Form	9	9	0

Department of the Treasury

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.
So to your its gov/Form000 for instructions and the latest information.

OMB No. 1545-0047

Open to Public

Inte	rnal Reve	enue Serv	vice	Go to v	/ww.irs.gov/F	orm990	for instructions	and	the latest info	rmat	ion.		Inspection
A	For th	e 2021	calen	dar year, or tax year beginnin	g		07/01/2023	1 and	l ending			06	/30/2022
_			C Nar	ne of organization						DI	Employer ider	ntific	ation number
в	Check if a	applicable:	SH	EPHERDS, INC									
	Addr chan		Doir	ng business as							31-1724	63	9
		e change	Nur	nber and street (or P.O. box if mail	is not delivered	to street a	address)	Roo	m/suite	E	Telephone nur	nber	
	Initia	l return	29	9 WASHINGTON AVENU	Е						(203)36	57-	4273
	Final	return/		or town, state or province, countr		eign posta	al code				(
	Ame		BR	IDGEPORT, CT 06604						G	Gross receipts	\$	675,237.
		ication		ne and address of principal officer:		S TAY	TOR			_	a) Is this a grou	ip retu	
	pend	ling	299	WASHINGTON AVENUE			CT 06604			на	subordinates b) Are all subordi		
1	Тах-ех	kempt st		X 501(c)(3) 501(c)	-	nsert no.)	4947(a)(1)) or	527		,		a list. See instructions
÷		ite: ►		PHERDSMENTORS.ORG		isent no.)	4347 (a)(1)	, 01	521	- _{ни}	c) Group exemp		
ĸ				X Corporation Trust	Association	0#	ner 🕨		L Yoar of form		,		e of legal domicile: CT
_	artl	_	imma		ASSOCIATION					ation.	1990	State	
				•		ficentes				7777		T NTNT	
-	1		•	ribe the organization's missior	0		-						ER-CIII
Ű				ICUT YOUTH WITH TH				~					
ŝrna	2			ON, AN ADULT MENTO									
Governance	2			box ▶ if the organization		•	•						1 1 1
				oting members of the governi								3	14
Activities &	4			ndependent voting members of								4	13
viti	5			er of individuals employed in c								5	3
\cti	6			er of volunteers (estimate if nec								6	64
	1 1 0			ted business revenue from Par								7a	
	b	Net u	nrelate	ed business taxable income fro	m Form 990-1	, Part I,	ine 11		<u></u>			7b	
										P	rior Year		Current Year
ne	8			s and grants (Part VIII, line 1h)							611,89		673,135.
Revenue	9			rvice revenue (Part VIII, line 2g)								ONE	
Re	10			income (Part VIII, column (A),							2,43		268.
	11			ue (Part VIII, column (A), lines								ONE	
	12			ie - add lines 8 through 11 (m							614,33		675,237.
	13			similar amounts paid (Part IX, o							252,84		242,345.
	14			d to or for members (Part IX, co								ONE	
ses	15			ner compensation, employee be							213,73	_	196,062.
Expenses	16 a			I fundraising fees (Part IX, colu							NC	ONE	NONE
Ex D	b			ising expenses (Part IX, columi									
	17			ses (Part IX, column (A), lines					· · · ·		145,56		136,258.
	18		•	ses. Add lines 13-17 (must equ		. ,			· · · ·		612,13	34.	574,665.
	19	Rever	nue les	s expenses. Subtract line 18 fr	om line 12						2,19		100,572.
Net Assets or										inning	g of Current Y		End of Year
sset	20			(Part X, line 16)							468,67	′ 5 .	519,213.
A B	21			es (Part X, line 26)							57,12	26.	6,190.
				or fund balances. Subtract line	21 from line 2	0					411,54	9.	513,023.
	art II		0	re Block									
Ur tru	nder pe ie. corre	nalties of ect. and	of perju comple	ry, I declare that I have examined ate. Declaration of preparer (other the	this return, inc nan officer) is ba	luding ac ased on a	companying sched Il information of wh	dules a nich pr	nd statements,	and t knowl	to the best of ledge.	my	knowledge and belief, it is
	-,	,			, ,					-			
Sig	nn)1/	2022
He	-		Signatu	re of officer							Date		
				S TAYLOR			TR	EASU	JRER				
				print name and title		•					· · · ·		DTU
Pai	d	Print/	туре р	reparer's name	Preparer's s	signature			Date		Check		PTIN
	eparer	BRI	AN C	WHITE					10/01/20	22	self-employe	ed	P00058320
	e Only	Firm's	s name	► NANAVATY DAVENE	ORT STUD	LEY W	HITE			Fin	m's EIN 🕨		6-1402749
		Firm's	s addres							Ph	one no.	2	03-426-8500
_				s this return with the prepa			See instructions			• •		• •	
Fo	Pape	rwork	Reduc	tion Act Notice, see the sepa	rate instructio	ns.							Form 990 (2021)

		SHEPHERDS	, INC	31-	1724639
Forr	m 990 (2021)				Page 2
Pa	art III Statement of Pro	gram Service Acco	omplishments		
	Check if Schedule	O contains a resp	oonse or note to any line in this Par	rt III	X
1	Briefly describe the organiz	ation's mission:			
	SEE SCHEDULE O				
2			t program services during the year		
					Yes X No
	If "Yes," describe these new				
			make significant changes in		
	If "Yes," describe these cha		· · · · · · · · · · · · · · · · · · ·	•••••	Yes X No
		•	e accomplishments for each of	its three largest program servi	cas as massurad by
			organizations are required to rep		
		, , , , , ,	ch program service reported.	solt the amount of grante and	
		,,, ,,			
4a	(Code:) (Expe		IB1. including grants of \$	242,345.) (Revenue \$	1,834.)
			-RAISED SUFFICIENT FU		,
			NTS TO ATTEND NON-PUBL		
			TIESPERSEVERED THROU		
			L SHEPHERDS SUCCESSFULI		
			TS GRADUATING, AND MEN		
			ONSIBILIIESINNOVATI		
			, ACADEMIC AND CAREER W		
			,		
4b	(Code:) (Expe	enses \$	including grants of \$) (Revenue \$)
		·		, ``	,
4c	(Code:) (Expe	enses \$	including grants of \$) (Revenue \$)
4d	Other program services (D	escribe on Schedule	e O.)		
	(Expenses \$	including grants	-	e\$)	
4e	Total program service expe		487,481.	,	
JSA	020 1.000				Form 990 (2021)

Part N Checklist of Required Schedules 1 Is the organization described in saction 501(c)(3) or 497(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, Schedule C Conhutors? See instructions. 1 2 Is the organization required to complete Schedule B, Schedule C, Part II. 2 3 X 4 Section 501(c)(3) organization engage in lobbying activities on beals of or in opposition to conduct of the X year? If "Yes," complete Schedule C, Part II. 3 5 Section 501(c)(3) organization in any of ong advisor in that receives membership dues, assessments, or similar amound on 501(c)(4) 501(c)(5), or 501(c)(6)(5), or 501(c)(6)(5), or 501(c)(6)(5), or 501(c)(6), or 5	Form 9	990 (2021)		F	Page 3
1 Is the organization described in section 501(b)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. 1	Part	IV Checklist of Required Schedules			
complete Schedule A. 1 1 x 2 1s the organization engage in direct or indirect political campaign activities on behalf of or in opposition candidates for public officer 11 'Wes' complete Schedule C. Part I. 3 x 4 Section 501(c)(3) organizations. Biol the organization engage in lobying activities, or have a section 501(c)(4). 3 x 5 Is the organization assection 501(c)(4). 501(c)(5), or 501(c)(6) organization inthis receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 99-187. If 'Wes' complete Schedule C, Part II. 5 x 6 Did the organization maintain any doorn adveed funds or any similar funds or accounts for which ohorship were the environment, historic all accosservation easement, including easements to preserve gens paper, the environment, historic lat acress or historical treasures, or other similar asseds? If 'Yes,' complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar asseds? If 'Yes,' complete Schedule D, Part III. 7 X 9 Did the organization, directions of works of art, historical treasures, or other similar asseds? II 'Yes,' complete Schedule D, Part III. 7 X 9 Did the organization feeror an amount for part X, line 12, Irot escrew or custodial account liability, serves a custodian for amounts or taletat dorganization, hold assets in donor-restricted endowments' I				Yes	No
2 is the organization required to complete Schedule 0, Schedule of Contributions? See instructions 2 X 3 Did the organization required to complete Schedule C, Part I, 3 X 4 Section SO1(c)(3) organization and page in lobbying activities, or have a section SO1(c)(4), SO1(c)(4), SO1(c)(5) organization repair the receives membership dues, assessments, or similar annuls as defined fined function of means the organization maintain any donor advised funds or any similar funds or accounts /// 4 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts /// 6 X 7 Did the organization meintain any donor advised funds or any similar funds or accounts /// 6 X 7 Did the organization meintain any donor advised funds or any similar funds or accounts /// 6 X 8 Did the organization maintain ollections of works of at, historical trassures, or other similar assets // */ss, complete Schedule D, Part // 7 X 9 Did the organization repaintaion repeates Schedule D, Part // 8 X 10 Did the organization repaintaion repeate Schedule D, Part // 9 X 10 Did the organization report an amount for longanization, schedule account liability, serve asa custodofan for amount for longanization, schedule D, Part	1			37	
 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yess" complete Schedule C, Part II. 4 Section 501(c)(3) organizations. Bid the organization angage in lobbying activities, or have a section 501(n) election in effect during the tax year? II "Yess" complete Schedule C, Part II. 5 Did the organization ansutes adelined in Rev. Proc. 98-182 // Yess" complete Schedule C, Part III. 6 X 7 Did the organization maintain any doora dvideod funds or any similar funds or accounts for which denores have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which denores have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which denores have the environment, historicit actureusce? If Yess' complete Schedule D, Part II. 7 Uid the organization maintain collections of works of art, historical treasures, or other similar assets? If Yess' complete Schedule D, Part III. 8 Did the organization maintain collections of works of art, historical treasures, or other similar reserves of a space, the environment, historicit and rass, or historical treasures, or other similar assets? If Yess' complete Schedule D, Part IV. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes, complete Schedule D, Part VI. 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes, complete Schedule D, Part VI. 11 Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If Yess, complete Schedule D, Part X. 11 Did the organization report an amount for other assets for the tax year? II Yess'. 22 X 23 Is the organization neutration spatients. Independent audited financia	2				
candidates for public office? If "Nes" complete Schedule C, Part I. 3 x Section Stol(c)(3) organization, again in lobying activities, or have a section Stol (r)(i) 4 x Is the organization assessments, or similar amounts as defined in Rev. Proc. 98-197 If "Yes," complete Schedule C, Part II. 5 x D dth droganization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If " 5 x D dth droganization reserve or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic istructures? If "Yes," complete Schedule D, Part II. 7 x D dth droganization reserve an amount in Part X, line 21, for serrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ior provide cridit counseling, debt management, credit repair, or debt regonization reports of "Yes," complete Schedule D, Part IV 9 x 10 the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 10 x 11 the organization report an amount for investments-oher securities in Part X, line 10? If "Yes," complete Schedule D, Part IV 10 x 12 Lin			2	Δ	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h), election in effect during the tax year // '''xex,' complete Schedule C, Part II. 4 x 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If 'Yes,'' complete Schedule C, Part II. 5 x 6 X Did the organization maintain any diora or advised funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? // f ''ves,'' complete Schedule D, Part I. 7 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // 'Yes,'' 8 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts no listed in Part X, or provide cordit counseling, debt management, credit repair, or debt negonization, directly or through a related organization, hold assets in donorrestricted endowments 7 10 X 10 Line organization report an amount for line stimetrs-other securities in Part X, line 10? If ''yes,'' complete Schedule D, Part V 10 X 11 the organization report an amount for investments-other securities in Part X, line 10? If ''yes,'' complete Schedule D, Part V 10 X 11	5		3		x
 election in effect during the tax year? If "Yes," complete Schedule C, Part II. s the organization ascentro 501(c)(d), 501(c)(d), 501(c)(d) conguitation that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III. D d the organization mantain any donor advised funds or any similar funds or accounts for which donors have the right to provide very or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. D id the organization relation collections of works of art. historical treasures, or outsrollal account liability, serve as a custodian for amounts not listed in Part X, ine 11, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine rollad organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part IV. D id the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. D id the organization report an amount for investments-other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI. D id the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI. D id the organization report an amount for investments-other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI. D id the organization report an amount for investments-other securities in Part X, line 10, hat X, and XI is optional to regarization matter or to the rassist in Part X. line 15? If Yes, "complete Schedule D, Part X. D id the organization report an amount for therestments for the	4		–		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessment, or similar amounts as defined in Rev. Proc. 981-91 // Yes." complete Schedule C, Part II. 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If 'Yes." completes Schedule D, Part II. 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical store stores of a constraint assets. 7 X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on listed in Part X, or provide credit counseling, debt magagement, credit repair, or debt negonization, firetory or through related organization, hold assets in donor-restricted endowments? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes," complete Schedule D, Part V. 10 X 11 the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes," complete Schedule D, Part V. 114 X 12 X 10 X 114 X 13 the organization report an amount for land, buildings, and equipment in Part X, line 1			4		Х
 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I,, Take 10 the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. ine 12, the complete Schedule D, Part IV. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 11 Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. 11 Did the organization report an amount for investments-other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. 11 Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. 12 Did the organization separate. Independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. 12 Did	5				
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical masses, or historic structures? If 'Yes,' complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II. 7 X 9 Did the organization amount in Part X, line 21, for escrow or custodial account liability, serve as custodian for amounts not listed in Part X: or provide credit counseling, debt management, credit repair, or debt neganization, antexety to any of the following questions is 'Yes,' then complete Schedule D, Part VI. 9 X. 10 Did the organization amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. 10 X 11 M X 11 X. 11 Did the organization report an amount for investments-program related in Part X, line 12. that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X. 11 X. 11 Did the organization report an amount for lawestments-program related in Part X, line 13. that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X. 11 X.			5		Х
*Yes," complete Schedule D, Part I, 6 x 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes," complete Schedule D, Part II, 7 X 8 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes," complete Schedule D, Part II, 7 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, that is Structure Part V, 8 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If Yes," complete Schedule D, Part V, 10 X 11 the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If Yes," complete Schedule D, Part VII. 111b X 11 Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If Yes," complete Schedule D, Part VII. 111b X 11 X Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets report	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic structures? If "Yes," complete Schedule D, Part II,		have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 8 9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, ince 12, manual treparization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V. 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. 10 X 11 If the organization report an amount for investments-other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 111 X 11 Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 111 X 11 Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 111 X 12 Did the organization included in consolidated, independent audited financial statements for the tax yari induite a foothore that addresset the or			6		Х
 B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. B Did the organization amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negonization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V D Did the organization swave to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VII, VII, XI, X, as applicable. a Did the organization amount for livestments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI. b Did the organization report an amount for threstments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI. c Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in namount for threastments for the tax year? If "Yes," complete Schedule D, Part X. d Did the organization is eparate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. d Did the organization association answered "No" to ine T2a, then completing Schedule D, Part X and XII soptional torganization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule D, Part X and XI. d Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule D, Part X and XI. d Did the organization report on Part IX, column (A), line	7				
complete Schedule D, Part II 8 x 9 Did the organization report an amount in Part X, line 21, lore scrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments: or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11a X 11 Did the organization report an amount for other tassets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11a X 11 Did the organization isubility for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 114 X 12 Did the organization isubility for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X and XII 114 X 11 Yes, " and YIII X 114 X </td <td></td> <td></td> <td>7</td> <td></td> <td>X</td>			7		X
9 Did the organization report an amount in Part X, line 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part V,	8				
 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 10 Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, VII, VIII, VIII, X, or X, as applicable. a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. b) Did the organization report an amount for investments-order related in Part X, line 10? If "Yes," complete Schedule D, Part VI. c) Did the organization report an amount for investments-order related in Part X, line 10? If "Yes," complete Schedule D, Part VI. c) Did the organization report an amount for other lassition Part X, line 15? If "Yes," complete Schedule D, Part X. d) Did the organization report an amount for other lassition last period in Part X, line 16? If "Yes," complete Schedule D, Part X. d) Did the organization report an amount for other lassition last period last period in Part X, line 16? If "Yes," complete Schedule D, Part X. d) Did the organization included in consolidated, linancial statements for the tax year? If "Yes," complete Schedule D, Part X. d) Did the organization neover answered "No" to line f2a, then completing Schedule D, Part X and XII is optional functional statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional functional statements or than \$10,000 from grantmaking, fundraising, burstees, investment, and program service activities outside the United States?, an agregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule D, Part X and XII is optional functional statements for the assistance to or			8		X
debt negotiation services? If "Yes," complete Schedule D, Part V 9 x 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If Yes," complete Schedule D, Part V 10 x 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 11a x 12 Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b x 13 Did the organization report an amount for therese consolidated in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11c x 14 Did the organization report an amount for other lassets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11c x 111 X Did the organization report an amount for there lassets in Part X, line 25' If "Yes," complete Schedule D, Part X 11c x 112 Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11d x 113 Is the organization maintain an office, employees, or agents oustoide of the United States? 1	9				
 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes," complete Schedule D, Part V. 11 If the organization asswer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VII. b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. c Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. c Did the organization report an amount for ther sastest in Part X, line 13, this tis 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X X. c Did the organization included in consolidated financial statements for the tax year? If 'Yes,' complete Schedule D, Part X X and XII is optional 11 It X 12 bid the organization a school described in section 170(b(1)(A(M))? If 'Yes,' complete Schedule D, Part X and XI is optional 13 Is the organization a school described in section 170(b(1)(A(M))? If 'Yes,' complete Schedule E, Parts X and XI. b Did the organization report a total of more than \$15,000 of grants or other assistance to or for forigin individuals? If 'Yes,' complete Schedule E, Parts I and IX. 14 X 15 Zit Ho organization? If 'Yes,' complete Schedule G, Part X I and XI. 16 Did the organization report more than \$					
or in quasi endowments? If "Yes," complete Schedule D, Part V. 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 11a X 12 Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b X 13 Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b X 14 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11c X 14 Did the organization report an amount for other labilities in Part X, line 25' If "Yes," complete Schedule D, Part X 11c X 15 Did the organization obtain separate. Independent audited financial statements for the tax yea? If "Yes," complete Schedule D, Part X 11t X 14 Did the organization included in consolidated, independent audited financial statements for the tax yea? If "Yes," complete Schedule D, Part X 11t X 14 Did the organization included in consolidated, independent audited financial statements for the tax yea? If "Yes," complete Schedule F, Part	10	-	9		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X, as applicable. Image: Complete Schedule D, Part VI. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 11a X b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b X c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d X e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X 11d X 11d X 11d X 12a Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E, Part A and XII is optional 11d X 13a X 11d X 11d X	10		10	v	
VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization report an amount for investments for the tax year inclued a footnote that addresses the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional 13 It the organization neburd an onsolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule E, Part X and XII is optional 14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X	11		10	Λ	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a x b Did the organization report an amount for investments-chter securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 11b x c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 11c x d Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11c x e Did the organization separate in consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11f x 111 x 11d x 11d x 112 x 11d x 11d x 113 x 11d x 11d x 11d x 114 x 11d x </td <td></td> <td></td> <td></td> <td></td> <td></td>					
complete Schedule D, Part VI 11a X b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b X c Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11c X e Did the organization report an amount for other assets in Part X, line 25? If "%s," complete Schedule D, Part X 11d X f Did the organization separate or consolidated financial statements for the tax year? If "%s," and if the organization answered "No" to line 12a, then completing Schedule D, Part X and XII is optional 11f X 12a X 12a X 12a X b Did the organization maintain an office, employees, or agenese of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States? 14a X 14b X 16 X 16 X 15 Did the organization maintain an office, employees, or agenese of more than \$10,000 from grantmaking, fundraising, business, investment, and pr	а				
b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b x c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 11c x d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. 11c x e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d x f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e x f Did the organization isolatian separate, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule D, Part X 12a x 13 Is the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign individuals? If "Yes," complete Schedule F, Parts I and IV 14a x 14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for orgon individuals? If "Yes," complete Schedule F, Part	-		11a		х
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11b X c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 11c X e Did the organization's separate or consolidated financial statements for the tax year include a footnot that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X	b				
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's iability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization answerd "No" to line 12a, then completing Schedule D, Part X and XII is optional 11g X 13 Is the organization maintain an office, employees, or agents outside of the United States? 11a X 14a Did the organization neport on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign invistmement atol at 000 or more? If "Yes," complete Schedule F, Parts II and IV 14b X 15 Did the organization report atol al of more than \$15,000 of grants or other assistance to or for oreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 X 16 X 17 X 17 X 18 (He			11b		Х
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII. 12a X b Was the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional statements for the investing and if the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional fundraising, business, investment, and program service activities outside of the United States, report on grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign organization report on Part IX, column (A), line 3, more than \$5,000 of garns or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 14b X 16 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part XI, column (A), lines 6 and 11e? If "Yes," complete Schedule F, Parts III and IV 16 X 17 X 16	С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization batin separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X! and XII. 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts X! and XII is optional tax 12b X 13 Is the organization maintain an office, employees, or agents outside of the United States? 14a X 14 Did the organization nevestment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for oreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 16 Did the organization report atol of more than \$15,000 of expenses for professional fundraising services on Part VII, lines 6 and 11e? If "Yes," complete		of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization shall billity for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII. 12a X 12 b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12a X 13 Is the organization maintain an office, employees, or agents outside the United States? 13 X 14a Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for roganization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 14b X 14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for reign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 X <t< td=""><td></td><td>reported in Part X, line 16? If "Yes," complete Schedule D, Part IX</td><td>11d</td><td></td><td>Х</td></t<>		reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			11e		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12a X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 13 X 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 16 X 17 Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, line 92? If "Yes," complete Schedule G, Part II 18 X 18 Did the organization report more than \$15,000 of grass income from gaming activities o	f				
Schedule D, Parts XI and XII. 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 14a 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E. 13 X 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV 16 X 17 Did the organization report more than \$15,000 otal of fundraising event gross income and contributions on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. 18 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X			11f	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E,	12 a				
 "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States? Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 of gross income rom gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b 			12a	X	
 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	b	-	4.04		37
14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization report more than \$15,000 of grasts or other assistance to this return? 20a <	12				
 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV					
fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 18 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20 Did the organization report more than \$15,000 of grasts or other assistance to this return? 20a 21 Did the organization attach a copy of its audited financial statements to this return? 20b			140		
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization of the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 19 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization organization attach a copy of its audited financial statements to this return? 20a X 20a </td <td></td> <td></td> <td></td> <td></td> <td></td>					
 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>			14b		Х
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a Did the organization report more than \$15,000 of grasts or other assistance to any domestic organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization organiz	15	-			
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 18 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization report more than \$15,000 of grants or other assistance to any domestic organization or 20a X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0			15		Х
 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0		assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0			17		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0	18				
If "Yes," complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0			18		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 0	19				
bIf "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?20b21Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or0	~ ~				
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					X
			ZUD		
	21		21		x

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1.	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b NONE			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Part IV Checklist of Required Schedules (continued)

Form 990 (2021)

Form	990 (2021)		F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		L
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		L
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		L
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

Form 9	00 (2021) SHEPHERDS, INC 31-17	24639		Page 6
Part	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b bel	w, and	for a	n "No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule			tions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		Х
Sect	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	4		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wit	1		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoir	t 7a		x
	one or more members of the governing body?			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body?	, 7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken durin			
0	the year by the following:	1		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached a	t		
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	1	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	12a	x	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13			
b	rise to conflicts?	້ 12b	x	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes			
•	describe on Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval b	y		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate it participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard th			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			1
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright <u>CT</u> ,			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 99)-T (sec	tion 5	501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O)			. /
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflic	of inte	rest r	oolicy.
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization and the person and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person who possesses the organization's books and reconstruction and the person and the pers	ords 🕨		

Form 990 (20)21)		SHEE	PHERDS, IN	IC					3	1-172	24639	F	Page 7
Part VII	Compensatio Independent			Directors,	Truste	ees, K	ey Employee	es, Hig	hest C	ompen	sated	Employ	yees,	and
	Check if Sched			response or n	ote to a	ny line in	this Part VII							
Section A	. Officers, Dire	ectors	, Trustees	, Key Emplo	yees, a	and Hig	hest Compen	sated E	mploye	es				
	ete this table fo on's tax year.	or all	persons re	quired to be	listed.	Report	compensation	for the	calenda	ar year e	ending	with or	withir	n the

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	Pos heck ss pe	erson	e than c is both enr/trust Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
	40.00									
(1) DANIEL MCAULIFFE	40.00	-			v			100 000	NONE	NONE
EXECUTIVE DIRECTOR (2) BARNET PHILLIPS IV ESO	NONE 1.00				X			108,000.	NONE	NONE
VICE-CHAIR & CO-FOUNDING DIR.	NONE	x		х				NONE	NONE	NONE
(3) CARRIE SINDELAR	1.00	Λ						NONE	INCINE	NONE
DIRECTOR	NONE	x						NONE	NONE	NONE
(4) FREDERICK MCMULLEN	1.00									
DIRECTOR	NONE	х						NONE	NONE	NONE
(5) GREG DILLON	1.00									
DIRECTOR	NONE	x						NONE	NONE	NONE
(6) HUGH MCCRORY	1.00									
SECRETARY	NONE	Х		Х				NONE	NONE	NONE
(7) LISY CURRIER MARTINEZ	1.00									
CHAIR	NONE	Х		Х				NONE	NONE	NONE
(8) LOUIS W. TAYLOR	1.00	-								
TREASURER	NONE	Х		Х				NONE	NONE	NONE
(9) THOMAS WYNNE	1.00	-								
DIRECTOR	NONE	Х						NONE	NONE	NONE
(10) TIMOTHY J. STUART	1.00	-								
DIRECTOR	NONE	X						NONE	NONE	NONE
(11) JANE ALBANO PURCELL	1.00	-								
DIRECTOR	NONE	X						NONE	NONE	NONE
(12) JAMES O'NEIL	1.00	-								
DIRECTOR	NONE	X						NONE	NONE	NONE
(13) SARA TIEKE	1.00									
DIRECTOR	NONE 1 0.0	X						NONE	NONE	NONE
(14) GLENN XAVIER	1.00	37								
DIRECTOR	NONE	Х						NONE	NONE	

_	n 990 (2021) Int VII Section A. Officers, Directors, Tru	ustees. Ke	v Em	olar	ove	es.	and H	lial	hest Compensat	ed Emplo	vees (c	ontinue		Page 8
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle	Pos heck ss pe	erson	e than o is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensati relate organiza (W-2/1099	on from ed tions	an com fr org an	(F) stimated nount of other pensatio om the anization d related anization	f on in d
			-											
			-											
			-											
			-											
			-											
			-											
			-											
	Sub-total								108,000.		NONE			NONE
	• Total from continuation sheets to Part VII, S	ection A	• • •	• •	• •	• •	• • •		NONE		NONE			NONE
	Total (add lines 1b and 1c)	=							108,000.		NONE		J	NONE
2	Total number of individuals (including but not reportable compensation from the organization		hose	liste	d al	bove	e) who 1	o re	ceived more than	\$100,000	of			
3	Did the organization list any former office employee on line 1a? If "Yes," complete Sched											3	Yes	No X
4	For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15	60,0	00?	p If	"Yes	s," (complete Schedu	le J for	such	4		x
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	sati	on f	from	n any	uni	related organization	on or indiv	idual	5		X
Se	ction B. Independent Contractors												· I	
1	Complete this table for your five highest com compensation from the organization. Report of year.													
	(A) Name and business add	lress							(B) Description of se	rvices	C	(C) ompens		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE NONE

	t VIII	Statement of Revenue Check if Schedule O contains a respor	se or note to any	v line in this Part W	/111		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under sections 512-51
lts	1a	Federated campaigns 1a					
<u>ק</u> ן	b	Membership dues					
Ĕ	с	Fundraising events					
and Other Similar Amounts	d	Related organizations					
	е	Government grants (contributions) 1e	42,174.				
5	f	All other contributions, gifts, grants,					
e		and similar amounts not included above 1f	630,961.				
ธ	g	Noncash contributions included in					
<u>p</u>	•	lines 1a-1f	\$ 45,767.				
a	h	Total. Add lines 1a-1f		673,135.			
			Business Code				
	2a	PROGRAM FEES	900099	1,834.	1,834.		
Kevenue	24						
ğ	b						
Š	c						
¥	d						
	е						
	f	All other program service revenue		1.024			
+	g	Total. Add lines 2a-2f		1,834.			
	3	Investment income (including dividends,					
		other similar amounts)		268.			20
	4	Income from investment of tax-exempt bond		NONE			
	5	Royalties		NONE			-
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	с	Rental income or (loss) 6c NONE	NONE				
	d	Net rental income or (loss)	<u></u> ▶	NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
,	b	Less: cost or other basis					
		and sales expenses 7b					
3	с	Gain or (loss) 7c					
	d	Net gain or (loss)	►	NONE			
	-						
5	8a	Gross income from fundraising					
		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18	NONE				
	b	Less: direct expenses	NONE				
	с	Net income or (loss) from fundraising events	· · · · · · •	NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	С	Net income or (loss) from gaming activities.	<u></u> ▶	NONE			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	NONE				
	b	Less: cost of goods sold	NONE				
	c	Net income or (loss) from sales of inventory		NONE			
T			Business Code				
Ð	11a						
- 1							
۲,	b						
luent	~		1				
Kevenue	c d						
кечепц	d	All other revenue		NONE			

Form 990 (2021)

SHEPHERDS, INC

31-1724639

Page **9**

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	242,345.	242,345.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	108,000.	77,760.	8,640.	21,600.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	NONE	FC 147	400	16 401
	Other salaries and wages	72,956.	56,147.	408.	16,401.
8	Pension plan accruals and contributions (include	NONE			
	section 401(k) and 403(b) employer contributions)	NTONT			
	Other employee benefits	NONE	11 170	765	2 170
10		15,106.	11,179.	755.	3,172.
11		NONTE			
	Management	NONE			
	Legal	NONE 6,600.		6,600.	
	Accounting	NONE		0,000.	
	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17.	NONE			
	Investment management fees	INCINE			
y	Other. (If line 11g amount exceeds 10% of line 25, column	32,754.	19,562.	6,019.	7,173.
12	(A), amount, list line 11g expenses on Schedule O.) Advertising and promotion	NONE	19,302.	0,019.	
13	Office expenses	16,088.	10,646.	1,757.	3,685.
14	Information technology	NONE			5,000
15	Royalties	NONE			
16	Occupancy	3,600.	2,880.	360.	360.
17	Travel	NONE	,		
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	NONE			
19	Conferences, conventions, and meetings	NONE			
20	Interest	NONE			
21	Payments to affiliates	NONE			
22	Depreciation, depletion, and amortization	NONE			
23	Insurance	9,635.		9,635.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	PROGRAM DEVELOPMENT	35,486.	34,867.	619.	
b	COLLEGE PREP & WORKSHOPS	25,253.	25,253.		
c	STUDENT SERVICES	6,842.	6,842.		
d	I [
	All other expenses				
_	Total functional expenses. Add lines 1 through 24e	574,665.	487,481.	34,793.	52,391.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
_	following SOP 98-2 (ASC 958-720)				
		· · · · ·			E 000 (0004)

	(2021) SHEPHERDS, INC		31-	1724639 Bogo 11
orm 990 Part X				Page 11
ran A	Check if Schedule O contains a response or note to any line in this Parameters	art V		x
			•••	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	390,895.	1	458,559
2	Savings and temporary cash investments.	NONE		NON
3	Pledges and grants receivable, net	22,000.	3	11,000
4	Accounts receivable, net	NONE	-	NON
5	Loans and other receivables from any current or former officer, director,			1.01
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	NONE	5	NON
6	Loans and other receivables from other disqualified persons (as defined		Ū	1.011
ľ	under section $4958(f)(1)$, and persons described in section $4958(c)(3)(B)$.	NONE	6	NON
<u>ຍ</u> 7	Notes and loans receivable, net	NONE		NON
Assets	Inventories for sale or use	NONE		NON
A A	Prepaid expenses and deferred charges SEE SCHEDULE O	NONE	-	3,000
-	Land, buildings, and equipment: cost or other			37000
	basis. Complete Part VI of Schedule D 10a			
b	Less: accumulated depreciation	NONE	10c	
11	Investments - publicly traded securities	55,780.		46,654
12	Investments - other securities. See Part IV, line 11	NONE		NON
13	Investments - program-related. See Part IV, line 11	NONE		NON
14	Intangible assets	NONE		NON
15	Other assets. See Part IV, line 11	NONE		NON
16	Total assets. Add lines 1 through 15 (must equal line 33)	468,675.	-	519,213
17	Accounts payable and accrued expenses	14,952.		6,190
18	Grants payable	NONE		NON
19	Deferred revenue	NONE		NON
20	Tax-exempt bond liabilities	NONE	-	NON
21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	-	NON
າ 22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	NONE	22	NON
23	Secured mortgages and notes payable to unrelated third parties	NONE	23	NON
24	Unsecured notes and loans payable to unrelated third parties	42,174.	24	NON
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	NONE	25	NON
26	Total liabilities. Add lines 17 through 25	57,126.	26	6,190
2	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	302,129.	27	433,603
28	Net assets with donor restrictions.	109,420.	28	79,420
	Organizations that do not follow FASB ASC 958, check here ►	105,120.	20	79,420
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets of Fund Balances 5 2 1 0 6 7 8 2 7 1 1 0 6 9 7 8 2	Retained earnings, endowment, accumulated income, or other funds		31	
10 32	Total net assets or fund balances	411,549.	32	513,023
2 33	Total liabilities and net assets/fund balances	468,675.	33	519,213. Form 990 (2021)

Form **990** (2021)

	SHEPHERDS, INC	81-17	24639			
Form 9	90 (2021)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)		1	6	75,	237.
2	Total expenses (must equal Part IX, column (A), line 25)		2	5	74,	<u>665</u> .
3	Revenue less expenses. Subtract line 2 from line 1		3	1	00,	<u>572</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		4	4	11,	<u>549</u> .
5	Net unrealized gains (losses) on investments		5			<u>902</u> .
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Prior period adjustments		8			
9	Other changes in net assets or fund balances (explain on Schedule O)		9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part >	(, line				
	32, column (B))		10	5	13,	<u>023</u> .
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					Χ
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "C	ther," ex	plain on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent account			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year w	vere con	npiled or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis	asis				
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year w	ere audi	ted on a			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibilit	-	-			
	the audit, review, or compilation of its financial statements and selection of an independent a			2c		
	If the organization changed either its oversight process or selection process during the tax	year, e	cplain on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits a	as set for	th in the			
	Single Audit Act and OMB Circular A-133?		• • • • •	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did		0	0		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo	such au	laits	3b	000	

SCHE	DUL	E A
(Form	990)	

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 Open to Public

Department of the Treasur	y
Internal Revenue Service	

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

Inter	nal Re	evenue Service		Go to www.irs.go	ov/Form990 for instruct	ons and	the latest	information.	Inspection
Nam	e of ti	he organization						Employer identif	ication number
-		ERDS, INC							724639
Ра	rt I	Reason fo	r Public Cha	rity Status. (All o	organizations must	complet	te this pa	art.) See instruction	S
The	orga				is: (For lines 1 through			,	
1					tion of churches desc			70(b)(1)(A)(i).	
2		A school desc	cribed in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)		
3		A hospital or	a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical res	earch organiz	zation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)(iii). Enter the
		hospital's nan	ne, city, and st	tate:					
5		An organizati	on operated f	for the benefit of	a college or universit	y owned	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, sta	te, or local go	overnment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	X	An organizati	on that norma	ally receives a sub	ostantial part of its su	pport fro	om a gov	vernmental unit or fr	om the general public
		described in s	section 170(b)	(1)(A)(vi). (Compl	ete Part II.)				
8		A community	trust describe	ed in section 170(b	b)(1)(A)(vi). (Complete	e Part II.)			
9		An agricultura	al research or	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	in conjunction with a	land-grant college
		or university of	or a non-land-	grant college of ag	griculture (see instruct	tions). Ei	nter the r	name, city, and state c	of the college or
		university:							
10		receipts from support from acquired by the	activities rela gross investm ne organizatio	ited to its exempt f nent income and up n after June 30, 19	pre than 331/3 % of its functions, subject to c nrelated business tax 975. See section 509	ertain ex able inco (a)(2). (0	ceptions ome (less Complete	s; and (2) no more tha s section 511 tax) from Part III.)	n 331/3 % of its
11		•	•		usively to test for publi				
12		0	0	•		•			rry out the purposes of
									ction 509(a)(3). Check
			-		es the type of suppor			-	-
а		••			, supervised, or contr	•		• • • • •	
		the support	ed organizatio	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	ees of the
			-	-	e Part IV, Sections A				
b		_ Type II. A s	upporting org	anization supervise	ed or controlled in co	nnection	n with its	supported organizat	ion(s), by having
		control or m	nanagement o	of the supporting o	organization vested in	the sam	e person	is that control or mai	hage the supported
		-			, Sections A and C.				
С		••	-		ng organization opera				Illy integrated with,
	_		-		ns). You must comple				
d			-		porting organization of	-			
			•	•	nization generally mus	•		•	d an attentiveness
					omplete Part IV, Sect				
е			-		a written determinatio				II, Type III
	_				ionally integrated sup		organizat	ion.	[]
f				-				• • • • • • • • • • • • • •	•••••
g					orted organization(s).	<i>a</i>			
	(I) N	ame of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
					above (see instructions))	docu	ment?	instructions)	instructions)
						Yes	No		
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	al								

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	576,507.	1,033,503.	457,449.	570,638.	630,961.	3,269,058.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	576,507.	1,033,503.	457,449.	570,638.	630,961.	3,269,058.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) SEE_SUPP_PAG	3					NONE
6	Public support. Subtract line 5 from line 4						3,269,058.
	tion B. Total Support						3720370301
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	576,507.	1,033,503.	457,449.	570,638.	630,961.	3,269,058.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	314.	308.	1.	2,431.	268.	3,322.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE SUPP PAGE	325.	24,500.				24,825.
11	Total support. Add lines 7 through 10						3,297,205.
12	Gross receipts from related activities, etc. (s	ee instructions)				12	24,825.
13	First 5 years. If the Form 990 is for organization, check this box and stop here	the organizatio	on's first, second	, third, fourth,	or fifth tax yea		
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2021 (lin	ne 6, column (f)	, divided by line	11, column (f))		14	99.15 %
15	Public support percentage from 2020					15	99.13 %
16a	331/3% support test - 2021. If the org	ganization did n	ot check the bo	x on line 13, ar	nd line 14 is 33	1/3 % or more, cl	
	box and stop here. The organization qu			-			
b	331/3% support test - 2020. If the org	anization did no	ot check a box o	n line 13 or 16	a, and line 15 i	s 331/3 % or moi	re, check
	this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatio	n		▶∟
17a	10%-facts-and-circumstances test - 2	-					
	10% or more, and if the organization					-	-
	Part VI how the organization meets	the facts-and-c	ircumstances te	st. The organiz	ation qualifies	as a publicly su	upported
	organization						
b	10%-facts-and-circumstances test - 2	-	•				
	15 is 10% or more, and if the organiz					-	-
	in Part VI how the organization meets			-	-		
	organization						
18	Private foundation. If the organizatio						
	instructions						🕨 📖

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
•	line 6.)						
Sec	tion B. Total Support						1
	ndar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets						
13	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,						
13	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	on's first secon	d third fourth	or fifth tax v	ar as a section	501(c)(3)
. +	organization, check this box and stop here .	-					
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2021 (line 8,		•	mn (f))		15	%
16	Public support percentage from 2020 Sche					16	%
	tion D. Computation of Investment					10	/0
17	Investment income percentage for 2021 (lin			13 column (f))		17	%
18	Investment income percentage for 2021 (in Investment income percentage from 2020 S					18	<u> </u>
	331/3% support tests - 2021. If the or						
130	17 is not more than 331/3%, check this						
h	331/3% support tests - 2020. If the orga	-	-	•			
U U	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization of		•	• •	. ,		
				.,,	,		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990) 2021

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

Section B. Type I Supporting Organizations

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

			Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's</i>			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).	
а	The organization satisfied the Activities Test. Complete line 2 below.		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru-	ctions,).
•	Activities Test. Answer lines to and the below	Yes	No

2	Activities Test. Answer lines za and zb below.		
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If</i> "Yes," <i>explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3h	

11c

2

1.4

...

Yes No

SHEPHERDS , INC schedule A (Form 990) 2021		51-	1724639 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga 1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions All other Type III per functionally integrated supporting errors	ng trust on	Nov. 20, 1970 (<i>expla</i>	
instructions. All other Type III non-functionally integrated supporting organ Section A - Adjusted Net Income	lizations n	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization 7 (see instructions).

Schedule A (Form 990) 2021

Schedu	le A (Form 990) 2021				Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	kempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	ed			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	s	(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
_j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h			_	
0	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
'	and 4c.				
8	Breakdown of line 7:				
 a	Excess from 2017				
 b	Excess from 2018				
<u>с</u>	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A (Form 990 or 990-EZ) 2021

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A PART II, LINE 10 EXPLANATION FOR OTHER INCOME

FUNDRAISING INCOME

2017 AMOUNT: \$ 325

2018 AMOUNT: \$24,500

SCHEE	DULE	D
(Form	990)	

ortmont of the Tree

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

► Attach to Form 990.

2 Open to Public

OMB No. 1545-0047

	nal Revenue Service	Go to www.irs.gov	/Form990 for instructions and the latest	information.	Inspection
Name	e of the organization			Employer i	dentification number
SHE	EPHERDS, INC			31-	1724639
Pa	rt I Organiza	ations Maintaining Donor Adv	ised Funds or Other Similar Fund	ds or Accounts	
	Complete	e if the organization answered	"Yes" on Form 990, Part IV, line 6	6.	
			(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at e	end of year			
2		of contributions to (during year)			
3		of grants from (during year)			
4	Aggregate value	at end of year			
5		-	advisors in writing that the assets	held in donor ad	dvised
	funds are the orga	anization's property, subject to the	e organization's exclusive legal contro	ol?	Yes No
6	Did the organizat	ion inform all grantees, donors, a	and donor advisors in writing that gr	ant funds can be	used
	only for charitable	e purposes and not for the bene	fit of the donor or donor advisor, or	for any other pu	rpose
	conferring impern	nissible private benefit?			Yes No
Pa		ation Easements.			
	Complete	e if the organization answered	"Yes" on Form 990, Part IV, line 7	7.	
1	Purpose(s) of cor	nservation easements held by the	organization (check all that apply).		
	Preservatio	on of land for public use (for example	, recreation or education)	ation of a historic	ally important land area
	Protection	of natural habitat	Preserva	ation of a certifie	d historic structure
	Preservatio	on of open space			
2	Complete lines 2a	a through 2d if the organization h	eld a qualified conservation contribut	ion in the form of	a conservation
	easement on the	last day of the tax year.		Held	at the End of the Tax Year
а	Total number of c	conservation easements		2a	
b	Total acreage res	stricted by conservation easements	5	2b	
С	Number of conse	rvation easements on a certified	historic structure included in (a)	2c	
d	Number of conse	ervation easements included in (o	c) acquired after 7/25/06, and not or	na	
	historic structure	listed in the National Register		2d	
3	Number of conse	ervation easements modified, tra	nsferred, released, extinguished, or	terminated by th	ne organization during th
	tax year 🕨				
4			rvation easement is located ►		
5	-		parding the periodic monitoring, in		-
			sements it holds?		
6	Staff and volunteer	r hours devoted to monitoring, insp	ecting, handling of violations, and enfo	orcing conservation	easements during the yea
	▶				
7	Amount of expense	ses incurred in monitoring, inspec	ting, handling of violations, and enforc	cing conservation	easements during the yea
	▶\$				
B		-	2(d) above satisfy the requirements of)(B)(i)
					Ves L No
9		•	conservation easements in its revenu	•	
			of the footnote to the organization's f	inancial statemen	ts that describes the
Do		counting for conservation easeme	of Art, Historical Treasures, or	Other Similar A	scots
Га			"Yes" on Form 990, Part IV, line 8		35615.
	· · · ·				
1a	of art, historical	treasures, or other similar asse	ASB ASC 958, not to report in its re ts held for public exhibition, educa to its financial statements that descri	ation, or researcl	t and balance sheet work n in furtherance of publ
b	art, historical trea		ASB ASC 958, to report in its rever Id for public exhibition, education, on ms:		
	•	.			▶ \$
	.,				
2	• •		rt, historical treasures, or other sin		
~	-		ASB ASC 958 relating to these items		manua yan, provide li
~		s required to be reported under F		•	► ¢

a	Revenue included on Form 990, Fait vill, line i	
b	Assets included in Form 990, Part X	

\$ ►

Schee		PHERDS, INC								724639		2
Pa	rt III Organizations Maintainin	-									,	
3	Using the organization's acquisition		other record	ds, check	k any o	of the	follow	ing that n	nake sigr	nificant u	se of it	s
	collection items (check all that apply	y):		,								
а	Public exhibition		d	1	or excha	ange	program	n				
b	Scholarly research		e	Other								_
С	Preservation for future gener											
4	Provide a description of the organ	ization's collection	ns and expla	in how t	hey fui	rther	the org	ganization'	s exemp	t purpose	e in Pa	rt
_	XIII.											
5	During the year, did the organizatio								_		— .	-
	assets to be sold to raise funds rath		tained as pai	rt of the c	organiza	ation	s collec	ction?		Yes		lo
Ра	rt IV Escrow and Custodial Ar		(- 000 F		line	0					
	Complete if the organiza	lion answered in	es on Form	n 990, F	Part IV,	line	9, 01 10	eponed a	n amour	nt on Fo	m	
4.	990, Part X, line 21.											
Ta	Is the organization an agent, trust			-					ets not	Vee		1
h	included on Form 990, Part X? If "Yes," explain the arrangement in					•••	• • • •	• • • • •	• • • • L	Yes	<u>N</u>	0
a	in res, explain the arrangement in		ipiete trie ioli	owing tat	Jie.				Amount			
с	Beginning balance					10			Amount			
	Additions during the year					1c 1d						
e	Distributions during the year					1e						—
f	Ending balance					1f						
-	Did the organization include an amo						stodial	account lia	bility?	Yes	N	lo
	If "Yes," explain the arrangement in											Ū
	rt V Endowment Funds.					<u></u>	011000			<u></u>		
	Complete if the organiza	tion answered "እ	es" on Forr	n 990, F	Part IV.	line	10.					
		(a) Current year	(b) Prior			o year		(d) Three y	ears back	(e) Four	ears bacl	k
1a	Beginning of year balance	55,780.	5	5,759.		60,3	85.	5	59,519.		64,180.	
b	Contributions											
	Net investment earnings, gains,											
	and losses	38.		272.		6	46.		1,134.		597.	
d	Grants or scholarships	10,000.				5,0	00.				5,000.	
	Other expenditures for facilities											
	and programs											
f	Administrative expenses	229.		251.		2	72.		268.		258.	
g	End of year balance	45,589.	5	5,780.		55,7	59.	6	50,385.		59,519.	
2	Provide the estimated percentage		end balance	e (line 1g,	columr	n (a))	held as	:				
а	Board designated or quasi-endowm		%									
b	Permanent endowment											
С	· · · · · · · · · · · · · · · · · · ·	%										
-	The percentages on lines 2a, 2b, a	•										
3a	Are there endowment funds not in t	he possession of	the organization	tion that	are hel	d and	d admir	nistered for	the		′es No	_
	organization by:											
	(i) Unrelated organizations									3a(i)	X	
L	(ii) Related organizations If "Yes" on line 3a(ii), are the relate									3a(ii) 3b	X	<u> </u>
		0	•							30		—
4 	Describe in Part XIII the intended u rt VI Land, Buildings, and Equ		ation's endov	vment lur	ius.							—
Ιa	Complete if the organiza	tion answered "	Yes" on For	m 990, l	Part IV	, line	11a. S	See Form	990, Pa	art X, line	910.	
	Description of property		or other basis	(b) Cost o	or other ba ther)	asis		cumulated eciation	(d	I) Book valu	le	
1a	Land	· · · ·		0)			dehi	- SIGUOT				
b	Buildings											
c	Leasehold improvements											
d	Equipment.											
	Other											
	Add lines 1a through 1e (Column		rm 990 Part	X colum	n (R) lir	ne 10	<u>c)</u>					-

Schedule D (Form 990) 2021

Part VII Investments - Other Securities.			
Complete if the organization answered		, Part IV, line 11b. See Form 990,	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. Complete if the organization answered	I "Yes" on Form 990	, Part IV, line 11c. See Form 990,	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year marke	t value
(1)			
(2)			
<u>(3)</u>			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. Complete if the organization answered	l "Vos" on Form 000	Part IV line 11d See Form 990	Part X line 15
· · · · · · · · · · · · · · · · · · ·	scription	, Farriv, fille 110. See Form 990;	(b) Book value
	scription		
(1) (2)			
(3)			
(4)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) I	ine 15.)		
Part X Other Liabilities. Complete if the organization answered line 25.	I "Yes" on Form 990	, Part IV, line 11e or 11f. See Form	n 990, Part X,
	tion of liability		(b) Book value
(1) Federal income taxes	,		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Schedu	le D (Form 990) 2021 SHEPHERDS, INC	31-	-1724639 Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	676,139.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	902.
3	Subtract line 2e from line 1	3	675,237.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	675,237.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	574,665.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments 2b		
С	Other losses	1	
d	Other (Describe in Part XIII.) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	574,665.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	1	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)	5	574,665.
Part	XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

PART X LINE 2

THE ORGANIZATON EVALUATES ALL SIGNIFICANT TAX POSITIONS AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. AS OF JUNE 30, 2022, THE ORGANIZATION DOES NOT BELIEVE THAT IT HAS TAKEN ANY POSITIONS THAT WOULD REQUIRE THE RECORDING OF ANY ADDITIONAL TAX LIABILITY NOR DOES IT BELIEVE THAT THERE ARE ANY UNREALIZED TAX BENEFITS THAT WOULD EITHER INCREASE OR DECREASE WITHIN THE NEXT YEAR.

SCHEDULE I (Form 990)Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.							ŀ	OMB No. 1545-0047
								2021
	comp		-	ttach to Form 990		, 1110 21 01 22.		Open to Public
Department of the Treasury Internal Revenue Service		► Go t		/Form990 for the I).		Inspection
Name of the organization			_				Employer identif	ication number
SHEPHERDS, INC							31-17246	39
Part I General I	nformation on Grants and	Assistance	e					
the selection crit	zation maintain records to su teria used to award the grants IV the organization's proced	s or assistanc	e?					
Part II Grants an	nd Other Assistance to De	omestic Org	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered	I "Yes" on Form 990,
Part IV, li	ne 21, for any recipient th	at received	more than \$5	,000. Part II can b	be duplicated if a	additional space is a	needed.	
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistant	
_(1)		-						
(2)		-						
(3)		-						
(4)		-						
(5)								
(6)								
(7)								
(8)								
(9)								
(10)		-						
(11)		-						
(12)		-						
	per of section 501(c)(3) and goer of other organizations list		-					

Schedule I (Form 990) (2021)

SHEPHERDS, INC

31-1724639

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
KOLBE CATHEDRAL HIGH SCHOOL	34	159,695.		FMV	
		10070000			
2 NOTRE DAME HIGH SCHOOL	25	82,650.		FMV	
3					
4					
5					
6					
v					
7					

PART I LINE 2

SHEPHERDS PROVIDES PAYMENTS DIRECTLY TO THE PARTICIPATING HIGH SCHOOLS

AND IS NOTIFIED BY EACH SCHOOL AS TO THE ONGOING ELIGIBILTY OF EACH

STUDENT WHO IS BEING ASSISTED.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

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

2021 Open to Public Inspection

N	ame	of	the	organizat	tion

Employer identification	number
31-1724639	

SHE	SHEPHERDS, INC 31-1724639							
Par	t Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributior amounts reported or Form 990, Part VIII, line				
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		3	45,76	7. FAIR MARE	KET VA	ALUE	6
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶()							
26	Other ▶()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received		anization during the tax y	ear for contributions f	for			
	which the organization completed F	orm 8283,	Part V, Donee Acknowledge	ement	29			
							Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I,	lines 1 through			
	28, that it must hold for at least th	hree years f	rom the date of the initial	contribution, and which	ch isn't required			
	to be used for exempt purposes for	the entire h	olding period?			30a		Х
b	If "Yes," describe the arrangement i							
31	Does the organization have a	gift accep	tance policy that require	es the review of a	ny nonstandard			
	contributions?					31	Х	
32a	Does the organization hire or use							
	contributions?	-	-			32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an describe in Part II	amount in c	column (c) for a type of pro	perty for which colum	n (a) is checked,			

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

JSA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

SHEPHERDS, INC

Employer identification number 31-1724639

FORM 990 PART VI SECTION B LINE 11B:

THE FORM 990 WAS PREPARED BY THE CERTIFIED PUBLIC ACCOUNTANT AND WAS REVIEWED BY THE EXECUTIVE COMMITTEE AND SUBSEQUENTLY DISTRIBUTED TO THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS.

FORM 990 PART VI SECTION B LINE 15A:

THE EXECUTIVE COMMITTEE SERVES AS THE COMPENSATION COMMITTEE AND

DETERMINES THE COMPENSATION FOR THE EXECUTIVE DIRECTOR BY COMPARING

SALARIES OF COMPARABLE POSITIONS IN OTHER NOT-FOR-PROFIT ORGANIZATIONS.

THE EXECUTIVE DIRECTOR DOES NOT TAKE PART IN DETERMINING HIS

COMPENSATION.

FORM 990 PART VI SECTON C LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

STATEMENTS ARE MADE AVAILABLE FOR VIEWING UPON PRIOR WRITTEN REQUEST AT

THE ORGANIZATION'S OFFICE.

FORM 990 PART XII LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

FORM 990 PART VI SEC B LINE 12C

THE BOARD OF DIRECTORS ARE ASKED TO ANNUALLY DOCUMENT THAT THEY HAVE NOT CONFLICTS OF INTEREST EITHER REAL OR PERCEIVED.

Schedule O (Form 990 or 990-EZ) 2021		
Name of the organization	Employer identification number	
SHEPHERDS, INC	31-1724639	

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION _____

SHEPHERDS' THREE PART PROGRAM PROVIDES FINANCIAL SUPPORT FOR STUDENTS TO ATTEND A PRIVATE, COLLEGE PREPARATORY HIGH SCHOOL IN THEIR LOCAL COMMUNITY, TRAINS AND COACHES ADULT VOLUNTEERS TO MENTOR EACH OF THESE STUDENTS ON A ONE-ON-ONE BASIS, AND ORGANIZES NUMEROUS EVENTS AND WORKSHOPS TO INTRODUCE ACADEMIC AND CAREER OPPORTUNITIES TO THE STUDENTS.

JSA

Schedule O (Form 990 or 990-EZ) 2021	Page 2
Name of the organization	Employer identification number
SHEPHERDS, INC	31-1724639
FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGS	
DESCRIPTION	ENDING BOOK VALUE
PREPAID EXPENSES	3,000.
TOTALS	3,000.

Schedule O (Form 990 or 990-EZ) 2021				Page 2
Name of the organization			entification number	
SHEPHERDS, INC		31-172	24639	
FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES				
DESCRIPTION	ENDING BOOK VAL	JUE	COST OR FMV	
COMMUNITY FUND GREATER NH FIDELITY	46,	654.	FMV FMV	
TOTALS	46 ,	 654.		

=================