	\$	\$	\$	\$
9	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29				
0	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
1	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31				
2	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
3	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33				
4	Underpayment on line 17 x Number of days on line 33 x *% 365	34	\$	\$	\$	\$
5	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35				
6	Underpayment on line 17 x Number of days on line 35 x *% 366	36	\$	\$	\$	\$
7	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
8	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal h	ere and on Form 1120, I	ine 34; or the comparal	ole	38 \$

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

Form **2220** (2022)

Form 2220 (2022)

Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

(a) (b) (c) (d) First 3 months First 5 months First 1 months First 1 months First 1 months First 3 months First 4 months First 4 months First 6 months First 9 months Entire year 2 First 4 months First 6 months First 9 months First	See instructions.					
a Tax year beginning in 2020 I a year beginning in 2020 I a rever washer became for each prote to the say year beginning in 2022 Bether through 6 is one of the following periods. Tax year beginning in 2020 I a Tax year beginning in 2021 I b Vide the amount in each column on line 1a by the amount in column (d) on line 3a I b Vide fe the amount in each column on line 1a by the amount in column (d) on line 3b I b Vide fe the amount in each column on line 1b by the amount in column (d) on line 3c I a Divide line 7 by 3.0 I a Divide line 7 by 3.0 I a B Divide line 7 by 3.0 I a B Divide line 7 by 3.0 I a B Divide line 3 by line 9 I a Divide line 4 through 16 I a Divide line 3 by line 9 I a Divide line 4 through 10 I a Divide line 5 by line 9 I a Divide line 6 by columns (a) through (c) on line 3b by the amount in columns (a) through (c) on line 3b by the amount in columns (a) through (c) on line 3b by the amount in columns (a) through (c) on line 3b line 9 I a Divide line 5 by line 9 I a Divide line 5 by line 9 I a Divide line 6 by columns (a) through (c) on line 3b line 9 I a Divide line 8 by line 9 I a Divide line 8 by		l L	(a)	(b)	(c)	(d)
b Tax year beginning in 2020 c Tax year beginning in 2021 2 Einter taxibile income for tesh period to the text year beginning in 2021 3 Enter taxibile income for the following periods. 3 Enter taxibile income for the following periods. 4 Tax year beginning in 2020 3 B Tax year beginni	1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
c Tax year beginning in 2021 2 Enser taxable income for the following periods. 3 Enter taxable income for the following periods. 4 Tax year beginning in 2019 5 Tax year beginning in 2020 6 Tax year beginning in 2021 4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a 5 Divide the amount in each column on line 1a by the amount in column (d) on line 3b 6 Divide the amount in each column on line 1b by the amount in column (d) on line 3c 7 Add lines 4 through 6 7 Add lines 4 through 6 8 Divide line 2 by ine 8 5 Extraordinary lems (see instructions) 6 Add lines 5a and 9b 9 Destraordinary lems (see instructions) 9 Destraordinary lems (see instructions) 11 Divide the amount in column (d) on line 3a by the amount in column (d) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a by the amount in columns (a) through (c) on line 3a 11a 15a 16b 17c 17d 18d 18e 18e 18e 18e 19e 19e 19e 19e	a Tax year beginning in 2019	1a				
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b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c 12 Add lines 11a through 11c 13 Divide line 12 by 3.0 14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions 16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions 18 In Column (d) on line 3c 11c 12	11a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3b c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c 11c 12 Add lines 11a through 11c 13 Divide line 12 by 3.0 14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions 15 16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions 18	by the amount in column (d) on line 3a	11a				
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by the amount in column (d) on line 3c 12 Add lines 11a through 11c 13 Divide line 12 by 3.0 14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions 16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions 18	by the amount in column (d) on line 3b	11b				
12 Add lines 11a through 11c 13 Divide line 12 by 3.0 14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions 16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions 18	c Divide the amount in columns (a) through (c) on line 3c					
13 Divide line 12 by 3.0	by the amount in column (d) on line 3c	11c				
13 Divide line 12 by 3.0	12 Add lines 11a through 11c	12				
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions 15 16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions 18		13				
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16 Enter any other taxes for each payment period. See instr. 17 Add lines 14 through 16	15 Enter any alternative minimum tax (trusts only) for each					
17Add lines 14 through 161718For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions18	payment period. See instructions	15				
17Add lines 14 through 161718For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions18						
17Add lines 14 through 161718For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions18	16 Enter any other taxes for each payment period. See instr.	16				
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions		17				
	on Form 2220, lines 1 and 2c. See instructions	18				
zero or less, enter -0	zero or less, enter -0-	19				

Form **2220** (2022)

Form 2220 (2022) FORM 990-PF Page 4

	, **
Part II	Annualized Income Installment Method

_						
			(a)	(b)	(c)	(d)
			First 2	First 3	First 6	First 9
20	Annualization periods (see instructions)	20	months	months	months	months
	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21	254,034.	366,253.	746,492.	1,097,398.
22	Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
23	Annualized taxable income. Multiply line 21 by line 22	23a	1,524,204.	1,465,012.	1,492,984.	1,463,194.
l	Extraordinary items (see instructions)	23b				
(Add lines 23a and 23b	23c	1,524,204.	1,465,012.	1,492,984.	1,463,194.
24	Figure the tax on the amount on line 23c using the					
	instructions for Form 1120, Schedule J, line 2,					
	or comparable line of corporation's return	24	21,186.	20,364.	20,752.	20,338.
25	Enter any alternative minimum tax (trusts only) for each					
	payment period (see instructions)	25				
26	Enter any other taxes for each payment period. See instr.	26				
			01 106	20 264	20 752	20 220
	Total tax. Add lines 24 through 26	27	21,186.	20,364.	20,752.	20,338.
28	For each period, enter the same type of credits as allowed					
	on Form 2220, lines 1 and 2c. See instructions	28				
29	Total tax after credits. Subtract line 28 from line 27. If		21 106	20 264	20 752	20 220
	zero or less, enter -0-	29	21,186.	20,364.	20,752.	20,338.
00	Anniinable navontana		050/	F00/	750/	1000/
30	Applicable percentage	30	25%	50%	75%	100%
31	Multiply line 29 by line 30	31	5,297.	10,182.	15,564.	20,338.
		01	3,237.	10,102.	13,301.	20,5501
Pa	art III Required Installments					
_	Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
	before completing the next column.		installment	installment	installment	installment
32	If only Part I or Part II is completed, enter the amount in					
	each column from line 19 or line 31. If both parts are					
	completed, enter the smaller of the amounts in each					
	column from line 19 or line 31	32	5,297.	10,182.	15,564.	20,338.
33	Add the amounts in all preceding columns of line 38.					
	See instructions	33		4,957.	9,913.	14,870.
34	Adjusted seasonal or annualized income installments.					
	Subtract line 33 from line 32. If zero or less, enter -0- \dots	34	5,297.	5,225.	5,651.	5,468.
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
	each column. Note: "Large corporations," see the					
	instructions for line 10 for the amounts to enter	35	4,957.	4,956.	4,957.	4,956.
36	Subtract line 38 of the preceding column from line 37 of					
	the preceding column	36				
						_
37		37	4,957.	4,956.	4,957.	4,956.
38	Required installments. Enter the smaller of line 34 or					
	line 37 here and on page 1 of Form 2220, line 10.		,	,	,	,
	See instructions	38	4,957.	4,956.	4,957.	4,956.

Form **2220** (2022)

** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

FORM 990-PF INTERES	ST ON SAVING	S AND TEMPOR	ARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
NORTHERN TRUST COMPA	ANY	26,9	74.	26,974.	
TOTAL TO PART I, LIN	NE 3	26,9	74.	26,974.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECU	JRITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO	
SCHEDULE K-1 - PROSPECT CAPITAL PARTNERS SCHEDULE K-1 -	885,377.	0.	885,377	884,17	0.
VENTURE INVESTMENT ASSOCIATES III, L.P. SCHEDULE K-1 - VENTURE INVESTMENT	630.	0.	630	63	0.
ASSOCIATES IV, L.P. SCHEDULE K-1 -	3,444.	0.	3,444	3,43	6.
VENTURE INVESTMENT ASSOCIATES, L.P.	1,381.	0.	1,381	1,38	1.
TO PART I, LINE 4	890,832.	0.	890,832	889,61	7.

FORM 990-PF	OTHER	INCOME		STATEMENT 3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
SCHEDULE K-1 - PROSPECT CAPIT PARTNERS SCHEDULE K-1 - VENTURE INVESTASSOCIATES, L.P. SCHEDULE K-1 - VENTURE INVESTASSOCIATES IV, L.P. SCHEDULE K-1 - VENTURE INVESTASSOCIATES III, L.P. GRANT REFUNDS TOTAL TO FORM 990-PF, PART I	TMENT TMENT TMENT	524,049. 9,011. -199. -258. 7,108. 539,711.	9,011.	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
AUDIT AND TAX PREPARATION	39,950	• 0	•	39,950.
TO FORM 990-PF, PG 1, LN 16B	39,950	0.		39,950.
FORM 990-PF (OTHER PROFE	SSIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOUNDATION ADMINISTRATIVE SERVICES INVESTMENT CUSTODY FEES	88,700 1,500			30,700.
TO FORM 990-PF, PG 1, LN 16C	90,200	59,500	•	30,700.
=				

FORM 990-PF	TAX	ES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX	60,000.	0.		0.	
SCHEDULE K-1'S - FOREIGN TAXES WITHHELD	46,915.	46,915.		0.	
TO FORM 990-PF, PG 1, LN 18	106,915.	46,915.		0.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DUES AND MEMBERSHIPS FILING FEES INSURANCE OFFICE EXPENSES PHONE AND COMPUTER EXPENSES	1,889. 1,540. 5,724. 10,267. 12,000.	0. 0. 0. 0.		1,889. 1,540. 5,724. 10,267. 12,000.	
TECHNOLOGY, EQUIPMENT AND SERVICES GRANTEE RELATED EXPENSES SCHEDULE K-1'S - OTHER EXPENSES	33,932. 83,103. 665,089.	0. 0. 660,790.		33,932. 83,103.	
TO FORM 990-PF, PG 1, LN 23	813,544.	660,790.		148,455.	

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 8
DESCRIPTION	AMOUNT
UNREALIZED APPRECIATION OF INVESTMENTS	1,697,274.
TOTAL TO FORM 990-PF, PART III, LINE 3	1,697,274.

FORM 990-PF C	OTHER INVESTMENT	S 	STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
PROSPECT CAPITAL PARTNERS VENTURE INVESTMENT ASSOCIATES, I VENTURE INVESTMENT ASSOCIATES IV	72,480,436.	72,480,436. 41,031.	
L.P.	, FMV	350,094.	350,094.
TOTAL TO FORM 990-PF, PART II, I	72,871,561.	72,871,561.	
FORM 990-PF	OTHER ASSETS		STATEMENT 10
FORM 990-PF DESCRIPTION	OTHER ASSETS BEGINNING OF YR BOOK VALUE		STATEMENT 10 FAIR MARKET VALUE
	BEGINNING OF	BOOK VALUE	FAIR MARKET

FORM 990-PF		OF OFFICERS, DIE FOUNDATION MANA		STAT	EMENT 11
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CARRIE S. ELSTON 99 PARK AVENUE, #2 NEW YORK, NY 10016		PRESIDENT & DI	IRECTOR 0.	0.	0.
FREDERICK W. BEINE 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	VICE PRESIDENT 2.00	r & DIRECTOR 0.	0.	0.
JESSE W. SMITH 99 PARK AVENUE, #2 NEW YORK, NY 10016		SECRETARY & DI 2.00	IRECTOR 0.	0.	0.
MAUREEN HOWLEY 99 PARK AVENUE, #2 NEW YORK, NY 10016		TREASURER 10.00	0.	0.	0.
BENJAMIN B. BEINEC 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	DIRECTOR 2.00	0.	0.	0.
ELIZABETH BEINECKE 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	DIRECTOR 2.00	0.	0.	0.
FRANCES G BEINECKE 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	DIRECTOR 2.00	0.	0.	0.
JOHN B. BEINECKE 99 PARK AVENUE, #2 NEW YORK, NY 10016		DIRECTOR 2.00	0.	0.	0.
MARY BEINECKE ELST 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	DIRECTOR 2.00	0.	0.	0.
SARAH BEINECKE RIC 99 PARK AVENUE, #2 NEW YORK, NY 10016	220	DIRECTOR 2.00	0.	0.	0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

0.

0.

0.

GENERAL EXPLANATION

STATEMENT 12

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990PF: PART VI-A LINE 11 - TRANSFERS FROM CONTROLLED ENTITIES

EXPLANATION:

NAME OF CONTROLLED ENTITY: PROSPECT CAPITAL PARTNERS EMPLOYER ID NO: 13-3745680 ADDRESS: 99 PARK AVENUE - SUITE 2220, NEW YORK, NY 10016 DESCRIPTION OF TRANSFER: DISTRIBUTIONS FROM FUND TOTAL AMOUNT OF TRANSFERS FROM CONTROLLED ENTITIES: \$2,603,791

EXCESS BUSINESS HOLDING: [] YES [X] NO

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

JUNE 30, 2023

PREPARED FOR:

PROSPECT HILL FOUNDATION INC. 99 PARK AVENUE 2220 NEW YORK, NY 10016-1601

PREPARED BY:

PKF O'CONNOR DAVIES ADVISORY, LLC 245 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10167

AMOUNT DUE OR REFUND:

OVERPAYMENT OF \$10,460. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

MAKE CHECK PAYABLE TO:

NO AMOUNT IS DUE.

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

WE RECOMMEND ALL MAILINGS TO TAXING AUTHORITIES BE MADE BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. PLEASE RETAIN THE RECEIPT AS PROOF OF TIMELY FILING.

PLEASE REVIEW YOUR RETURN FOR COMPLETENESS AND ACCURACY.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THE COPY INDEFINITELY.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print PROSPECT HILL FOUNDATION INC. 13-6075567 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 99 PARK AVENUE, 2220 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions NEW YORK, NY 10016-1601 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 12 Form 990-T (trust other than above) 06 Form 990-T (corporation) MAUREEN HOWLEY, TREASURER The books are in the care of ▶ 99 PARK AVENUE, #2220 - NEW YORK, NY 10016-1601 Telephone No. ▶ 212 370-1165 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2024 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or $\underline{\hspace{0.5cm}}$, and ending $\underline{\hspace{0.5cm}}$ $\underline{\hspace{0.5cm}}$ JUN $\underline{\hspace{0.5cm}}$ 30 , $\underline{\hspace{0.5cm}}$ 2023 ► X tax year beginning JUL 1, 2022 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 10,460. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 10,460. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

LHA

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

Form 8868 (Rev. 1-2022)

Form	∍990-T		Exempt Organization Business Income Tax Returnation (and proxy tax under section 6033(e))		OMB No. 1545-0047
		For cal	endar year 2022 or other tax year beginning $\ \underline{ extstyle JUL} 1$, $\ 2022$, and ending $\ \underline{ extstyle JUN} 30$, $\ 20$)23 .	2022
Depa Interr	artment of the Treasury nal Revenue Service	l I	Go to www.irs.gov/Form990T for instructions and the latest information. On not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).	Open to Public Inspection for 501(c)(3) Organizations Only
A [Check box if address changed.		Name of organization (Check box if name changed and see instructions.)	DEmp	loyer identification number
B E	Exempt under section	Print	PROSPECT HILL FOUNDATION INC.	1	.3-6075567
	501(c)(3) 408(e) 220(e)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions. 99 PARK AVENUE, 2220	EGrou (see	p exemption number instructions)
	408A 530(a) 529A		City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY $10016-1601$	F	Check box if
		С Во	ok value of all assets at end of year		an amended return.
G	Check organization	type	X 501(c) corporation 501(c) trust 401(a) trust Other trust	State	college/university
H	Check if filing only to)	Claim credit from Form 8941 Claim a refund shown on Form 2439		
	Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation		
J	Enter the number of	attach	ed Schedules A (Form 990-T)		2
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? d identifying number of the parent corporation.		Yes X No
			MAUREEN HOWLEY, TREASURER Telephone number	212	370-1165
Pa	art I Total Unr	elate	d Business Taxable Income		
1	Total of unrelated	busines	ss taxable income computed from all unrelated trades or businesses (see		
			,	1	39,603.
2	,			2	,
3	Add lines 1 and 2			3	39,603.
4			see instructions for limitation rules) STMT 13	4	0.
5			taxable income before net operating losses. Subtract line 4 from line 3	5	39,603.
6			ng loss. See instructions STATEMENT 14	6	39,603.
7		•	ss taxable income before specific deduction and section 199A deduction.		,
	Subtract line 6 from		·	7	
8			rally \$1,000, but see instructions for exceptions)		
9			duction. See instructions		
10	Total deductions				
11			lble income. Subtract line 10 from line 7. If line 10 is greater than line 7,	.	
	enter zero			11	0.
Pa	art II Tax Com	putati	on		•
1	Organizations tax	cable a	s corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2			ates. See instructions for tax computation. Income tax on the amount on		
	Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)	2	
3	Proxy tax. See ins			3	
4	Other tax amounts			4	
5	Alternative minimu				
6			cility income. See instructions		
7			h 6 to line 1 or 2, whichever applies	. 7	0.
LH/			ion Act Notice, see instructions.		Form 990-T (2022)

Part		Tax and Payments			ı age
1a		gn tax credit (corporations attach Form 1118; trusts attach Form 1116)			
b	•	and the (and technical and			
c		ral business credit. Attach Form 3800 (see instructions) 1b 1c			
d		t for prior year minimum tax (attach Form 8801 or 8827)			
e		credits. Add lines 1a through 1d		1e	
2		act line 1e from Part II, line 7		2	0
3			m 8866	_	
_		Other (attach statement)		3	
4	Total	tax. Add lines 2 and 3 (see instructions).			
		on 1294. Enter tax amount here		4	0
5	Curre	nt net 965 tax liability paid from Form 965-A, Part II, column (k)		5	0
6a		nents: A 2021 overpayment credited to 2022	0,460	•	
b	2022	estimated tax payments. Check if section 643(g) election applies 6b			
С	Tax d	eposited with Form 8868 6c			
d	Forei	gn organizations: Tax paid or withheld at source (see instructions) 6d			
е		up withholding (see instructions) 6e			
f		t for small employer health insurance premiums (attach Form 8941) 6f			
g	Other	credits, adjustments, and payments: Form 2439			
		Form 4136 Other Total 6g		-	0 460
7		payments. Add lines 6a through 6g		¬	10,460
8		ated tax penalty (see instructions). Check if Form 2220 is attached		8	
9		lue. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			0,460
10		the amount of line 10 you want: Credited to 2023 estimated tax 10,460.			0,480
11 Part		Statements Regarding Certain Activities and Other Information (see instruction)	Refunded	11	
1		y time during the 2022 calendar year, did the organization have an interest in or a signature or other	•	,	Yes No
•		a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may h	•		103 140
		EN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign			
	here		g o c u ,		х
2		g the tax year, did the organization receive a distribution from, or was it the grantor of, or transfero	r to. a		
		in trust?			Х
		s," see instructions for other forms the organization may have to file.			
3	Enter	the amount of tax-exempt interest received or accrued during the tax year	\$		
4	Enter	available pre-2018 NOL carryovers here \$ 986,436. Do not include any post-20	017 NOL c	arryover	
	show	n on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction repo	rted on Pa	ırt I, line 6.	
5	Post-	2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. D	Oon't reduc	e	
	the a	mounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See	instruction	S.	_
		Business Activity Code Available post-			-
		901101 \$	7,	685,638.	-
		901101 \$		101,383.	
6a		ne organization change its method of accounting? (see instructions)			X
b		s "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128?	If "No,"		
Part		in in Part V Supplemental Information			
		eappromental morning to a superior specific provide any other additional information. See instructions	000		
FIOVICE	tile e	xplanation required by Part IV, line ob. Also, provide any other additional information. See instruction	oris.		
		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the be-	st of my know	ledge and belief, it is tru	ıe,
Sign	CC	prect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	Г	May the IRS discuss th	is return with
Here		TREASURER		the preparer shown bel	
	S	ignature of officer Date Title		instructions)? X Y	'es No
		Print/Type preparer's name Preparer's signature Date Ch	neck	if PTIN	
Paid			elf- employe		
Prepa	arer	JOSEPH L. ALI, CPA JOSEPH L. ALI, CPA 02/28/24		P02093	
Use C		Firm's name PKF O'CONNOR DAVIES ADVISORY, LLC F	irm's EIN	87-323	31666
	-	245 PARK AVENUE, 12TH FLOOR		040 055	
		Firm's address NEW YORK, NY 10167	Phone no.	<u> 212-286-2</u>	
223711 0	1-16-23			Form §	90-T ₍₂₀₂

FORM 990-T	CONTR	RIBUTIONS SUMMARY		STATEMENT	13
	CONTRIBUTIONS SUBJECT				
FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED YEAR 2017 YEAR 2018 YEAR 2019 YEAR 2020 YEAR 2021	CONTRIBUTIONS 1,012,286 2,546,331 2,679,885 2,437,086 3,250,911			
TOTAL CARF	RYOVER RENT YEAR 10% CONTRIBU	TIONS	11,926,499		
	TRIBUTIONS AVAILABLE NCOME LIMITATION AS AD	JUSTED	11,926,499	_	
EXCESS 100	NTRIBUTIONS 0% CONTRIBUTIONS ESS CONTRIBUTIONS		11,926,499 0 11,926,499	_	
ALLOWABLE	CONTRIBUTIONS DEDUCTI	ON		_	0
TOTAL CONT	RIBUTION DEDUCTION				0

FORM 990-T	PRE 2018 NOL SCHE	DULE	STATEMENT 14
PRE-2018 NOL CARRY FORWARD PRE-2018 NOL DEDUCTION INC		INE 6	986,436. 39,603.
SCHEDULE A PORTION OF PRE- SCHEDULE A ENTITY	-2018 NOL SCHEDULE A	SHARE	
1 2		0.	
TOTAL SCHEDULE A SHARE OF NET OPERATING DEDUCTION BALANCE AFTER PRE-2018 NOI EXPIRING NET OPERATING LOS CARRY FORWARD OF NET OPERA	DEDUCTION		0. 39,603. 0. 0. 946,833.
FORM 990-T PRE-2	2018 NET OPERATING	LOSS DEDUCTION	STATEMENT 15
TAX YEAR LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/18 1,010,264.	23,828.	986,436.	986,436.
NOL CARRYOVER AVAILABLE THI	S YEAR	986,436.	986,436.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Go to www.irs.gov/Form990T for instructions and the latest information.

Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service 501(c)(3) Organizations Only B Employer identification number Name of the organization PROSPECT HILL FOUNDATION INC. 13-6075567 901101 **D** Sequence: Unrelated business activity code (see instructions) Describe the unrelated trade or business PROSPECT CAPITAL PARTNERS Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales **b** Less returns and allowances 1c Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D (Form 1041 or Form 10,124. 10,124. 1120)). See instructions 4a Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 16 32,167. 32,167. Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 Advertising income (Part IX) 11 11 1,956. Other income (see instructions; attach statement) STMT 12 44,247. 13 **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income Compensation of officers, directors, and trustees (Part X) 2 2 Salaries and wages 3 Repairs and maintenance 4 4 Bad debts 421 Interest (attach statement). See instructions SEE STATEMENT 18 5 5 6 Taxes and licenses 6 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8b 8 9 Depletion _____ 9 10 Contributions to deferred compensation plans 10 Employee benefit programs 11 11 Excess exempt expenses (Part VIII) 12 12 Excess readership costs (Part IX) 13 13 4,223. Other deductions (attach statement) SEE STATEMENT 19 14 4,644. Total deductions. Add lines 1 through 14 15 15 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 39,603. 16 column (C) Deduction for net operating loss. See instructions

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2022

39,603.

17

18

Page	•
raue	-

	ule A (Form 990-T) 2022				Page 2
Part	Entormet	hod of inventory valuat	ion		
1					
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter l	here and in Part I, line 2	2	8	
9	Do the rules of section 263A (with respect to property				Yes No
Part	IV Rent Income (From Real Property and	l Personal Proper	ty Leased with Re	eal Property)	
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See instru	uctions.	
	A				
	В				
	c				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4 <u>5</u> Part 1	Description of debt-financed property (street address, of A	ee instructions)			0.
	B				
	C				
	D			•	
_		Α	В	С	D
2	Gross income from or allocable to debt-financed				
_	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D)	. Enter here and on Par	rt I, line 7, column (A)	<u> </u>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr				0.
11	Total dividends-received deductions included in line	10			0.

	VI Interest, Annu		oyalties, and Re	ents fron	n Control	led Or	ganizations	s (se	e instruct	ions)	r age o
		· · · · · · · · · · · · · · · · · · ·				E	Exempt Contro				
	Name of controlled organization		2. Employer identification number	tion income (loss) payment		al of specified nents made that is included controlling org tion's gross in		included olling orga	in the iniza-	connected with income in column 5	
(1)											
(2)											
(3)				-							
(4)											
	Tayabla Inaama				Controlled Or	-	ons 10. Part	of colum	mn 0	44 [Doductions directly
•	. Taxable Income	ir	Net unrelated acome (loss) e instructions)	1	otal of specif yments mad		that is inc	luded ii	n the ation's	C	Deductions directly connected with one in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c	and on	Part I,	Enter	columns 6 and 11. here and on Part I, ne 8, column (B)
Totals									0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization _{(s}	ee instr	ructions)		
	1. Desc	cription of	income		2. Amou incon		3. Deduction directly connected (attach states	ected	4. Set- (attach st		5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amou	ınto in					Add amounts in
Totals					column 2. here and or line 9, colu	Enter n Part I,					column 5. Enter here and on Part I, line 9, column (B)
Part	VIII Exploited E	xempt A	ctivity Income,	, Other T	han Adve	ertising	g Income	see ins	tructions)		
1	Description of exploite	ed activity:									
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A) .		2	
3	Expenses directly con	nected wit	h production of unre	elated busi	ness income	e. Enter l	here and on Pa	art I,			
										3	
4	Net income (loss) from	unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a (gain, complete	!			
_										4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen			o, but do no	or enter more	e man tr	ie amount on I	ıı 1e		7	

Schedule A (Form 990-T) 2022

Part	IX Advertising Income					
1	Name(s) of periodical(s). Check	box if reporting two o	r more periodicals on a d	consolidated basis.		
	A					
	В					
	c 🗆					
	D					
Enter a	amounts for each periodical listed	above in the corresp	onding column.			
	•	•	Α	В	С	D
2	Gross advertising income					
	Add columns A through D. Ente		ine 11, column (A)		•	0.
а	9	,	, , , , , , , , , , , , , , , , , , , ,			
3	Direct advertising costs by perio	odical				
а	Add columns A through D. Ente		ine 11, column (B)			0.
	-					
4	Advertising gain (loss). Subtract	: line 3 from line				
	2. For any column in line 4 show	ving a gain,				
	complete lines 5 through 8. For	any column in				
	line 4 showing a loss or zero, do	not complete				
	lines 5 through 7, and enter zero	o on line 8				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line					
	line 5, subtract line 6 from line 5	5. If line 5 is less				
	than line 6, enter zero					
8	Excess readership costs allowed					
	deduction. For each column sho	owing a gain on				
	line 4, enter the lesser of line 4 of	or line 7				
а	Add line 8, columns A through D	D. Enter the greater of	the line 8a, columns tot	al or zero here and or	1	
_	Part II, line 13					0.
Part		fficers Directors	s and Truetaas 💪	ee instructions)		
	X Compensation of O	Thocis, Directors	s, and musices (Si			
		moers, Director.			3. Percentage	4. Compensation
. urt	1. Name	moers, Directors	2. Title		3. Percentage of time devoted	attributable to
		moors, Directors			of time devoted to business	
1)		moors, Directors			of time devoted to business %	attributable to
1)		moers, Directors			of time devoted to business %	attributable to
1) 2) 3)		moers, Directors			of time devoted to business %	attributable to
1) 2) 3)		moers, Directors			of time devoted to business %	attributable to
1) 2) 3) 4)	1. Name	moors, Directors			of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
1) 2) 3) 4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business
(1) (2) (3) (4)	1. Name 1. Name		2. Title		of time devoted to business %	attributable to unrelated business

	STATEMENT 16
DESCRIPTION	NET INCOME OR (LOSS)
PROSPECT CAPITAL PARTNERS - ORDINARY BUSINESS INCOME (LOSS) PROSPECT CAPITAL PARTNERS - NET RENTAL REAL ESTATE INCOME PROSPECT CAPITAL PARTNERS - OTHER NET RENTAL INCOME (LOSS) PROSPECT CAPITAL PARTNERS - INTEREST INCOME PROSPECT CAPITAL PARTNERS - DIVIDEND INCOME PROSPECT CAPITAL PARTNERS - ROYALTIES PROSPECT CAPITAL PARTNERS - OTHER PORTFOLIO INCOME (LOSS) PROSPECT CAPITAL PARTNERS - OTHER INCOME (LOSS) TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	30,564. -267. 536. 769. 438. 9. 70. 48.
FORM 990-T (A) OTHER INCOME	STATEMENT 17
DESCRIPTION	AMOUNT
CANCELLATION OF DEBT - PROSPECT CAPITAL PARTNERS	1,956.
TOTAL TO SCHEDULE A, PART I, LINE 12	1,956.
FORM 990-T (A) INTEREST PAID	STATEMENT 18
FORM 990-T (A) INTEREST PAID DESCRIPTION	STATEMENT 18 AMOUNT
DESCRIPTION	AMOUNT
DESCRIPTION ————— INVESTMENT INTEREST	AMOUNT 421.
DESCRIPTION INVESTMENT INTEREST TOTAL TO SCHEDULE A, PART II, LINE 5	AMOUNT 421.
DESCRIPTION INVESTMENT INTEREST TOTAL TO SCHEDULE A, PART II, LINE 5 FORM 990-T (A) OTHER DEDUCTIONS	AMOUNT 421. 421. STATEMENT 19

990-T SCH A	POST-2017	NET OPERATING	LOSS DEDUCTION	STATEMENT 20
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19 06/30/20 06/30/21 06/30/21	2,545,713. 2,679,885. 2,437,103. 22,937.	0. 0. 0.	2,545,713. 2,679,885. 2,437,103. 22,937.	2,545,713. 2,679,885. 2,437,103. 22,937.
NOL CARRYOV	ER AVAILABLE THIS Y	EAR	7,685,638.	7,685,638.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2022

Name

Employer identification number

	PROSPECT HILL FOUN	DATION INC.			<u> 13-</u>	6075567
	the corporation dispose of any investment					Yes X No
_	Yes," attach Form 8949 and see its instru Part I Short-Term Capital Gai					
	e instructions for how to figure the amounts	IIIS aliu Lusses - Assi	ets neid Offe Tear	Ur Less		(h) Gain or (loss)
to e Thi	e instructions for flow in lighter the amounts enter on the lines below. s form may be easier to complete if you ind off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column	49,	Subtract column (e) from column (d) and combine the result with column (g)
_	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b	Totals for all transactions reported on					
_	Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on					
_	Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on					1 510
_	Form(s) 8949 with Box C checked					1,510.
	Short-term capital gain from installment sales				4	
	Short-term capital gain or (loss) from like-kin				5	
	Unused capital loss carryover (attach computa				6	()
7	Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai	e lines 1a through 6 in column	h	- O V	7	1,510.
		ns and Losses - Asse	ets neid wore Tha			(b) O = (c = c)
to e	e instructions for how to figure the amounts enter on the lines below.	(d)	(e)	(g) Adjustments to ga		(h) Gain or (loss) Subtract column (e) from
Thi rou	s form may be easier to complete if you and off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 89 Part II, line 2, column		column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b	Totals for all transactions reported on					
	Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on					
	Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on					
_	Form(s) 8949 with Box F checked					4,741.
	Enter gain from Form 4797, line 7 or 9				11	3,873.
12	Long-term capital gain from installment sales	from Form 6252, line 26 or 37			12	
13	Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
14	Capital gain distributions				14	
	Net long-term capital gain or (loss). Combine Part III Summary of Parts I and		h		15	8,614.
	Enter excess of net short-term capital gain (lin		loss (line 15)		16	1,510.
	Net capital gain. Enter excess of net long-term				17	8,614.
	Add lines 16 and 17. Enter here and on Form				18	10,124.
10	Note: If losses exceed gains, see Capital Los		moante iiile on other returns	·	10	10,124.
	note. Il losses execeu gallis, see Capital Los	SES III uio iiisu uouoiis.				

221051 12-16-22

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2022

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification no.

C

PROSPECT HILL	LOONDAT.TO	ON INC.				13-6	0/556/
Before you check Box A, B, or C bel statement will have the same inform broker and may even tell you which	ow, see whether ation as Form 109	you received any 99-B. Either will s	/ Form(s) 1099-B c show whether you	or substitute statem r basis (usually you	ent(s) from cost) was	your broker. A su reported to the IF	bstitute S by your
Part I Short-Term. Transact		al assets you held	1 year or less are get	nerally short-term (see	instructions	s). For long-term	
transactions, see page 2. Note: You may aggregate a							liustments or
codes are required. Enter the	e totals directly on S	Schedule D, line 1a	a; you aren't required	to report these transa	actions on F	orm 8949 (see instru	ctions).
You must check Box A, B, or C below. If you have more short-term transactions than wi							each applicable box.
(A) Short-term transactions re					-		
(B) Short-term transactions re	ported on Form(s	s) 1099-B showin	ig basis wasn't re	eported to the IRS			
X (C) Short-term transactions no	ot reported to you	u on Form 1099-l	В				
1 (a)	(b)	(c)	_ (d)	(e)	Adjustmen	t, if any, to gain or ou enter an amount	(h)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other basis. See the	in column	(g), enter a code in	Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(60.66 p.166)	Note below and	(-)	. See instructions.	from column (d) &
		(Mo., day, yr.)		see Column (e) in	(f) Code(s)	(g) Amount of	combine the result
				the instructions	Code(s)	adjustment	with column (g)
PROSPECT CAPITAL							4 540
PARTNERS							1,510.
2 Totals. Add the amounts in colu							
negative amounts). Enter each to							
Schedule D, line 1b (if Box A abo	ove is checked),	line 2 (if Box B					

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2022)

above is checked), or line 3 (if Box C above is checked) .

Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

12_6075567

C

PROSPECT HILL							075567
Before you check Box D, E, or F belo tatement will have the same informa proker and may even tell you which b	w, see whether y ation as Form 109	ou received any 99-B. Either will s	Form(s) 1099-B c show whether you	or substitute statem r basis (usually you	ent(s) from r cost) was	your broker. A sul reported to the IR	ostitute S by your
Part II Long-Term. Transaction	ons involving capita	ıl assets you held n	nore than 1 year are	generally long-term (s	ee instructio	ns). For short-term tr	ansactions,
see page 1. Note: You may aggregate all codes are required. Enter the	long-term transact	ions reported on F	orm(s) 1099-B show	ing basis was reported	d to the IRS a	and for which no adj	ustments or
You must check Box D, E, or F below. C you have more long-term transactions than will	check only one bo	x. If more than one b	ox applies for your long-	term transactions, compl	ete a separate	Form 8949, page 2, for e	
(D) Long-term transactions rep			•		=		
(E) Long-term transactions rep	•		•	•		,	
X (F) Long-term transactions not				,			
(a)	(b)	(c)	(d)	(e)		t, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		u enter an amount (g), enter a code in	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the Note below and	column (f).	See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		see Column (e) in	(f)	(g) Amount of	combine the result
				the instructions	Code(s)	adjustment	with column (g)
PROSPECT CAPITAL							
PARTNERS							4,741.
							_
2 Totals. Add the amounts in colur	nns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 8b (if Box D abo	ove is checked),	line 9 (if Box E					
above is checked), or line 10 (if E	Box F above is ch	necked)					4,741.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2022)

Department of the Treasury Internal Revenue Service Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

2022

Attachment 2

Name(s) shown on return Identifying number PROSPECT HILL FOUNDATION INC. 13-6075567 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (C) Date sold (a) Description (d) Gross sales 2 basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) acquisition expense of sale PROSPECT CAPITAL PARTNERS 3,873 Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 3,873. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term 3,873. capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 14 14 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Pa	rt III Gain From Disposition of Propert	y Und	ler Sections 1245	, 1250, 1252	, 125	64, and 1255	(see ii	nstructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	or 1255	property:			(b) Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)
_A								
<u>B</u>								
<u></u> C								
_ <u>D</u>								
	These columns relate to the properties on lines 19A through 19D.		Property A	Property I	В	Property	С	Property D
20	Gross sales price (Note: See line 1a before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable \dots	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
<u>24</u>	Total gain. Subtract line 23 from line 20	24						
	If section 1245 property:							
	Depreciation allowed or allowable from line 22	25a						
	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976	26d						
	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions	29b						
Sui	mmary of Part III Gains. Complete property of	olumns	A through D through I	line 29b before (going	to line 30.		
30	Total gains for all properties. Add property columns	A throu	ugh D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,	27c, 28	Bb, and 29b. Enter here	and on line 13			31	
32	Subtract line 31 from line 30. Enter the portion from	casual	ty or theft on Form 468	34, line 33. Ente				
	fuere attendation according on the eff are Forms 4707. In a		•	•			32	
Pa	rt IV Recapture Amounts Under Section	ns 17	9 and 280F(b)(2) \	When Busine	ess l	Jse Drops to	50%	or Less
	(see instructions)							
						(a) Section 179	1	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	wable i	n prior years		33			
34				Г	34			
35	Recapture amount. Subtract line 34 from line 33. Se				35			

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

A Name of the organization

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

B Employer identification number

PROSPECT HILL FOUNDATION INC.			13-60	J / D D D	<i>I</i>
nrelated business activity code (see instructions) 90110	1		D Sequenc	e: 2	of 2
escribe the unrelated trade or business INVESTMENTS	IS L	IMITED PARTN	ERSHIPS		
		(A) Income		es	(C) Net
Gross receipts or sales					
	1c				
	2				
	3				
	4a	69.			69.
	4b				
Capital loss deduction for trusts	4c				
Income (loss) from a partnership or an S corporation (attach					
statement) STATEMENT 21	5	-254.			-254.
	6				
	7				
Interest, annuities, royalties, and rents from a controlled					
organization (Part VI)	8				
organizations (Part VII)	9				
Exploited exempt activity income (Part VIII)	10				
Advertising income (Part IX)	11				
Other income (see instructions; attach statement)	12				
Total. Combine lines 3 through 12	13	-185.			-185.
directly connected with the unrelated business in	come				must be
				-	
					250.
				6	230.
				- Oh	
Contributions to deferred compensation plans					
Other deductions (attach statement)		SEE STAT	EMENT 22		46.
					296.
•					
				16	101
				1 .5	-40J _•
. ,				17	-481. 0.
Deduction for net operating loss. See instructions Unrelated business taxable income. Subtract line 17 from line 10				17 18	-481. -481.
	Inrelated business activity code (see instructions) Describe the unrelated trade or business INVESTMENTS IVESTMENTS IVESTMENTS IVESTMENTS Gross receipts or sales Less returns and allowances Cost of goods sold (Part III, line 8) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 21 Rent income (Part IV) Unrelated debt-financed income (Part V) Interest, annuities, royalties, and rents from a controlled organization (Part VI) Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) Advertising income (Part IX) Other income (see instructions; attach statement) Total. Combine lines 3 through 12 III Deductions Not Taken Elsewhere See instructi directly connected with the unrelated business in Compensation of officers, directors, and trustees (Part X) Salaries and wages Repairs and maintenance Bad debts Interest (attach statement). See instructions Taxes and licenses Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs Excess readership costs (Part VIII) Excess readership costs (Part IX) Other deductions. Add lines 1 through 14 Unrelated business income before net operating loss deduction. S	Inrelated business activity code (see instructions) Pescribe the unrelated trade or business INVESTMENTS IS I Unrelated Trade or Business Income Gross receipts or sales Less returns and allowances c Balance Cost of goods sold (Part III, line 8) Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions) April (attach Schedule D (Form 1041 or Form 10120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 21 Sent income (Part IV) Toll Interest, annuities, royalties, and rents from a controlled organization (Part VI) Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Sexploited exempt activity income (Part VIII) Advertising income (Part IX) Other income (see instructions; attach statement) Total. Combine lines 3 through 12 Total. Combine lines 3 through 12 Total. Combine lines 3 through 12 Taxes and wages Repairs and maintenance Bad debts Interest (attach statement). See instructions Taxes and licenses Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Part VIII) Cottler deductions (attach statement) Total deductions. Add lines 1 through 14 Unrelated business income before net operating loss deduction. Subtract	Interest duction for trusts Income (Part IV) Interest, anutities, royalties, and rents from a controlled organization (Part VI) Investment income (Part IV) Investment income of section 501(c)(7), (9), or (17) organizations (Part VI) Investment income (Part IV) Interest, annutities, royalties, and rents from a controlled organization (Part VI) Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Investment income of section 501(c)(7), (9), or (17) Interest, annutities, royalties, and rents from a controlled organization of organizations (Part VII) Investment income of section 501(c)(7), (9), or (17) Interest, annutities, royalties, and rents from a controlled organization of Part IV) Investment income of section 501(c)(7), (9), or (17) Interest, annutities, royalties, and rents from a controlled organization of Part IV) Interest, annutities, royalties, and rents from a controlled organization of Part IV) Interest, annutities, royalties, and rents from a controlled organization of Part IV) Interest, annutities, royalties, and rents from a controlled organization of Part IV Interest (Part VI) Interest (Part VI) Interest (Part VI) Interest (Attach statement) Interest	Describe the unrelated trade or business INVESTMENTS IS LIMITED PARTNERSHIPS	D Sequence: 2 Describe the unrelated trade or business INVESTMENTS IS LIMITED PARTNERSHIPS I Unrelated Trade or Business Income (A) Income (B) Expenses Gross receipts or sales Less returns and allowances cost of goods sold (Part III, line 8) Gross profit. Subtract line 2 from line 1c Capital gain ent income (attach Schedule D (Form 1041 or Form 1120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions) Net gain (loss) (Form 4797) (attach Form 4797). See instructions) Ab Capital loss deduction for trusts Loncome (loss) from a partnership or an S corporation (attach statement) STATEMENT 21 Unrelated debt-financed income (Part V) Lorrelated debt-financed income (Part VIII) Lorrelated exempt activity income (Part VIII) Lorrelated business income Compensation of officers, directors, and trustees (Part X) Lorrelated business income Compensation of officers, directors, and trustees (Part X) Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsewhere on return Less depreciation claimed in Part III and elsew

	2	
age	2	
	_	
	_	
	_	

Part	III Cost of Goods Sold Ent	er method of inventory valuation	on		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement	t)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6.	Enter here and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to pro	perty produced or acquired fo	r resale) apply to the o	rganization?	
Part					
1	Description of property (property street address	, city, state, ZIP code). Check i	f a dual-use. See instru	ctions.	
	A				
	B				
	c				
	D			_	
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the	.			
	percentage of rent for personal property exceed	S			
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
•	T			(4)	0
3	Total rents received or accrued. Add line 2c colu	umns A through D. Enter here a	and on Part I, line 6, co	lumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and an Dort I. li	ino 6 polumn (P)		0.
Part '		16 (see instructions)	inc o, column (b)		
1	Description of debt-financed property (street add		neck if a dual-use. See i	nstructions	
·	A	areas, arry, state, En esas). Si	ioon ii a aaai aoo. ooo i	noti dottorio.	
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed		_	-	-
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
_	columns A through D)				
4	Amount of average acquisition debt on or alloca				
•	to delet Conservation and Cottonia at the servation				
5	Average adjusted basis of or allocable to debt-				
•	financed property (attach statement)				
6	Divide line 4 by line 5		%	%	%
7	Gross income reportable. Multiply line 2 by line		70	70	70
8	Total gross income (add line 7, columns A thro		· L line 7 column (Δ)		0.
	. 5.22. gr 555 mosmo (add mre 7, coldimis A tille	agir bj. Entor Horo and on Fall	, , coluitili (A)		•
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, column	ns A through D. Enter here and	on Part I. line 7. colum	n (B)	0.
11	Total dividends-received deductions included				0.

	le A (Form 990-T) 2022 VI Interest, Annu		ovalties, and Re	ents fror	n Control	led Or	ganizations	S (s	ee instruct	ions)		Page 3
· art							Exempt Contro	,				
	1. Name of controlle	d	2. Employer			al of specified				6. D	eductions directly	
	organization		identification	incon	ne (loss)	payn	nents made		s included rolling orga		c	connected with
			number	(see ins	structions)				s gross inc		inc	ome in column 5
(1)												
(2)												
(3)												
(4)												
	Tayabla Ingomo				Controlled Or otal of specif			of ook	.mn 0	- 44	Dod	luctions divoctly
	Taxable Income		Net unrelated acome (loss)		yments mad		10. Part of that is income.			11.		luctions directly nected with
			e instructions)	Pa	ymonto mad	C	controlling			in		e in column 10
(1)		,	,				gross	incon	ie			
(2)												
(3)												
(4)												
							Add colum	nns 5 a	and 10.	Ad	d col	umns 6 and 11.
							Enter here		,	Enter here and on Part I,		
							line 8, c	column	. ,		iirie c	3, column (B)
Totals		<u></u>					<u> </u>		0.			0.
Part			of a Section 50	1(c)(7), (T .		1		tructions)			
	1. Desc	cription of	income		2. Amou incon		3. Deduction		4. Set-		' F	. Total deductions and set-asides
							(attach state		(attacii si	ateme		(add cols 3 and 4)
(1)											_	
(2)												
(3)												
(4)												
					Add amou							Add amounts in
					column 2						١,	column 5. Enter here and on Part I,
					line 9, colu	,						line 9, column (B)
Totals						0.						0.
Part	VIII Exploited E	xempt A	Activity Income,	Other 1	Than Adve	ertisino	g Income (see in	structions)			
1	Description of exploite	•										
2	Gross unrelated busin						•	. ,		2		
3	Expenses directly con											
4	line 10, column (B)		trada or kurinana	Dudates at 11						3		
4	Net income (loss) from						-			4		
5	lines 5 through 7 Gross income from ac		e not unrelated busi							5		
6	Expenses attributable									6		
7	Excess exempt expen											
-	4. Enter here and on F									7		

Schedule A (Form 990-T) 2022

Part	IX Advertising Income				<u> </u>
1	Name(s) of periodical(s). Check box if reporting to	vo or more periodicals on a c	onsolidated basis.		
	A 🔲				
	В				
	c				
	D				
Enter a	amounts for each periodical listed above in the corr			T -	
_		Α	В	С	D
2	Gross advertising income	•			0.
_	Add columns A through D. Enter here and on Par	TI, line 11, column (A)			
а 3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on Par				0.
-	Add Soldining Attinough B. Enter here and on that	(1, IIII 17, GOIGITIIT (D)			
4	Advertising gain (loss). Subtract line 3 from line				
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is less				
•	than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on				
	line 4, enter the lesser of line 4 or line 7				
а		<u>_</u>	al or zero here and or	<u> </u>	
	Part II, line 13				0.
Part	X Compensation of Officers, Direct	tors, and Trustees (se	e instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title	C	of time devoted	attributable to
				to business	unrelated business
(1)				%	
(2)				%	
(3)				% %	
(4)	I			70	
Total	I. Enter here and on Part II, line 1				0.
Part	W	structions)			-
		,			

FORM 990-T	(A) INCOM	ME (LOSS) FROM PA	RTNERSHIPS	STATEMENT 21
DESCRIPTIO	N			NET INCOME OR (LOSS)
BUSINESS I	 VESTMENT ASSOCIATES NCOME (LOSS) VESTMENT ASSOCIATES	•		-258.
INCOME (LO				-120.
ESTATE INC				116. 8.
	UDED ON SCHEDULE A,			-254.
FORM 990-T	(A)	OTHER DEDUCTION		STATEMENT 22
DESCRIPTIO	N			AMOUNT
VENTURE IN	 VESTMENT ASSOCIATES	S IV, L.P.		46.
TOTAL TO S	CHEDULE A, PART II,	LINE 14		46.
990-T SCH	A POST-201	.7 NET OPERATING	LOSS DEDUCTION	STATEMENT 23
		LOSS		
TAX YEAR	LOSS SUSTAINED	PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19 06/30/20 06/30/21	45,557. 54,236. 974.	0. 0. 0.	45,557. 54,236. 974.	45,557. 54,236. 974.
06/30/22	616.	0.	616.	616.
NOL CARRYO	VER AVAILABLE THIS	YEAR	101,383.	101,383.

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2022

PROSPECT HILL FOUNDATION INC.

Employer identification number

13-6075567

Did the corporation dispose of any investme					Yes X No
If "Yes," attach Form 8949 and see its instru			_		
Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sales	s from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kir	nd exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comput	tation)			6	(
7 Net short-term capital gain or (loss). Combin	ne lines 1a through 6 in column	h		7	
Part II Long-Term Capital Ga	ins and Losses - Asse	ets Held More Than	n One Year		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga		(h) Gain or (loss) Subtract column (e) from
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part II, line 2, column		column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					
				11	69.
12 Long-term capital gain from installment sales				12	
13 Long-term capital gain or (loss) from like-kir	nd exchanges from Form 8824			13	
				14	
15 Net long-term capital gain or (loss). Combin	e lines 8a through 14 in column	h		15	69.
Part III Summary of Parts I and					T
16 Enter excess of net short-term capital gain (li				16	
17 Net capital gain. Enter excess of net long-terr				17	69.
18 Add lines 16 and 17. Enter here and on Form		licable line on other returns	3	18	69.
Note: If losses exceed gains, see Capital Lo	sses in the instructions.				

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2022

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Attachment 2

Identifying number

PROSPECT HILL FOUNDATION INC. 13-6075567 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (C) Date sold (a) Description (d) Gross sales 2 basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) acquisition expense of sale VENTURE INVESTMENT ASSOCIATES IV, L.P. 69. 3 Gain, if any, from Form 4684, line 39 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 69. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term 69. capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 14 14 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

					(b) Date acqu	ired	(c) Date sold
(a) Description of section 1245, 1250, 1252, 1254, (or 1255	property:			(mo., day, y		(mo., day, yr.)
<u> </u>							
3							
3							
<u> </u>		Т					
These columns relate to the properties on lines 19A through 19D.		Property A	Property I	3	Property	С	Property D
Gross sales price (Note: See line 1a before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
Adjusted basis. Subtract line 22 from line 21	23						
Total gain. Subtract line 23 from line 20	24						
If section 1245 property:	_						
a Depreciation allowed or allowable from line 22	25a						
Enter the smaller of line 24 or 25a	25b						
If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975. See instructions	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
a Soil, water, and land clearing expenses	27a						
b Line 27a multiplied by applicable percentage	27b						
Enter the smaller of line 24 or 27b	27c						
If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b Enter the smaller of line 24 or 28a	28b						
If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b Enter the smaller of line 24 or 29a. See instructions	29b						
Immeny of Bort III Going	•				: 00	<u>'</u>	
Immary of Part III Gains. Complete property of	columns	A through D through	line 29b before (going	to line 30.		
Total gains for all properties. Add property columns	A throu	igh D, line 24				30	
Add property columns A through D, lines 25b, 26g,	27c, 28	b, and 29b. Enter her	e and on line 13			31	
Subtract line 31 from line 30. Enter the portion from							
from other than casualty or theft on Form 4797, line	6		<u></u>	· · · · · · · · · · · · · · · · · · ·		32	
from other than casualty or theft on Form 4797, line art IV Recapture Amounts Under Section	ns 17	9 and 280F(b)(2)	When Busine	ess L	Jse Drops to	50% c	or Less
(see instructions)							
					(a) Sectio 179	n	(b) Section 280F(b)(2)
Section 179 expense deduction or depreciation allo	wable ii	n prior years		33			
			Г	34			
Recapture amount. Subtract line 34 from line 33. So				35			

218012 12-12-22

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Employer identification number

PROSPECT HILL FOUN	DATION INC.			13-	6075567
Did the corporation dispose of any investme	nt(s) in a qualified opportur	nity fund during the tax ye	ear?		Yes X No
If "Yes," attach Form 8949 and see its instru					
Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column (49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					1,510.
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kin				5	
6 Unused capital loss carryover (attach comput	,		ſ	6	1 510
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai	te lines 1a through 6 in column	ots Hold More Thai	n One Vear	7	1,510.
See instructions for how to figure the amounts	lis aliu Lusses - Ass		Tone real		(h) Gain or (loss)
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked 9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					4,741.
44 Fater asia from Form 4707 line 7 on 0				11	3,942.
12 Long-term capital gain from installment sales				12	,
13 Long-term capital gain or (loss) from like-kin				13	
A.A. One that water all aboth outlands				14	
15 Net long-term capital gain or (loss). Combin				15	8,683.
Part III Summary of Parts I and					
16 Enter excess of net short-term capital gain (li	ne 7) over net long-term capita	al loss (line 15)		16	1,510.
17 Net capital gain. Enter excess of net long-term	n capital gain (line 15) over ne	t short-term capital loss (line	e 7)	17	8,683.
18 Add lines 16 and 17. Enter here and on Form		plicable line on other returns	s	18	10,193.
Note: If losses exceed gains, see Capital Los	sses in the instructions.				

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2022

LHA

Department of the Treasury

Name(s) shown on return

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074
2022

Attachment Seguence No. 12A

Social security number or taxpayer identification no.

13-6075567

PROSPECT HILL FOUNDATION INC.

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

broker and may even tell you which box to check Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term Part I transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (d) (h) (c) (e) loss. If you enter an amount Proceeds Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of adjustment see *Column (e*) ir combine the result Code(s) with column (g) the instructions PROSPECT CAPITAL PARTNERS 1,510. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2022)

1,510.

above is checked), or line 3 (if Box C above is checked)

Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

PROSPECT HILL FOUNDATION INC.

Form 8949 (2022)

13-6075567

(Mo., day, yr.) Note below and see Column (e) in (f) Amount of combine the recombine the recombined the recombined that t									
Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1. Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable by fixed the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS	Befor stater	e you check Box D, E, or F beloment will have the same information and may even tall you which be	w, see whether yation as Form 109	you received any 99-B. Either will	v Form(s) 1099-B o show whether you	r substitute statem basis (usually you	ent(s) from r cost) was	n your broker. A su s reported to the IF	bstitute IS by your
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable by the policy of you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see (E) Long-term transactions not reported to you on Form 1099-B (E) Long-term transactions not reported to you on Form 1099-B (a) (b) (c) Date acquired (Mo., day, yr.) (E) Date acquired (Mo., day, yr.)		t II Long-Term. Transaction		al assets you held r	more than 1 year are	generally long-term (s	ee instructi	ons). For short-term to	ransactions,
You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable be for you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (E) Long-term transactions not reported to you on Form 1099-B (a) (b) (c) Date sold or disposed of (Mo., day, yr.) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (b) Date sold or disposed of (Mo., day, yr.)		see page 1. Note: You may aggregate all	l long-term transact	tions reported on F	Form(s) 1099-B showi	ng basis was reported	d to the IRS	and for which no adj	ustments or
(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (E) Long-term transactions not reported to you on Form 1099-B (a) (b) (c) Date acquired (Mo., day, yr.) (Example: 100 sh. XYZ Co.) (b) Date acquired (Mo., day, yr.) (m) Date acquired (Mo., day, yr.) Date acquired (M	You n	nust check Box D, E, or F below. C	Check only one bo	x. If more than one b	oox applies for your long-	term transactions, compl	ete a separate	Form 8949, page 2, for e	
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B (a) (b) (c) Date acquired (Mo., day, yr.) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (B) (C) Date sold or disposed of (Mo., day, yr.) (Mo., day,	f you h	ave more long-term transactions than will	fit on this page for one	e or more of the boxes	, complete as many form	s with the same box chec	ked as you ne	eed.	
The state of the instructions and the instructions and the instructions and the instructions. The state of the instructions and the instructions. The state of the instructions are state of the instructions. The state of the instructions are state of the instructions. The state of the instructions are state of the instructions and the state of the instructions and the state of the instructions. The state of the instructions are state of the instructions and the state of the instructions are state of the instructions and the state of the instructions and the state of the instructions are state of the instructions and the state of the instructions are state of the instructions and the state of the instructions are state of the instructions and the state of the instructions are stated as a state of the instructions are stated as a state of the instruction are stated as a state of the inst	Ш	• • • • • • • • • • • • • • • • • • • •		•	•	,	Note abo	ove)	
1 (a) Description of property (Example: 100 sh. XYZ Co.) Date acquired (Mo., day, yr.) Date acquired (Mo., day, yr.) Date sold or disposed of (Mo., day, yr	┖┳	• • •			-	ported to the IRS			
Date acquired (Example: 100 sh. XYZ Co.) Date acquired (Mo., day, yr.) Date sold or disposed of (Mo., day, yr.) Date sold or disposed o	<u> </u>						Adjustma	nt if any to gain or	
(Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) (Sales price) (Subtract column (f). See instructions (f) (G) (Code(s)) (G) (Code(s)) (Co	1		` '			, ,	loss. If y	où enter an amount	
(Mo., day, yr.) Note below and see Column (e) in the instructions Code(s) Amount of adjustment Code(s) PROSPECT CAPITAL Code(s) Cod	(1				in column	(g), enter a code in	Subtract column (e)
PROSPECT CAPITAL Amount of adjustment with column	,		(, 22), ,,						from column (d) &
PROSPECT CAPITAL								Amount of	with column (g)
	DDC	בסברית באסדיתאו.				the motivations	` '	adjustment	With column (g)
									1 7/1
	LAI	TINEKS							4,/41.
			-						
									
									
									
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract	2 Tc	otals. Add the amounts in colur	nns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each total here and include on your	ne	gative amounts). Enter each to	tal here and inclu	ude on your					
Schedule D, line 8b (if Box D above is checked), line 9 (if Box E	Sc	chedule D, line 8b (if Box D abo	ove is checked),	line 9 (if Box E					
above is checked), or line 10 (if Box F above is checked)	ab	ove is checked), or line 10 (if E	Sox F above is ch	necked)					4,741.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2022)

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

2022

Attachment 2

Identifying number

PROSPECT HILL FOUNDATION INC. 13-6075567 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (C) Date sold (a) Description (d) Gross sales 2 basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) acquisition expense of sale PROSPECT CAPITAL 3,873. **PARTNERS** VENTURE INVESTMENT 69. ASSOCIATES IV, L.P. Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 3,942. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term 3,942. capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Pa	rt III Gain From Disposition of Propert	y Und	ler Sections 1245	, 1250, 1252	, 125	64, and 1255	(see ir	nstructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	(b) Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)				
_A								
<u>B</u>								
<u></u> C								
_ <u>D</u>								
	These columns relate to the properties on lines 19A through 19D.		Property A	Property I	В	Property	С	Property D
20	Gross sales price (Note: See line 1a before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable \dots	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
<u>24</u>	Total gain. Subtract line 23 from line 20	24						
	If section 1245 property:							
	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	d Additional depreciation after 1969 and before 1976 26d							
	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
	Add lines 26b, 26e, and 26f	26g						
	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions							
Sui	mmary of Part III Gains. Complete property of	olumns	A through D through I	line 29b before ç	going	to line 30.		
30	Total gains for all properties. Add property columns	A throu	ugh D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,	27c, 28	Bb, and 29b. Enter here	and on line 13			31	
	Subtract line 31 from line 30. Enter the portion from	•	*					
_	fuere allegations according on the eff are Ferrer 4707. Items		•	·			32	
Pa	rt IV Recapture Amounts Under Section	ns 17	9 and 280F(b)(2) \	When Busine	ess l	Jse Drops to	50% (or Less
	(see instructions)					() 6		(L) O
						(a) Section 179	ן י	(b) Section 280F(b)(2)
20	Costion 170 evenues deducation and description	ا - ا جا جريد	n nriar ve erre	Г		175		
33	Section 179 expense deduction or depreciation allo			Г	33		+	
34 35	Recomputed depreciation. See instructions Recapture amount. Subtract line 34 from line 33. See		netructions for where to		34 35		+	
J	riccapture amount. Subtract file 34 HUIII III e 33. 36	こっこうしょ	ISTUDENCE OF WHELE I	J 10001L	J		1	