

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

Department of the Treasury  
Internal Revenue Service

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Open to Public Inspection

For calendar year **2022** or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>KENNETH KENDAL KING FOUNDATION</b>		<b>A Employer identification number</b> 84-1148157
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 6699	Room/suite	<b>B Telephone number (see instructions)</b> 303-832-3200
City or town, state or province, country, and ZIP or foreign postal code DENVER CO 80206		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 60,140,454	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,561,929	1,561,929		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-45,466			
	b Gross sales price for all assets on line 6a 17,978				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) STMT 1	-97,161	25,070			
12 <b>Total.</b> Add lines 1 through 11	1,419,302	1,586,999	0		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	325,000	99,449		225,551
	14 Other employee salaries and wages	105,000			105,000
	15 Pension plans, employee benefits	65,161	2,946		62,215
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) STMT 2	49,691	8,060		41,631
	c Other professional fees (attach schedule) STMT 3	18,000			18,000
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 4	20,300			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	11,521			11,521
	21 Travel, conferences, and meetings	11,722			11,722
	22 Printing and publications				
	23 Other expenses (att. sch.) STMT 5	233,304			233,304
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	839,699	110,455	0	708,944
	25 Contributions, gifts, grants paid	2,014,493			2,014,493
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	2,854,192	110,455	0	2,723,437	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-1,434,890				
b <b>Net investment income</b> (if negative, enter -0-)		1,476,544			
c <b>Adjusted net income</b> (if negative, enter -0-)			0		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash – non-interest-bearing	232,992	99,089	99,089
	2 Savings and temporary cash investments	99,999	548	548
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (att. schedule)			
	Less: allowance for doubtful accounts	0		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments – U.S. and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule) SEE STMT 6	31,589,488	30,352,925	57,415,425
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment: basis			
Less: accumulated depreciation (attach sch.)				
12 Investments – mortgage loans				
13 Investments – other (attach schedule) SEE STATEMENT 7	198,798	227,557	535,742	
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation (attach sch.)				
15 Other assets (describe SEE STATEMENT 8 )	2,083,382	2,089,650	2,089,650	
16 Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	34,204,659	32,769,769	60,140,454	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe )			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	34,204,659	32,769,769	
29 Total net assets or fund balances (see instructions)	34,204,659	32,769,769		
30 Total liabilities and net assets/fund balances (see instructions)	34,204,659	32,769,769		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	34,204,659
2 Enter amount from Part I, line 27a	2	-1,434,890
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	32,769,769
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	32,769,769

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>	<b>PUBLICLY TRADED SECURITIES</b>	P		
<b>b</b>	<b>PASS THROUGH ENTITY</b>	P		
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>		63,444	-63,444	
<b>b</b>	17,978		17,978	
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b>			-63,444	
<b>b</b>			17,978	
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss) <span style="font-size: small;">[ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]</span>		<b>2</b>	-45,466
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 <span style="font-size: small;">[ ]</span>		<b>3</b>	

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: ..... <b>(attach copy of letter if necessary—see instructions)</b>	<b>1</b>	20,524
<b>b</b>	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	<b>2</b>	0
<b>3</b>	Add lines 1 and 2 .....	<b>3</b>	20,524
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- .....	<b>5</b>	20,524
<b>6</b>	Credits/Payments:		
<b>a</b>	2022 estimated tax payments and 2021 overpayment credited to 2022 .....	<b>6a</b>	24,401
<b>b</b>	Exempt foreign organizations – tax withheld at source .....	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) .....	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld .....	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d .....	<b>7</b>	24,401
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached .....	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .....	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .....	<b>10</b>	3,877
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2023 estimated tax</b> 3,877 <b>Refunded</b> .....	<b>11</b>	

**Part VI-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....		X
If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. \$ _____ <b>(2)</b> On foundation managers. \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....	N/A	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. CO .....		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes," complete Part XIII .....		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
<b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
<b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>KENNETHKINGFOUNDATION.ORG</u> .....	X	
<b>14</b> The books are in care of <u>THE ORGANIZATION</u> Telephone no. <u>303-832-3200</u> <u>PO BOX 6699</u>		
Located at <u>DENVER</u> CO ZIP+4 <u>80206</u>		
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>		
<b>16</b> At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

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

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

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(1)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(2)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(3) X	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(4) X	
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(5)	X
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1a(6)	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>	1b	X
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022?	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years 20 , 20 , 20 , 20	2a	X
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement – see instructions.)	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. 20 , 20 , 20		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.)	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b	X

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

	Yes	No
<b>5a</b> During the year did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) (4)(A)? See instructions	X	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d). SEE STATEMENT 9	X	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10				

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CINDY WILLARD PO BOX 6699 DENVER CO 80206	DIR INTEGRAT 40.00	105,000	7,308	0

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		

**Part VIII-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

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

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

	Amount
1 HANDS OF THE CARPENTER SITE EXPANSION LOAN	100,000
2 SISTAHBIZ SMALL BUSINESS BLACK ENTREPRENEUR FUND	86,750
All other program-related investments. See instructions. 3 FOCUS POINTS FAMILY RESOURCE	75,000
<b>Total.</b> Add lines 1 through 3	261,750

<b>Part IX Minimum Investment Return</b> (All domestic foundations must complete this part. Foreign foundations, see instructions.)	
<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	
<b>a</b> Average monthly fair market value of securities .....	<b>1a</b> 61,614,910
<b>b</b> Average of monthly cash balances .....	<b>1b</b> 454,187
<b>c</b> Fair market value of all other assets (see instructions) .....	<b>1c</b> 0
<b>d Total</b> (add lines 1a, b, and c) .....	<b>1d</b> 62,069,097
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	<b>1e</b> 0
<b>2</b> Acquisition indebtedness applicable to line 1 assets .....	<b>2</b> 0
<b>3</b> Subtract line 2 from line 1d .....	<b>3</b> 62,069,097
<b>4</b> Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	<b>4</b> 931,036
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	<b>5</b> 61,138,061
<b>6 Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	<b>6</b> 3,056,903

<b>Part X Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here <input type="checkbox"/> and do not complete this part.)	
<b>1</b> Minimum investment return from Part IX, line 6 .....	<b>1</b> 3,056,903
<b>2a</b> Tax on investment income for 2022 from Part V, line 5 .....	<b>2a</b> 20,524
<b>b</b> Income tax for 2022. (This does not include the tax from Part V.) .....	<b>2b</b>
<b>c</b> Add lines 2a and 2b .....	<b>2c</b> 20,524
<b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1 .....	<b>3</b> 3,036,379
<b>4</b> Recoveries of amounts treated as qualifying distributions .....	<b>4</b> 255,484
<b>5</b> Add lines 3 and 4 .....	<b>5</b> 3,291,863
<b>6</b> Deduction from distributable amount (see instructions) .....	<b>6</b>
<b>7 Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	<b>7</b> 3,291,863

<b>Part XI Qualifying Distributions</b> (see instructions)	
<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
<b>a</b> Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 .....	<b>1a</b> 2,723,437
<b>b</b> Program-related investments – total from Part VIII-B .....	<b>1b</b> 261,750
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	<b>2</b>
<b>3</b> Amounts set aside for specific charitable projects that satisfy the:	
<b>a</b> Suitability test (prior IRS approval required) .....	<b>3a</b>
<b>b</b> Cash distribution test (attach the required schedule) .....	<b>3b</b>
<b>4 Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	<b>4</b> 2,985,187



**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				3,291,863
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			2,838,994	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f <b>Total</b> of lines 3a through e				
4 Qualifying distributions for 2022 from Part XI, line 4: \$ <u>2,985,187</u>				
a Applied to 2021, but not more than line 2a			2,838,994	
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2022 distributable amount				146,193
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 <b>Enter the net total of each column as indicated below:</b>				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount – see instructions				
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount – see instructions				
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				3,145,670
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions)				
9 <b>Excess distributions carryover to 2023.</b> Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2018				
b Excess from 2019				
c Excess from 2020				
d Excess from 2021				
e Excess from 2022				

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling \_\_\_\_\_

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
<b>b</b> 85% (0.85) of line 2a					
<b>c</b> Qualifying distributions from Part XI, line 4, for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:  
SEE STATEMENT 11

**b** The form in which applications should be submitted and information and materials they should include:  
SEE STATEMENT 12

**c** Any submission deadlines:  
SEE STATEMENT 13

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
SEE STATEMENT 14

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
MILE HIGH WORKSHOP 3795 E. 38TH AVE. DENVER CO 80205	NONE	PC	PROGRAM SUPPORT	100,000
GOODWILL OF COLORADO 1460 GARDEN OF THE GODS COLORADO SPRINGS CO 80907	NONE	PC	YOUTH CAREER DVLMP & IT SUPPORT	75,000
COLORADO COMMUNITY COLLEGE SYSTEM F 9101 E. LOWRY BLVD. DENVER CO 80207	NONE	PC	LAST MILE SCHOLARSHIP PROGRAM	52,500
PCS FOR PEOPLE 6035 E 38TH AVE. DENVER CO 80207	NONE	PC	PROGRAM SUPPORT	52,000
CAPITOL HILL COMMUNITY SERVICES 3615 S. HURON ST., #206 ENGLEWOOD CO 80110	NONE	PC	GENERAL SUPPORT	50,000
COLORADO STATE UNIVERSITY PUEBLO FO 2200 BONFORTE BLVD PUEBLO CO 81001	NONE	PC	NURSING PROGRAM	50,000
MT. CARMEL VETERANS SERVICE CENTER 530 COMMUNICATION CIRCLE COLORADO SPRINGS CO 80905	NONE	PC	EMPLOYMENT PROGRAM	50,000
SECOND CHANCE CENTER, INC. 224 POTOMAC STREET AURORA CO 80011	NONE	PC	SCHOLARSHIP PROGRAM	50,000
SPRINGS RESCUE MISSION 5 W. LAS VEGAS ST. COLORADO SPRINGS CO 80903	NONE	PC	PROGRAM SUPPORT	50,000
GLOBAL CENTER FOR CULTURAL ENTREPRE 441 GREG AVE. SANTA FE NM 87501	NONE	PC	PROGRAM SUPPORT	50,000
<b>Total</b>			<b>3a</b>	2,014,493
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>			<b>3b</b>	





**Part XIV Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
FOCUS POINTS FAMILY RESOURCE CENTER 17885 E. TENNESSEE PL. AURORA CO 80216	NONE	PC	PROGRAM SUPPORT	50,000
PRODIGY VENTURES 3801 E. 40TH AVE. DENVER CO 80205	NONE	PC	PROGRAM SUPPORT	50,000
WORK OPTIONS FOR WOMEN 1200 FEDERAL BLVD. DENVER CO 80204	NONE	PC	CULINARY JOB TRAINING	50,000
WORKLIFE PARTNERSHIP 3513 BRIGHTON BLVD., SUITE DENVER CO 80216	NONE	PC	PROGRAM SUPPORT	35,000
COLORADO SPRINGS CHILD NURSERY CENT 104 E. RIO GRANDE ST. COLORADO SPRINGS CO 80903	NONE	PC	HOME NETWORK PIKES PEAK REGION	35,000
E FOR ALL 175 CABOT ST. LOWELL MA 01854	NONE	PC	PROGRAM SUPPORT	35,000
YEAR ONE INC., DBA MILE HIGH YOUTH 1801 FEDERAL BLVD. DENVER CO 80204	NONE	PC	YOUTHBUILD	35,000
HOMEWARDBOUND OF THE GRAND VALLEY, 562 29 ROAD GRAND JUNCTION CO 80824	NONE	PC	PROGRAM SUPPORT	30,000
PRAIRIE ROSE DEVELOPMENT CORP. 16765 COUNTY ROAD 3 KIRK CO 80824	NONE	PC	KIVA COLORADO	30,000
SAINT FRANCIS CENTER 2323 CURTIS STREET DENVER CO 80205	NONE	PC	EMPLOYMENT PROGRAMS	30,000
<b>Total</b>				<b>3a</b>
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>				<b>3b</b>

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
SO ALL MAY EAT INC (SAME CAF) 2023 E. COLFAX AVE. DENVER CO 80206	NONE	PC	PROGRAM SUPPORT	30,000
THE OTHER SIDE ACADEMY 1859 YORK ST. DENVER CO 80206	NONE	PC	PROGRAM SUPPORT	30,000
CENTRAL VISITATION PROGRAM 1660 SHERMAN ST. DENVER CO 80203	NONE	PC	GENERAL OPERATING SUPPORT	30,000
HANDS OF THE CARPENTER 16097 S. GOLDEN ROAD GOLDEN CO 80401	NONE	PC	PROGRAM SUPPORT	25,000
RECIPROCITY COLLECTIVE 1043 E. 20TH AVE. DENVER CO 80205	NONE	PC	GENERAL OPERATING SUPPORT	25,000
SAN LUIS VALLEY GREAT OUTDOORS 610 STATE AVE. ALAMOSA CO 81101	NONE	PC	PROGRAM SUPPORT	25,000
CEDS FINANCE 10660 E. COLFAX AVE., SUINONE AURORA CO 80010	NONE	PC	GENERAL OPERATING SUPPORT	25,000
COLORADO RESTAURANT FOUNDATION/COLO 430 E. 7TH AVE. DENVER CO 80203	NONE	PC	CO RESTAURANT FNDTN APPRENTICE PROG	25,000
FOUNDATION FOR BLACK ENTREPRENEURSH 20340 E. 40TH AVE. DENVER CO 80249	NONE	PC	PROGRAM SUPPORT	25,000
LATINO LEADERSHIP INSTITUTE PO BOX 247 LITTLETON CO 80160	NONE	PC	ENTREPRENEURIAL ACCESS PROGRAM	25,000
<b>Total</b>				<b>3a</b>
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>				<b>3b</b>

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
METROPOLITAN STATE COLLEGE OF DENVER CAMPUS BOX 14 PO BOX 1733 DENVER CO 80217	NONE	PC	LACTATION CONSULTANT TRAINING	25,000
MI CASA RESOURCE CENTER 345 S. GROVE ST. DENVER CO 80219	NONE	PC	BUSINESS PATHWAYS PROGRAM	25,000
SISTER CARMEN COMMUNITY CENTER 655 ASPEN RIDGE DR. LAFAYETTE CO 80026	NONE	PC	PROGRAM SUPPORT	25,000
THE MASTER'S APPRENTICE 646 MARIPOSA ST. DENVER CO 80204	NONE	PC	PROGRAM SUPPORT	25,000
WOMEN'S BEAN PROJECT 1300 W. ALAMEDA AVE. DENVER CO 80223	NONE	PC	TRANSITIONAL EMPLOYMENT PROGRAM	25,000
SPRING INSTITUTE FOR INTERCULTURAL 1373 GRANT STREET DENVER CO 80203	NONE	PC	PROGRAM SUPPORT	23,037
DENVER SOUTH HIGH SCHOOL PTSA 1700 E. LOUISIANA AVENUE DENVER CO 80210	NONE	PC	RAVENS LANDING	20,000
CENTER FOR WORK EDUCATION AND EMPL 1175 OSAGE STREET, SUITE DENVER CO 80204	NONE	PC	PROGRAM SUPPORT	20,000
COLORADO STATEWIDE PARENT COALITION PO BOX 11849 DENVER CO 80221	NONE	PC	PROGRAM SUPPORT	20,000
KIDS AT THEIR BEST PO BOX 382 FORT MORGAN CO 80701	NONE	PC	PROGRAM SUPPORT	20,000
<b>Total</b>				<b>3a</b>
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>				<b>3b</b>



**Part XIV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
PARTNERS IN HOUSING 455 GOLD PASS HEIGHTS COLORADO SPRINGS CO 80906	NONE	PC SELF-SUFFICIENCY	PROGRAM	20,000
PROJECT SELF-SUFFICIENCY OF LOVELAN 375 W. 37TH STREET, #150 LOVELAND CO 80538	NONE	PC	PROGRAM SUPPORT	20,000
VILLAGE EXCHANGE CENTER 1609 HAVANA STREET AURORA CO 80010	NONE	PC	PROGRAM SUPPORT	20,000
CENTER VIKING YOUTH CLUB 386 BROADWAY P.O. BOX 883 CENTER CO 81125	NONE	PC	ENTREPRENEURSHIP & INNOVATION CLUB	20,000
YOUTH ON RECORD 1292 W. 10TH AVE. DENVER CO 80204	NONE	PC	PROGRAM SUPPORT	20,000
SAN LUIS VALLEY LOCAL FOOD COALITIO PO BOX 181 ALAMOSA CO 81101	NONE	PC	PROGRAM SUPPORT	18,623
ACCESS GALLERY 909 SANTA FE DR. DENVER CO 80204	NONE	PC	PROGRAM SUPPORT	15,000
GUNNISON ARTS CENTER 102 S. MAIN ST. GUNNISON CO 81230	NONE	PC	GENERAL SUPPORT	15,000
LA PUENTE HOME INCORPORATED PO BOX 1235 ALAMOSA CO 81101	NONE	PC	PROGRAM SUPPORT	15,000
MANNA SOUP KITCHEN 1100 AVENIDA DEL SOL PO B DURANGO CO 81301	NONE	PC	CULINARY TRAINING PROGRAM	15,000
<b>Total</b>			<b>3a</b>	
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>			<b>3b</b>	

**Part XIV Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
CHAFFEE COUNTY 104 CRESTONE AVE., 2ND FLOOR SALIDA CO 81201	NONE	PC	PROGRAM SUPPORT	11,250
IN! - PATHWAYS TO INCLUSIVE HIGHER 7931 S. BROADWAY #193 LITTLETON CO 80122	NONE	PC	PROGRAM SUPPORT	10,016
COLORADO BALLET COMPANY 1075 SANTA FE DR. DENVER CO 80204	NONE	PC	GENERAL SUPPORT	10,000
COLORADO CHILDREN'S CHORALE 2420 W. 26TH AVE. SUITE 300 DENVER CO 80211	NONE	PC	GENERAL SUPPORT	10,000
COLORADO CHILDREN'S CHORALE 2420 W. 26TH AVE. SUITE 300 DENVER CO 80211	NONE	PC	TUITION ASSISTANCE PROGRAM	10,000
COLORADO HISTORICAL SOCIETY, DBA HI PO BOX 5941 DENVER CO 80217	NONE	PC	GENERAL SUPPORT	10,000
COLORADO LIONS KIDSIGHT PROGRAM 8200 S QUEBEC ST. A3-704 CENTENNIAL CO 80112	NONE	PC	GENERAL SUPPORT	10,000
COLORADO SYMPHONY ASSOCIATION BOETTCHER CONCERT HALL DENVER DENVER CO 80202	NONE	PC	GENERAL SUPPORT	10,000
COMMUNITY RESOURCE CENTER 789 SHERMAN ST., SUITE 210 DENVER CO 80203	NONE	PC	RURAL ACTION NETWORK	10,000
DENVER LIONS FOUNDATION 1373 GRANT ST. DENVER CO 80203	NONE	PC	SIGHT PROGRAM	10,000
<b>Total</b>				<b>3a</b>
<b>b</b> <i>Approved for future payment</i>				
N/A				
<b>Total</b>				<b>3b</b>

**Part XIV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
DENVER ZOOLOGICAL FOUNDATION 2300 STEELE ST. DENVER CO 80205	NONE	PC	GENERAL SUPPORT	10,000
KIDS IN NEED OF DENTISTRY /KIND 7190 COLORADO BLVD., SUITE COMMERCE CITY CO 80022	NONE	PC	GENERAL SUPPORT	10,000
LITTLETON TOWN HALL ARTS CENTER 2450 W. MAIN ST. LITTLETON CO 80120	NONE	PC	GENERAL SUPPORT	10,000
MUSEUM OF CONTEMPORARY ART DENVER 1485 DELGANY ST. DENVER CO 80202	NONE	PC	PROGRAM SUPPORT	10,000
OPERA COLORADO 4121 S. NAVAJO ST., SUITE ENGLEWOOD CO 80110	NONE	PC	GENERAL SUPPORT	10,000
PHAMALY THEATRE COMPANY 3532 FRANKLIN ST., SUITE DENVER CO 80205	NONE	PC	GENERAL SUPPORT	10,000
ROCKY MOUNTAIN MULTIPLE SCLEROSIS C 8845 WAGNER ST. WESTMINSTER CO 80013	NONE	PC	PROGRAM SUPPORT	10,000
SWALLOW HILL MUSIC ASSOCIATION 71 E YALE AVE. DENVER CO 80210	NONE	PC	GENERAL SUPPORT	10,000
DENVER CENTER FOR THE PERFORMING AR 1101 13TH ST. DENVER CO 80204	NONE	PC	GENERAL SUPPORT	10,000
COLORADO SPRINGS PHILHARMONIC ORCHE PO BOX 1266 COLORADO SPRINGS CO 80901	NONE	PC	PROGRAM SUPPORT	10,000
<b>Total</b>			<b>3a</b>	
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>			<b>3b</b>	

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
COLORADO MUSEUM OF NATURAL HISTORY, 2001 N. COLORADO BLVD. DENVER CO 80205	NONE	PC	GENERAL SUPPORT	10,000
COLORADO CHILDREN'S CHORALE 2420 W. 26TH AVE. SUITE 3 DENVER CO 80211	NONE	PC	GENERAL SUPPORT	10,000
COLORADO BUSINESS COMMITTEE FOR THE 789 SHERMAN ST. #280 DENVER CO 80203	NONE	PC	ADVANCING CREATIVES INTENSIVE	10,000
CAPITOL HILL COMMUNITY SERVICES 3615 S. HURON ST., #206 ENGLEWOOD CO 80110	NONE	PC	GENERAL OPERATING SUPPORT	5,700
INSTITUTE FOR LEADERS IN DEVELOPMEN 2197 S. UNIVERSITY BLVD, DENVER CO 80210	NONE	PC	PROGRAM SUPPORT	5,000
JEFFERSON SYMPHONY ORCHESTRA PO BOX 546 GOLDEN CO 80401	NONE	PC	GENERAL SUPPORT	5,000
COLORADO MUSEUM OF NATURAL HISTORY, 2001 N. COLORADO BLVD. DENVER CO 80205	NONE	PC	PALEONTOLOGY DEPARTMENT	5,000
COLORADO MUSEUM OF NATURAL HISTORY, 2001 N. COLORADO BLVD. DENVER CO 80205	NONE	PC	ARACHNOLOGY DEPARTMENT	5,000
UKRAINIANS OF COLORADO PO BOX 150054 DENVER CO 80215	NONE	PC	PURCHASE OF MED SUPPLIES IN UKRAINE	5,000
CENTRAL VISITATION PROGRAM 1660 SHERMAN ST. DENVER CO 80203	NONE	PC	GENERAL OPERATING SUPPORT	5,000
<b>Total</b>				<b>3a</b>
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>				<b>3b</b>

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
ALAMOSA LIVE MUSIC ASSOCIATION (ALM P.O. BOX 1836 ALAMOSA CO 81101	NONE	PC	PROGRAM SUPPORT	5,000
DESERVING DENTAL 2205 W. 136TH AVE. BROOMFIELD CO 80023	NONE	PC	PROGRAM SUPPORT	5,000
HIGHWATER FARM 7001 COUNTY ROAD 346 SILT CO 81652	NONE	PC	SUMMER YOUTH PROGRAM	5,000
CLINICA TEPEYAC 5075 LINCOLN ST. DENVER CO 80216	NONE	PC	CLINICA TEPEYAC CAPITAL CAMPAIGN	5,000
HISPANIC AFFAIRS PROJECT PO BOX 2024 MONTROSE CO 81402	NONE	PC	PROGRAM SUPPORT	5,000
POSSIBILITY LABS 1410 FRANKLIN ST., SUITE SAN FRANCISCO CA 94109	NONE	PC	JUST ECONOMY INSTITUTE	5,000
CENTER FOR COMMUNITY WEALTH BUILDIN 2900 N. DOWNING STREET #1 DENVER CO 80205	NONE	PC	GENERAL SUPPORT	5,000
SEAN RANCH LOUGH FOUNDATION 1800 LARIMER ST., SUITE DENVER CO 80202	NONE	PC	SCHOLARSHIP PROGRAM	4,500
SEAN RANCH LOUGH FOUNDATION 1800 LARIMER ST., SUITE DENVER CO 80202	NONE	PC	SCHOLARSHIP PROGRAM	4,500
WATER EDUCATION COLORADO 1600 N. DOWNING ST., SUITE DENVER CO 80218	NONE	PC	PROGRAM SUPPORT	3,200
<b>Total</b>				<b>3a</b>
<b>b Approved for future payment</b>				
N/A				
<b>Total</b>				<b>3b</b>

**Part XIV Supplementary Information (continued)**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> TRAILHEAD INSTITUTE 1999 BROADWAY ST. 600 DENVER CO 80202	NONE	PC	MUSHROOM FARM SUPPORT	2,750
BROOMFIELD COUNCIL ON THE PO BOX 681 BROOMFIELD CO 80038	ARTS & HU NONE	PC	PROGRAM SUPPORT	2,500
CENTER FOR WORK EDUCATION AND EMPL 1175 OSAGE ST., SUITE 300 DENVER CO 80204	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
COLORADO COMMUNITY COLLEGE SYSTEM F 9101 E. LOWRY BLVD. DENVER CO 80230	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
COLORADO STATE UNIVERSITY 2200 BONFORTE BLVD. PUEBLO CO 81001	PUEBLO FO NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
COLORADO STATEWIDE PARENT PO BOX 11849 DENVER CO 80221	COALITION NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
HANDS OF THE CARPENTER 16097 S GOLDEN RD. GOLDEN CO 80401	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
HOMEWARDBOUND OF THE GRAND VALLEY, 562 29 RD. GRAND JUNCTION CO 81504	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
KIDS AT THEIR BEST PO BOX 382 FORT MORGAN CO 80701	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
MT. CARMEL VETERANS SERVICE CENTER 530 COMMUNICATION CIRCLE COLORADO SPRINGS CO 80905	NONE	PC	INFLATION ADJUSTMENT GRANT	2,500
<b>Total</b>			<b>3a</b>	
<b>b</b> <i>Approved for future payment</i> N/A				
<b>Total</b>			<b>3b</b>	

**Part XIV Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
PARTNERS IN HOUSING 455 GOLD PASS HEIGHTS COLORADO SPRINGS CO 80906	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
PRAIRIE ROSE DEVELOPMENT CORP. 16765 COUNTY ROAD 3 KIRK CO 80824	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
PROJECT SELF-SUFFICIENCY OF LOVELAN 375 W. 37TH ST., #150 LOVELAND CO 80538	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
RECIPROCITY COLLECTIVE 1043 E. 20TH AVE. DENVER CO 80205	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
SAINT FRANCIS CENTER 2323 CURTIS ST. DENVER CO 80205	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
SAN LUIS VALLEY GREAT OUTDOORS 610 STATE AVE. ALAMOSA CO 81101	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
SAN LUIS VALLEY LOCAL FOOD COALITIO PO BOX 181 ALAMOSA CO 81101	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
SECOND CHANCE CENTER, INC. 224 POTOMAC ST. AURORA CO 80011	NONE	PC	PROGRAM SUPPORT	2,500
SO ALL MAY EAT INC (SAME CAF) 2023 E. COLFAX AVE. DENVER CO 80206	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
SPRING INSTITUTE FOR INTERCULTURAL 1373 GRANT ST. DENVER CO 80203	NONE	PC INFLATION	ADJUSTMENT GRANT	2,500
<b>Total</b>			<b>3a</b>	
<b>b</b> <i>Approved for future payment</i>				
N/A				
<b>Total</b>			<b>3b</b>	

**Part XIV Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
SPRINGS RESCUE MISSION 5 W. LAS VEGAS ST. COLORADO SPRINGS CO 80903	NONE	PC INFLATION ADJUSTMENT	GRANT	2,500
THE OTHER SIDE ACADEMY 1859 YORK ST. DENVER CO 80206	NONE	PC INFLATION ADJUSTMENT	GRANT	2,500
VILLAGE EXCHANGE CENTER 1609 HAVANA ST. AURORA CO 80010	NONE	PC INFLATION ADJUSTMENT	GRANT	2,500
WORKLIFE PARTNERSHIP 3513 BRIGHTON BLVD., SUITE DENVER CO 80216	NONE	PC INFLATION ADJUSTMENT	GRANT	2,500
IMPACT CHARITABLE 1536 WYNKOOP ST., SUITE 2 DENVER CO 80202	NONE	PC HANDS OF THE	CARPENTER	1,917
ACCESS GALLERY 909 SANTA FE DR. DENVER CO 80204	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
ALAMOSA LIVE MUSIC ASSOCIATION (ALM) P.O. BOX 1836 ALAMOSA CO 81101	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
COLORADO BUSINESS COMMITTEE FOR THE 789 SHERMAN ST. #280 DENVER CO 80203	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
GUNNISON ARTS CENTER 102 S. MAIN ST. GUNNISON CO 81230	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
HIGHWATER FARM 7001 COUNTY ROAD 346 SILT CO 81652	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
<b>Total</b>				<b>3a</b>
<b>b</b> <i>Approved for future payment</i>				
N/A				
<b>Total</b>				<b>3b</b>



**Part XIV Supplementary Information** *(continued)*

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> LA PUENTE HOME INCORPORATED PO BOX 1235 ALAMOSA CO 81101	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
MANNA SOUP KITCHEN 1100 AVENIDA DEL SOL PO DURANGO CO 81301	NONE	PC INFLATION ADJUSTMENT	GRANT	1,000
<b>Total</b>				<b>3a</b>
<b>b</b> <i>Approved for future payment</i> N/A				
<b>Total</b>				<b>3b</b>

## Federal Statements

**Statement 1 - Form 990-PF, Part I, Line 11 - Other Income**

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	\$ 15,736	\$ 15,736	\$
INCOME PASS-THROUGH ENTITIES	9,334	9,334	
PTP - ORDINARY BUSINESS INCOM	-122,231		
TOTAL	<u>\$ -97,161</u>	<u>\$ 25,070</u>	<u>\$ 0</u>

**Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
KUNDINGER, CORDER & MONTOYA, P.C	\$ 22,350	\$ 3,353	\$	\$ 18,997
CLIFTONLARSONALLEN	27,341	4,707		22,634
TOTAL	<u>\$ 49,691</u>	<u>\$ 8,060</u>	<u>\$ 0</u>	<u>\$ 41,631</u>

**Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
YOUR VIRTUAL ADMIN EXPERT	\$ 11,000	\$	\$	\$ 11,000
OTHER CONTRACTOR FEES	7,000			7,000
TOTAL	<u>\$ 18,000</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 18,000</u>

**Statement 4 - Form 990-PF, Part I, Line 18 - Taxes**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
2022 ESTIMATED EXCISE TAXES	\$ 20,300	\$	\$	\$
TOTAL	<u>\$ 20,300</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

## Federal Statements

**Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
EXPENSES				
DUES AND SUBSCRIPTIONS	48,815			48,815
INSURANCE	16,237			16,237
OFFICE EXPENSES	15,948			15,948
PAYMENTS TO RETIREES	140,143			140,143
BOARD EXPENSES	194			194
IT	10,367			10,367
PROFESSIONAL DEVELOPMENT	1,600			1,600
TOTAL	<u>\$ 233,304</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 233,304</u>

**Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments**

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
	\$	\$		\$
MARKETABLE SECURITIES	\$ 31,589,488	\$ 30,352,925	COST	\$ 57,415,425
TOTAL	<u>\$ 31,589,488</u>	<u>\$ 30,352,925</u>		<u>\$ 57,415,425</u>

**Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments**

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
	\$	\$		\$
WETAR III PARTNERSHIP	\$ 198,798	\$ 227,557	COST	\$ 535,742
TOTAL	<u>\$ 198,798</u>	<u>\$ 227,557</u>		<u>\$ 535,742</u>

## Federal Statements

**Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets**

Description	Beginning of Year	End of Year	Fair Market Value
PROGRAM RELATED INVESTMENTS	\$ 2,083,382	\$ 2,089,650	\$ 2,089,650
TOTAL	<u>\$ 2,083,382</u>	<u>\$ 2,089,650</u>	<u>\$ 2,089,650</u>

**Statement 9 - Form 990-PF, Part VI-B, Line 5d - Expenditure responsibilities (Section 53.4945-5(d))**

## Description

GRANTEE'S NAME  
ALTIUS FARMS

GRANTEE'S ADDRESS  
2500 LAWRENCE STREET, #200 DENVER, CO 80205

GRANT AMOUNT  
\$100,000

DATE OF GRANT  
12/17/18

AMOUNT EXPENDED  
\$100,000

PURPOSE OF GRANT  
THE FOUNDATION HAS MADE AN EQUITY INVESTMENT IN ALTIUS FARMS FOR THE PURPOSES OF EMPLOYING LOW-INCOME AND DISABLED VETERANS, PROVIDING LEARNING AND EDUCATIONAL OPPORTUNITIES FOR SCHOOLS IN DENVER AND PROVIDE 100 LBS. OF PRODUCE GROWN BEGINNING MARCH 2019 EACH MONTH FOR 24 MONTHS, AT COST, OR DONATED TO NON-PROFIT, TAX-EXEMPT CHARITABLE ORGANIZATIONS IN THE RIVER NORTH AREA THAT PROVIDE FRESH FOOD TO LOW-INCOME RESIDENTS IN THE COMMUNITY.

DATES OF REPORTS BY GRANTEE  
1/15/22, 10/17/22, 12/13/22

ANY DIVERSIONS BY GRANTEE  
THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

RESULTS OF VERIFICATION  
THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

GRANTEE'S NAME  
BIT BOX - CODEPOPS

GRANTEE'S ADDRESS  
3080 VALMONT ROAD, #200 BOULDER, CO 80301

GRANT AMOUNT  
\$350,001

DATE OF GRANT  
8/14/2018

**Statement 9 - Form 990-PF, Part VI-B, Line 5d - Expenditure responsibilities (Section 53.4945-5(d)) (continued)**

Description

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AMOUNT EXPENDED  
\$350,001

PURPOSE OF GRANT  
THE FOUNDATION HAS MADE AN EQUITY INVESTMENT IN BITS BOX - CODEPOPS FOR THE PURPOSES OF REACHING UNDERSERVED AND DISADVANTAGED STUDENTS.

DATES OF REPORTS BY GRANTEE  
3/22/22, 5/9/22, 7/20/22, 8/3/22

ANY DIVERSIONS BY GRANTEE  
THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

RESULTS OF VERIFICATION  
THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

GRANTEE'S NAME  
KNOTTY TIE

GRANTEE'S ADDRESS  
989 SANTA FE DRIVE DENVER, CO 80204

GRANT AMOUNT  
\$175,000

DATE OF GRANT  
6/26/2017

AMOUNT EXPENDED  
\$175,000

PURPOSE OF GRANT  
THE FOUNDATION MADE AN EQUITY INVESTMENT IN THIS COMMERCIAL ORGANIZATION THAT PROVIDES JOB TRAINING TO REFUGEES AND IMMIGRANTS THROUGH MANUFACTURING SCARVES, TIES AND OTHER SMALL CLOTHING ACCESSORIES.

DATES OF REPORTS BY GRANTEE  
4/5/22, 12/1/22

ANY DIVERSIONS BY GRANTEE  
THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

RESULTS OF VERIFICATION  
THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

GRANTEE'S NAME  
FULL PLATE MANAGEMENT

GRANTEE'S ADDRESS

**Statement 9 - Form 990-PF, Part VI-B, Line 5d - Expenditure responsibilities (Section 53.4945-5(d)) (continued)**

Description

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3273 S. TULARE CIRCLE DENVER, CO 80231

GRANT AMOUNT  
\$250,000

DATE OF GRANT  
5/21/2021

AMOUNT EXPENDED  
\$250,000

PURPOSE OF GRANT

THE FOUNDATION MADE A LOAN TO ENABLE THE PURCHASE OF A BUILDING WITH THE INTENTION TO DEVELOP A FOOD HALL, WHICH WILL CREATE JOBS FOR THOSE WITH BARRIERS TO EMPLOYMENT AND SUPPORT UNDERREPRESENTED ENTREPRENEURS WITH THE WORK SPACE AND TECHNICAL ASSISTANCE.

DATES OF REPORTS BY GRANTEE

11/17/22, 11/9/22, 4/18/22, 3/28/22

ANY DIVERSIONS BY GRANTEE

THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

RESULTS OF VERIFICATION

THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

GRANTEE'S NAME

DELTA BRICK AND CLIMATE COMPANY LLC

GRANTEE'S ADDRESS

207 3RD STREET, UNIT B PAONIA, CO 81428

GRANT AMOUNT  
\$100,000

DATE OF GRANT  
11/15/2021

AMOUNT EXPENDED  
\$100,000

PURPOSE OF GRANT

THE FOUNDATION MADE A LOAN TO EXPAND BUSINESS SALES AND OPERATIONS WITH THE GOAL OF INCREASING ACCESS TO EMPLOYMENT FOR RURAL RESIDENTS OF DELTA COUNTY.

DATES OF REPORTS BY GRANTEE

2/7/22, 3/3/22, 4/26/22, 6/7/22, 11/18/22, 12/12/22

ANY DIVERSIONS BY GRANTEE

THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

**Statement 9 - Form 990-PF, Part VI-B, Line 5d - Expenditure responsibilities (Section 53.4945-5(d)) (continued)**

Description

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## RESULTS OF VERIFICATION

THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

## GRANTEE'S NAME

CHAI DEBT CAPITAL LLC

## GRANTEE'S ADDRESS

C/O WEAVE SOCIAL FINANCE, 1536 WYNKOOP STREET, SUITE 529 DENVER, CO 80202

## GRANT AMOUNT

\$100,000

## DATE OF GRANT

11/30/2021

## AMOUNT EXPENDED

\$100,000

## PURPOSE OF GRANT

THE FOUNDATION MADE A LOAN TO SUPPORT PURCHASING AFFORDABLE HOUSING TO ENSURE IT REMAINS AFFORDABLE IN RURAL MOUNTAIN COMMUNITIES.

## DATES OF REPORTS BY GRANTEE

3/16/22, 4/20/22, 5/31/22, 6/23/22, 6/30/22, 9/9/22

## ANY DIVERSIONS BY GRANTEE

THE FOUNDATION IS NOT AWARE OF ANY DIVERSION OF PROGRAM RELATED INVESTMENT FUNDS.

## RESULTS OF VERIFICATION

THE FOUNDATION HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

## Federal Statements

Statement 10 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
JANICE FRITSCH PO BOX 6699 DENVER CO 80206	PRESIDENT	40.00	220,000	15,601	0
JARED MINOR PO BOX 6699 DENVER CO 80206	CHAIRMAN	15.00	20,000	0	0
JOHN LOVE PO BOX 6699 DENVER CO 80206	TREASURER	6.00	20,000	0	0
ALEJANDRA HARVEY OLIVER PO BOX 6699 DENVER CO 80206	SECRETARY	64.00	5,000	0	0
TIMOTHY WELKER PO BOX 6699 DENVER CO 80206	DIRECTOR	11.00	20,000	0	0
MATTHEW R. BANNER, III PO BOX 6699 DENVER CO 80206	DIRECTOR	25.00	20,000	0	0
TONY AFSHARY PO BOX 6699 DENVER CO 80206	DIRECTOR	32.00	20,000	0	0



**Statement 11 - Form 990-PF, Part XIV, Line 2a - Name, Address and Email for Applications**

## Description

JANICE FRITSCH 303-832-3200  
PO BOX 6699 DENVER CO 80206  
GRANTS@KENNETHKINGFOUNDATION.ORG

**Statement 12 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents**

## Description

LETTER OF INQUIRY AND GRANT APPLICATIONS SHOULD BE  
SUBMITTED ONLINE VIA THE FOUNDATION'S WEBSITE AT  
WWW.KENNETHKINGFOUNDATION.ORG.

**Statement 13 - Form 990-PF, Part XIV, Line 2c - Submission Deadlines**

## Description

SEPTEMBER 1 OF EACH CALENDAR YEAR.  
MARCH 1 OF EACH CALENDAR YEAR.

**Statement 14 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations**

## Description

FURTHER INFORMATION CAN BE FOUND AT  
WWW.KENNETHKINGFOUNDATION.ORG.

**Exempt Organization Business Income Tax Return  
(and proxy tax under section 6033(e))**

**2022**

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection  
for 501(c)(3)  
Organizations Only

**A**  Check box if address changed.

**B** Exempt under section  
 501(c)(3)  408(e)  220(e)  
 408A  530(a)  
 529(a)  529A

**Print or Type**  
 Name of organization (  Check box if name changed and see instructions.)  
**KENNETH KENDAL KING FOUNDATION**  
 Number, street, and room or suite no. If a P.O. box, see instructions.  
**PO BOX 6699**  
 City or town, state or province, country, and ZIP or foreign postal code  
**DENVER CO 80206**

**C** Book value of all assets at end of year **32,769,769**

**D** Employer identification number **84-1148157**

**E** Group exemption number (see instructions)

**F**  Check box if an amended return.

**G** Check organization type  501(c) corporation  501(c) trust  401(a) trust  Other trust  State college/university

**H** Check if filing only to  Claim credit from Form 8941  Claim a refund shown on Form 2439

**I** Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

**J** Enter the number of attached Schedules A (Form 990-T) **1**

**K** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subidiary controlled group?  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation

**L** The books are in care of **THE ORGANIZATION** Telephone number **303-832-3200**

**Part I Total Unrelated Business Taxable Income**

<b>1</b> Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	<b>1</b>	<b>0</b>
<b>2</b> Reserved .....	<b>2</b>	
<b>3</b> Add lines 1 and 2 .....	<b>3</b>	
<b>4</b> Charitable contributions (see instructions for limitation rules) .....	<b>4</b>	
<b>5</b> Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	<b>5</b>	
<b>6</b> Deduction for net operating loss. See instructions .....	<b>6</b>	<b>0</b>
<b>7</b> Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	<b>7</b>	<b>0</b>
<b>8</b> Specific deduction (generally \$1,000, but see instructions for exceptions) .....	<b>8</b>	<b>1,000</b>
<b>9</b> <b>Trusts.</b> Section 199A deduction. See instructions .....	<b>9</b>	
<b>10</b> <b>Total deductions.</b> Add lines 8 and 9 .....	<b>10</b>	<b>1,000</b>
<b>11</b> <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	<b>11</b>	<b>0</b>

**Part II Tax Computation**

<b>1</b> <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	<b>1</b>	<b>0</b>
<b>2</b> <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	<b>2</b>	<b>0</b>
<b>3</b> <b>Proxy tax.</b> See instructions .....	<b>3</b>	
<b>4</b> Other tax amounts. See instructions .....	<b>4</b>	
<b>5</b> Alternative minimum tax (trusts only) .....	<b>5</b>	
<b>6</b> <b>Tax on noncompliant facility income.</b> See instructions .....	<b>6</b>	
<b>7</b> <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	<b>7</b>	<b>0</b>

For Paperwork Reduction Act Notice, see instructions.

**Part III Tax and Payments**

<b>1a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>1a</b>		
<b>b</b> Other credits (see instructions) .....	<b>1b</b>		
<b>c</b> General business credit. Attach Form 3800 (see instructions) .....	<b>1c</b>		
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>1d</b>		
<b>e Total credits.</b> Add lines 1a through 1d .....		<b>1e</b>	
<b>2</b> Subtract line 1e from Part II, line 7 .....		<b>2</b>	
<b>3</b> Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) .....		<b>3</b>	
<b>4 Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....		<b>4</b>	0
<b>5</b> Current net 965 tax liability paid from Form 965-A, Part II, column (k) .....		<b>5</b>	
<b>6a</b> Payments: A 2021 overpayment credited to 2022 .....	<b>6a</b>		
<b>b</b> 2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/> .....	<b>6b</b>		
<b>c</b> Tax deposited with Form 8868 .....	<b>6c</b>		
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
<b>e</b> Backup withholding (see instructions) .....	<b>6e</b>		
<b>f</b> Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
<b>g</b> Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total .....	<b>6g</b>		
<b>7 Total payments.</b> Add lines 6a through 6g .....		<b>7</b>	
<b>8</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> .....		<b>8</b>	
<b>9 Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....		<b>9</b>	0
<b>10 Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....		<b>10</b>	
<b>11</b> Enter the amount of line 10 you want: <b>Credited to 2023 estimated tax</b> <span style="float: right;"><b>Refunded</b></span> .....		<b>11</b>	

**Part IV Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b> At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here .....		<b>Yes</b>	<b>No</b>
<b>2</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. ....			X
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year .....			
<b>4</b> Enter available pre-2018 NOL carryovers here \$ ..... Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6. ....			
<b>5</b> Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions. ....			
Business Activity Code	Available post-2017 NOL carryover		
.....	\$ .....		
.....	\$ .....		
.....	\$ .....		
.....	\$ .....		
<b>6a</b> Did the organization change its method of accounting? (see instructions) .....			X
<b>b</b> If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V .....			

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer	Date	Title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if PTIN	
	KRISTIN CALDER	KRISTIN CALDER	05/22/23	self-employed	P01720813
	Firm's name	Firm's EIN			
KUNDINGER, CORDER & MONTOYA, P.C.			84-1255164		
Firm's address			Phone no.		
DENVER, CO 80203			303-534-5953		

**SCHEDULE A  
(Form 990-T)**

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

OMB No. 1545-0047

**2022**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

Open to Public Inspection for  
501(c)(3) Organizations Only

**Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).**

<b>A</b> Name of the organization <b>KENNETH KENDAL KING FOUNDATION</b>	<b>B</b> Employer identification number <b>84-1148157</b>
<b>C</b> Unrelated business activity code (see instructions) <b>523000</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business **INVESTMENT PTP**

<b>Part I</b> Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances <b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>		
<b>6</b> Rent income (Part IV)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)	<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)	<b>10</b>		
<b>11</b> Advertising income (Part IX)	<b>11</b>		
<b>12</b> Other income (see instructions; attach statement) <b>SEE STMT 1</b>	<b>12</b> -122,231		-122,231
<b>13</b> <b>Total.</b> Combine lines 3 through 12	<b>13</b> -122,231		-122,231

<b>Part II</b> Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income			
<b>1</b> Compensation of officers, directors, and trustees (Part X)	<b>1</b>		
<b>2</b> Salaries and wages	<b>2</b>		
<b>3</b> Repairs and maintenance	<b>3</b>		
<b>4</b> Bad debts	<b>4</b>		
<b>5</b> Interest (attach statement). See instructions	<b>5</b>		
<b>6</b> Taxes and licenses	<b>6</b>		
<b>7</b> Depreciation (attach Form 4562). See instructions	<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return	<b>8a</b>		<b>8b</b> 0
<b>9</b> Depletion	<b>9</b>		
<b>10</b> Contributions to deferred compensation plans	<b>10</b>		
<b>11</b> Employee benefit programs	<b>11</b>		
<b>12</b> Excess exempt expenses (Part VIII)	<b>12</b>		
<b>13</b> Excess readership costs (Part IX)	<b>13</b>		
<b>14</b> Other deductions (attach statement)	<b>14</b>		
<b>15</b> <b>Total deductions.</b> Add lines 1 through 14	<b>15</b>		
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	<b>16</b>		-122,231
<b>17</b> Deduction for net operating loss. See instructions	<b>17</b>		
<b>18</b> <b>Unrelated business taxable income.</b> Subtract line 17 from line 16	<b>18</b>		-122,231

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

**Part III Cost of Goods Sold**

Enter method of inventory valuation

1	Inventory at beginning of year .....	1	
2	Purchases .....	2	
3	Cost of labor .....	3	
4	Additional section 263A costs (attach statement) .....	4	
5	Other costs (attach statement) .....	5	
6	<b>Total.</b> Add lines 1 through 5 .....	6	
7	Inventory at end of year .....	7	
8	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and in Part I, line 2 .....	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)**

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) .....				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) ..				
c <b>Total rents received or accrued by property.</b> Add lines 2a and 2b, columns A through D				
3 <b>Total rents received or accrued.</b> Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) .....				
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) .....				
5 <b>Total deductions.</b> Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) .....				

**Part V Unrelated Debt-Financed Income (see instructions)**

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
2 Gross income from or allocable to debt-financed property .....				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement) .....				
c <b>Total deductions (add lines 3a and 3b, columns A through D) .....</b>				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) .....				
5 Average adjusted basis of or allocable to debt-financed property (attach statement) .....				
6 Divide line 4 by line 5 .....	%	%	%	%
7 <b>Gross income reportable.</b> Multiply line 2 by line 6 ..				
8 <b>Total gross income (add line 7, columns A through D).</b> Enter here and on Part I, line 7, column (A) .....				
9 <b>Allocable deductions.</b> Multiply line 3c by line 6 ..				
10 <b>Total allocable deductions.</b> Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .....				
11 <b>Total dividends-received deductions</b> included in line 10 .....				

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organization			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

Totals

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)

Totals

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4
5	Gross income from activity that is not unrelated business income .....	5
6	Expenses attributable to income entered on line 5 .....	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7



## Investment PTP

Statement 1 - Schedule A (990T), Part I, Line 12 - Other Income

Description	Amount
PTP - ORDINARY BUSINESS INCOM	\$ -122,231
TOTAL	\$ -122,231



**Underpayment of Estimated Tax by Corporations**

Department of the Treasury  
Internal Revenue Service

Attach to the corporation's tax return.

Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

**2022**

Name <b>KENNETH KENDAL KING FOUNDATION</b>	Employer identification number <b>84-1148157</b>
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**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

1 Total tax (see instructions) .....	1	20,524
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
c Credit for federal tax paid on fuels (see instructions) .....	2c	
d <b>Total.</b> Add lines 2a through 2c .....	2d	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3	20,524
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....	4	47,746
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	20,524

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

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

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)	
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. ....	9	05/15/22	06/15/22	09/15/22	12/15/22
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	10	5,131	5,131	5,131	5,131
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	11	5,701	5,300	7,700	5,700
<i>Complete lines 12 through 18 of one column before going to the next column.</i>					
12 Enter amount, if any, from line 18 of the preceding column .....	12		570	739	3,308
13 Add lines 11 and 12 .....	13		5,870	8,439	9,008
14 Add amounts on lines 16 and 17 of the preceding column .....	14				
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15	5,701	5,870	8,439	9,008
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16		0	0	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	17	0	0	0	0
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18	570	739	3,308	

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

For Paperwork Reduction Act Notice, see separate instructions.

**Part IV Figuring the Penalty**

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

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

**Part II Annualized Income Installment Method**

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>4</u> months	First <u>7</u> months	First <u>10</u> months
<b>20</b>	Annualization periods (see instructions)				
<b>21</b>	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	270,010	547,512	1,042,868	1,462,828
<b>22</b>	Annualization amounts (see instructions)	6.00000	3.00000	1.71429	1.20000
<b>23a</b>	Annualized taxable income. Multiply line 21 by line 22	1,620,060	1,642,536	1,787,778	1,755,394
<b>b</b>	Extraordinary items (see instructions)				
<b>c</b>	Add lines 23a and 23b	1,620,060	1,642,536	1,787,778	1,755,394
<b>24</b>	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	22,519	22,831	24,850	24,400
<b>25</b>	Enter any alternative minimum tax (trusts only) for each payment period (see instructions)				
<b>26</b>	Enter any other taxes for each payment period. See instructions				
<b>27</b>	Total tax. Add lines 24 through 26	22,519	22,831	24,850	24,400
<b>28</b>	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions				
<b>29</b>	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-	22,519	22,831	24,850	24,400
<b>30</b>	Applicable percentage	25%	50%	75%	100%
<b>31</b>	Multiply line 29 by line 30	5,630	11,416	18,638	24,400

**Part III Required Installments**

		1st installment	2nd installment	3rd installment	4th installment
		<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column.			
<b>32</b>	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31	5,630	11,416	18,638	24,400
<b>33</b>	Add the amounts in all preceding columns of line 32. See instructions		5,131	10,262	15,393
<b>34</b>	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	5,630	6,285	8,376	9,007
<b>35</b>	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	5,131	5,131	5,131	5,131
<b>36</b>	Subtract line 38 of the preceding column from line 37 of the preceding column				
<b>37</b>	Add lines 35 and 36	5,131	5,131	5,131	5,131
<b>38</b>	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	5,131	5,131	5,131	5,131

Form <b>2220</b>	<b>Form 2220 Worksheet</b>	<b>2022</b>
For calendar year 2022, or tax year beginning _____, and ending _____		

Name <b>KENNETH KENDAL KING FOUNDATION</b>	Employer Identification Number <b>84-1148157</b>
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	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Due date of estimated payment	<u>05/15/22</u>	<u>06/15/22</u>	<u>09/15/22</u>	<u>12/15/22</u>
Amount of underpayment				
Prior year overpayment applied	<u>4,101</u>			

	1st Payment	2nd Payment	3rd Payment	4th Payment	5th Payment
Date of payment	<u>04/15/22</u>	<u>06/15/22</u>	<u>09/15/22</u>	<u>12/15/22</u>	
Amount of payment	<u>1,600</u>	<u>5,300</u>	<u>7,700</u>	<u>5,700</u>	