Form **990-PF**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

For 0	aler	dar year 2021 or tax year beginning		, and e	nding		
						A Employer identification	ı number
L	VEI	LE FUND FOR THE BLIND, INC.				13-1740463	
		nd street (or P.O. box number if mail is not delivered to stree	et address)		Room/suite	B Telephone number	
30	7 V	EST 38TH STREET, SUITE 1905				(212) 668-9801	
-		own, state or province, country, and ZIP or foreign	postal code			C If exemption application is p	ending, check here
		all that apply: Initial return	Initial return of a fo	ormer public o	charity	D 1. Foreign organization	s, check here
		Final return	Amended return				
		Address change	Name change			Foreign organizations me check here and attach co	eeting the 85% test, omputation
H C	heck	type of organization: X Section 501(c)(3)	exempt private foundation] E If private foundation sta	atus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation		under section 507(b)(1)(A), check here
I Fa	ir ma		nting method: Cash	Accr	rual	F If the foundation is in a	60-month termination
•			Other (specify) MODIFIED			under section 507(b)(1)(B), check here …►
		163,250,000. (Part I, col	umn (d), must be on cash basi	IS.)			T (n)
Pa	πı	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books		ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				N/A	
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments			126.		
	4	Dividends and interest from securities		2	,569,728.		
	5a	Gross rents					
		Net rental income or (loss)	50.666.000				
ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	50,666,892.				
ent	D	Gross sales price for all assets on line 6a 134,192,882.		E O	666 992		
Revenue	7	Capital gain net income (from Part IV, line 2)		50	,666,892.		
	8	Net short-term capital gain					
	7 10 a	Income modifications Gross sales less returns and allowances					
		Less: Cost of goods sold					
		Gross profit or (loss)					
	11	Other income			1,003.		STATEMENT 1
	12	Total. Add lines 1 through 11	53,286,253.	53	,237,749.		
	13	Compensation of officers, directors, trustees, etc.	226,600.		18,742.		207,858.
	14	Other employee salaries and wages	381,969.		31,592.		350,377.
	15	Pension plans, employee benefits	193,898.		16,873.		177,025.
ses		Legal fees STMT 2	2,370.		0.		2,370.
oeu	b	Accounting fees STMT 3	35,193.		21,003.		14,190.
Administrative Expens		Other professional fees STMT 4	315,434.		305,592.		9,842.
tive	17	Interest	660,000		0.		
tra	18	Taxes STMT 5	660,000.		0.		0.
inis	19 20	Depreciation and depletion			0.		127,291.
щþ	20	Occupancy Travel, conferences, and meetings	3,969.		0.		3,969.
	22	Printing and publications	32.		0.		32.
and a	23	Other expenses STMT 6	53,851.		94.		53,757.
ting	24	Total operating and administrative					1
perating	- '	expenses. Add lines 13 through 23	2,000,607.		393,896.		946,711.
ö	25	Contributions, gifts, grants paid	5,991,248.		<u> </u>		5,751,248.
	26	Total expenses and disbursements.					
		Add lines 24 and 25	7,991,855.		393,896.		6,697,959.
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expense	45,294,398.				
		Net investment income (if nega ve, en ar-0	NAV	52	,843,85		
	С	Adjusted net income (if negative enter 0-)	MAYO			1/3	
12350	1 12	-10-21 LHA For Paperwork Reduction Act Not	ice see instruction.				Form 990-PF (2021)

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Dook Volue	(h) Dook Volue	
=			(a) Book Value		(c) Fair Market Value
		Cash - non-interest-bearing	138,234.	239,545.	239,545.
		Savings and temporary cash investments	28,754,823.	9,316,795.	9,316,795.
	3	Accounts receivable			
	_	Less: allowance for doubtful accounts			
		Pledges receivable ►			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable STMT 7 332,000.			
		Less: allowance for doubtful accounts ▶	240,000.	332,000.	332,000.
ţ		Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
Ä		Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 8		152,679,514.	
	C	Investments - corporate bonds STMT 9	4,188,008.	682,146.	682,146.
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
		Investments - mortgage loans			
	13	Investments - other			
		Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	145,360,122.	163,250,000.	163,250,000.
		Accounts payable and accrued expenses			
		Grants payable			
G		Deferred revenue			
itie		Loans from officers, directors, trustees, and other disqualified persons			
iabiliti		Mortgages and other notes payable			
Ë		Other liabilities (describe)			
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
'n		and complete lines 24, 25, 29, and 30.			
nces	24	Net assets without donor restrictions	145,360,122.	163,250,000.	
		Net assets with donor restrictions			
Fund Bala		Foundations that do not follow FASB ASC 958, check here			
Pun		and complete lines 26 through 30.			
or F	26	Capital stock, trust principal, or current funds			
		Paid-in or capital surplus, or land, bldg., and equipment fund			
Assets		Retained earnings, accumulated income, endowment, or other funds			
ţ		Total net assets or fund balances	145,360,122.	163,250,000.	
Net		Total not account of faile balances	, ,	, , ,	
	30	Total liabilities and net assets/fund balances	145,360,122.	163,250,000.	
Ξ					
Р	art	Analysis of Changes in Net Assets or Fund Bal	ances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 29	 }		
		t agree with end-of-year figure reported on prior year's return)		1	145,360,122.
		amount from Part I, line 27a			45,294,398.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3			190,654,520.
5	Decre	eases not included in line 2 (itemize) CHANGE IN UNREALIZED V.	ALUE OF INVESTMENTS	5	27,404,520.
		net assets or fund balances about of year (line 4 minus line 5) - Part II, colu		6	163,250,000.
<u> </u>	, Jiul	O / O O I	O K) N /	Form 990-PF (2021)
		laxpay			. 31111 (2021)
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123	- 1 1 1	2-10-21	^	-	

Part IV Capital Gains a	ind Losses for Tax on In	vestment Inc	ome						Ť
	he kind(s) of property sold (for exal rehouse; or common stock, 200 shs			(b) How a P - Purd D - Don	cquired hase ation	(c) Date acc (mo., day,		(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES					P				
b CAPITAL GAINS DIVIDENT	DS								
<u>c</u>									
<u>d</u>									
e	(n Danier dation allowed	() 0 1	a tha a colla a				#13 O-1-	(1)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus expe	ise of sa	ale			(h) Gain ((e) plus (f	or (loss)) minus (
a 128,332,595.			83,52	25,990).				44,806,605.
b 5,860,287.									5,860,287.
C									
d									
Complete only for accets chowing	g gain in column (h) and owned by t	the foundation on :	2/21/60	<u> </u>			(I) Coine (Col	(h) goin	minuo
Complete only for assets showing	(j) Adjusted basis	(k) Excess			-		(I) Gains (Col. ol. (k), but not		
(i) FMV as of 12/31/69	as of 12/31/69	over col.					Losses (from col. (h))		
a			(,,,						44,806,605.
b									5,860,287.
C									
d									
e									
2 Capital gain net income or (net cap3 Net short-term capital gain or (loss		r in Part I, line 7)- in Part I, line 7 nd (6):			2				50,666,892.
If gain, also enter in Part I, line 8, o	column (c). See instructions. If (los	s), enter -0- in			} 3			N/A	
Part V Excise Tax Base	ed on Investment Incom	ne (Section 49	940(a)), 494	0(b), o	r 4948 ·	- see insti	ructio	าร)
1a Exempt operating foundations d	escribed in section 4940(d)(2), che	ck here 🕨 🗌	and en	iter "N/A	on line 1	l .			
Date of ruling or determination I					ee instru	ctions)	1		734,530.
	enter 1.39% (0.0139) of line 27b. Ex								
enter 4% (0.04) of Part I, line 12	2, col. (b)						<i>)</i>		
2 Tax under section 511 (domestic									724 520
3 Add lines 1 and 2	is section 4047(s)/1) trusts and tou	vahla faundations a	مابر مناه				. 3		734,530.
	ic section 4947(a)(1) trusts and tax ne. Subtract line 4 from line 3. If ze								734,530.
6 Credits/Payments:	ie. Subtract lille 4 Holli lille 3. Il Ze	10 01 1655, 611161 -0					3		734,330.
	nd 2020 overpayment credited to 20	121	6a			665,15	7.		
	ax withheld at source		6b			,	0.		
	ension of time to file (Form 8868)		6c				0.		
	withheld		6d				0.		
	l lines 6a through 6d	_					. 7		665,157.
8 Enter any penalty for underpayr	ment of estimated tax. Check here	if Form 2220	is attac	ched			_		0.
9 Tax due. If the total of lines 5 ar	nd 8 is more than 7, enter amount o	owed					9		69,373.
10 Overpayment. If line 7 is more	than the total of lines 5 and 8, enter	the amount overp	aid			l	▶ 10		
11 Enter the amount of line 10 to be	e: Credited to 2022 estimated tax	<u> </u>			F	Refunded	11		000 DE (0004

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Part VI-A | Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	Х	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.LAVELLEFUND.ORG			
14	The books are in care of ► LAVELLE FUND FOR THE BLIND, INC. Telephone no. ► 212-668-9	801		
	Located at ▶ 307 WEST 38TH STREET, SUITE 1905, NEW YORK, NY ZIP+4 ▶100			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕨	•
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			
		000)_DE	(2021)

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1		Х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a(2		Х
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	Х
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4	Х	
(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)?			
(6) Agree to pay money or property to a government official? (Exception. Check "No"	1a(5		Х
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(6		Х
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
c Organizations relying on a current notice regarding disaster assistance, check here	▶□		
d 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 2021?	1d		Х
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2021?	2a		Х
If "Yes," list the years ►,,,,,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.)	N/A 2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
▶			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3a		Х
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after	ſ		
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to display the commissioner under section 4943(c)(7)) to display the commissioner under section 4943(c)(7) to display the	pose		
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 2021.)			<u> </u>
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t			
had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b		Х

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Ра	IT VI-B	Statements Regarding Activities for which F	orm 4720 May Be Re	equirea _{(contini}	ued)			
5a	•	year, did the foundation pay or incur any amount to:					Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?			5a(1)		Х
	` '	nce the outcome of any specific public election (see section 4955); o						
	any v	oter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes?							Х	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
		d)(4)(A)? See instructions				5a(4)	Х	
	` '	de for any purpose other than religious, charitable, scientific, literary,				- (-)		77
		evention of cruelty to children or animals?				5a(5)		Х
D	-	wer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		-		F.		Х
_		.4945 or in a current notice regarding disaster assistance? See instruons relying on a current notice regarding disaster assistance, check l				5b		
		ver is "Yes" to question 5a(4), does the foundation claim exemption fi						
u		re responsibility for the grant?				5d	Х	
		tach the statement required by Regulations section 53.4945-5(d).				- Ou		
6a		undation, during the year, receive any funds, directly or indirectly, to	nav nremiums on					
- Ou		benefit contract?				6a		х
b	Did the for	undation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		х
		6b, file Form 8870.	•••					
7a	At any tim	e during the tax year, was the foundation a party to a prohibited tax s	helter transaction?			7a		Х
		d the foundation receive any proceeds or have any net income attribu				7b		
8	Is the four	ndation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or					
		achute payment(s) during the year?				8		Х
Pa	rt VII	Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Man	agers, Highly				
1 L	ist all offi.	cers, directors, trustees, and foundation managers and t	neir compensation.					
		(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plar		(e) Exp	
		(a) Name and address	to position	enter -0-)	and deferred compensation		allowa	nces
SEI	STATEM	ENT 10		226,600.	61,591	-		0.
			-					
						-		
			-					
			-					
			1					
			1					
2 (Compensa	ation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."				
	(a) Na	me 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 plar and deferred compensation	s a	(e) Exp ccount, allowa	, other
MAN	NHI CHAU	J - 307 W 38TH ST, STE	CONTROLLER					
190	5, NEW Y	YORK, NY 10018	45.00	130,012.	34,301			0.
KHA	NH PHAN	- 307 W 38TH ST, STE	GRANT PROGRAM MANAG	ER	•			
190	5, NEW Y	YORK, NY 10018	45.00	113,300.	33,134			0.
OLI.	VER FUHI	RMANN - 307 W 38TH ST, STE	OFFICE & ADMINISTRA	IVE ASSOCIATE				
190	5, NEW	YORK, NY 10018	35.00	56,000.	22,378			0.
KAT:	E MORRIS	S - 307 W 38TH ST, STE	SCHOLARSHIP PROGRAM	COORDINATOR				
190	5, NEW Y	YORK, NY 10018	17.50	52,530.	454			0.
Tota	al number o	of other employees paid over \$50,000)			0
					_	coor	DE	10001

Part VII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ındation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
AMERICAN CAPITAL MANAGEMENT, LLC - 551		
MADISON AVENUE, SUITE 902, NEW YORK, NY 10022	INVESTMENT MGMT FEES	151,924.
UBS - 750 WASHINGTON BOULEVARD, 11TH FLOOR,		
STAMFORD, CT 06901	INVESTMENT MGMT FEES	116,472.
Total number of others receiving over \$50,000 for professional services		• 0
Part VIII-A Summary of Direct Charitable Activities		•
List the foundation's four largest direct charitable activities during the tax year. Include relevant		Evnonos
number of organizations and other beneficiaries served, conferences convened, research paper	s produced, etc.	Expenses
1		
ATT OF THE STATE OF		52 505
SEE STATEMENT 12		53,725.
2		
3		
-		
4		
7		
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax years.	ear on lines 1 and 2.	Amount
1		
SEE STATEMENT 13		332,000.
2		
All others are solded by a state of the stat		
All other program-related investments. See instructions.		
3		
_		
Total. Add lines 1 through 3	•	332,000.

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Р	All domestic foundations must complete this part. Foreign four	idations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	144,078,601.
	Average of monthly cash balances	1b	8,089,021.
C	Fair market value of all other assets (see instructions)	1c	
d		1d	152,167,622.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	152,167,622.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	2,282,514.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	149,885,108.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	7,494,255.
Р	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ and do not complete this part.)	d certain	
1	Minimum investment return from Part IX, line 6	1	7,494,255.
2a	Tax on investment income for 2021 from Part V, line 5 2a 734,530.		
b	Income tax for 2021. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b	2c	734,530.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,759,725.
4	Recoveries of amounts treated as qualifying distributions	4	48,504.
5	Add lines 3 and 4	5	6,808,229.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	6,808,229.
P	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	, , , , , , , , , , , , , , , , , , , ,	1a	6,697,959.
b	Program-related investments - total from Part VIII-B	1b	332,000.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII. line 4	4	7,029,959.

Form **990-PF** (2021)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				6,808,229.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:		0.		
a From 2016				
b From 2017 1,029,184.				
c From 2018 734,824.				
d From 2019 140,701.				
e From 2020				
f Total of lines 3a through e	1,904,709.			
4 Qualifying distributions for 2021 from				
Part XI, line 4: ►\$ 7,029,959.				
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2021 distributable amount				6,808,229.
e Remaining amount distributed out of corpus	221,730.			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,126,439.			
b Prior years' undistributed income. Subtract	_,,			
line 4b from line 2b		0.		
c Enter the amount of prior years'		••		
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2022				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2016				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022.				
Subtract lines 7 and 8 from line 6a	2,126,439.			
10 Analysis of line 9:				
a Excess from 2017 1,029,184.				
b Excess from 2018 734,824.				
Turner (man 0040 140 701				
d Excess from 2020	VNOV	er C	ONV.	
e Excess from 2021 2 21,7 30	AUGV			
193501 19 10 91				Form 990-PF (2021)

Part XIII Private Operating Fo	oundations (see ins	tructions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	2021, enter the date of the	ne ruling	>		
b Check box to indicate whether the found		g foundation described		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	
income from Part I or the minimum	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XIV Supplementary Info			if the foundation h	nad \$5,000 or mor	e in assets
at any time during th	ne year-see instru	ictions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who year (but only if they have contributed m			ributions received by the f	oundation before the clos	e of any tax
	101e tilali \$5,000). (See Se	:clion 507(u)(z).)			
IONE	400/		, II I		
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portion	n of the ownership of a pa	rtnership or
ONE	ra 1070 or groater interest				
	on Cront Cift Loon (Cabalarabin ata Di	cogramai		
,		• • • •	organizations and does no	nt accent unsolicited reque	ete for funde. If
the foundation makes gifts, grants, etc.,	-	•	•	·	sata for funda. II
a The name, address, and telephone numb	ner or email address of the	e nerson to whom appli	cations should be addresse	e ų.	
a The hame, address, and telephone hame	or or orman address or the	pordon to whom appin	sanono onodia so addresse		
SEE STATEMENT 14					
b The form in which applications should b	e submitted and informati	on and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations of the desired to	s, such as by geographical	areas, charitable fields	, kinds of institutions, or o	ther factors:	
	axpa	avel		OV	
23601 12-10-21					Form 990-PF (202

Part XIV Supplementary Information (continued)			
3 Grants and Contributions Paid During the Yea	ar or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	**	
a Paid during the year				
ADAPTIVE DESIGN ASSOCIATION	N/A	PC	#21-08D: EXPANSION OF	
313 W 36TH STREET			ADA'S TANGIBLE SYMBOL	
IEW YORK, NY 10018			CUE SET	15,10
AMERICAN FOUNDATION FOR THE BLIND 1.401 SOUTH CLARK STREET 1.4RLINGTON, VA 22202	N/A	PC	SEE STATEMENT	
,				86,25
	N/A	PC	#19-12: SUPPORTING	
L839 FRANKFORT AVENUE LOUISVILLE, KY 40206			FAMILIES BY GROWING APH FAMILYCONNECT	99,40
10015VIBBE, KI 40200			ATTI PARTITICONNECT	JJ, ±0
SSOCIATION FOR THE MULTIPLE IMPAIRED	N/A	PC	#21-11: HANDICAP	
BLIND			ACCESSIBLE VANS FOR	
35 BEAVERSON BLVD BLDG #13			TWO GROUP HOMES	200 00
BRICK, NJ 08723-7812				200,00
BENETECH	N/A	PC	#21-18: BOOKSHARE IN	
480 SOUTH CALIFORNIA AVENUE, SUITE 201			INDIA: PATHWAYS TO	
PALO ALTO, CA 94306			INDEPENDENCE	208,24
Total SEE CONTINU	ATION SHEET(S)		▶ 3a	5,751,24
Approved for future payment				
BENETECH	N/A	PC	#21-18: BOOKSHARE IN	
180 SOUTH CALIFORNIA AVENUE, SUITE 201			INDIA: PATHWAYS TO	
PALO ALTO, CA 94306			INDEPENDENCE	441,69
AM GANGA VIHAR PHASE II EXTENSION	N/A	NC (ER)	SEE STATEMENT	
ORADABAD, INDIA 2440021				
				244,73
CANCERCARE, INC. 275 7TH AVENUE, FLOOR 22 NEW YORK, NY 10001	N/A	PC	SEE STATEMENT	
				135,03
Total SEV S NATA	A TO THE TS)		> 3b	12,064,77

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
		(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction income
a					
b					
c					
a					
e					
† <u> </u>					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1,,	106	
investments			14	126.	
4 Dividends and interest from securities			14	2,569,728.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			-		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			-		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	50,666,892.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a OTHER INCOME			18	913.	
b INTEREST EARNED ON PRI			14	90.	
c RETURNED GRANTS					48,504.
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		53,237,749.	
13 Total. Add line 12, columns (b), (d), and (e)				13	53,286,253.
(See worksheet in line 13 instructions to verify calculations.)					•

Part XV-B	Relationship	of Activities to	the Accom	plishment o	of Exempt Pur	rposes
-----------	--------------	------------------	-----------	-------------	---------------	--------

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
11C	RETURNED GRANTS USED IN FURTHERANCE OF THE FUND'S EXEMPT PURPOSE.
-	
-	
-	
-	
-	
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Form **990-PF** (2021)

13-1740463

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

1	Did the o	rganization directly or indir	rectly engage in any o	of the followin	g with any other organizatio	on described in secti	ion 501(c)		Yes	No
	(other th	an section 501(c)(3) organ	izations) or in section	n 527, relating	to political organizations?					
а		s from the reporting founda								
										X
L								1a(2)		Х
D		nsactions:	hlaauaut auaaui-ati					45/4)		X
										X
		ormance of services or me						41.40		X
c			•	-	ns ployees					X
					dule. Column (b) should alv				ets	
ŭ		•	•	-	ed less than fair market valu	-	-		010,	
		d) the value of the goods, (,		· · · · · · · · · · · · · · · · · · ·		
(a)∟	ine no.	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·		e exempt organization	(d) Description	n of transfers, transactions	s, and sharing arra	angemen	ts
		,	, ,	N/A	· · ·					
2a		•	•		or more tax-exempt organiz					7
				ction 527?				Yes	X	No
<u>b</u>	If "Yes," (complete the following sche			(h) Tune of examination	T	(a) Description of rol	ationahin		
		(a) Name of org	anization		(b) Type of organization		(c) Description of rel	ationship		
		N/A								
	Unde	er penalties of perjury, I declare the	hat I have examined this	return, including	accompanying schedules and sta	I atements, and to the be	st of my knowledge	Mouth IDC	ioo	nio.
Sig	and b	pelief, it is true, correct, and com	plete. Declaration of prep	parer (other than	taxpayer) is based on all informat	tion of which preparer h	as any knowledge.	May the IRS or return with the shown below	prepare	er
He								X Yes		ν. No
	Sig	nature of officer or trustee			Date	Title				110
		Print/Type preparer's na		Preparer's si		Date	Check if	PTIN		
				•			self- employed			
Pa	id	ALEXANDER LAZZA	RUOLO	Alawan	der Lassaryolo	4/20/2022		P01775353		
	eparer	Firm's name ► CONDO	ON O'MEARA MCG	INTY & DO	NNELLY LA		Firm's EIN ▶ 1	.3-3628255		
Us	e Only						<u>1</u>			
		Firm's address ► ONE	BATTERY PARK	PLAZA, 7	TH FL.					
		NEW	YORK, NY 1000) 4			Phone no. 212-	661-7777		
								Form 99 0)-PF	(2021)

FORM 990-PF	OTHER I	NCOME	<u></u>	STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
OTHER INCOME INTEREST EARNED ON PRI RETURNED GRANTS	_	913. 90. 48,504.	90.	
TOTAL TO FORM 990-PF, PART I,	LINE 11	49,507.	1,003.	
FORM 990-PF	LEGAL	FEES	S	STATEMENT 2
DESCRIPTION		(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES
LAWYERS ALLIANCE FOR NEW YORK	2,370.	0		2,370.
TO FM 990-PF, PG 1, LN 16A =	2,370.	0		2,370.
FORM 990-PF	ACCOUNTI	NG FEES	<u> </u>	STATEMENT 3
DESCRIPTION			(C) ADJUSTED NET INCOME	
CONDON O'MEARA MCGINTY & DONNELLY LLP - AUDIT & TAX SERVICES	35,193.	21,003		14,190
TO FORM 990-PF, PG 1, LN 16B	35,193.	21,003		14,190.

(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
0.	0.		0.
37,196.			0.
151,924.			0.
•	116,472.		0.
•	0.		0.
2,687.	0.		2,687.
300.	0.		300.
4,105.	0.		4,105.
2,750.	0.		2,750.
315,434.	305,592.		9,842.
TAX	ES	S'	TATEMENT 5
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
660,000.	0.		0.
660,000.	0.		0 ,
	EXPENSES PER BOOKS 0. 37,196. 151,924. 116,472. 0. 2,687. 300. 4,105. 2,750. 315,434. TAX (A) EXPENSES PER BOOKS 660,000.	EXPENSES PER BOOKS 0. 0. 37,196. 151,924. 116,472. 116,472. 0. 2,687. 0. 300. 4,105. 2,750. 0. 315,434. 305,592. TAXES (A) EXPENSES PER BOOKS MENT INVEST- MENT INCOME 660,000. 0.	EXPENSES PER BOOKS MENT INVEST- PER BOOKS MENT INCOME 0. 0. 37,196. 37,196. 151,924. 151,924. 116,472. 0. 0. 2,687. 0. 300. 0. 4,105. 0. 2,750. 0. 315,434. 305,592. TAXES (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 660,000. 0.

FORM 990-PF	OTHER E	OTHER EXPENSES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TELEPHONE	1,876.	94.		1,782.	
OFFICE SUPPLIES	1,572.	0.		1,572.	
COMPUTER AND TECHNOLOGY					
EXPENSES	23,348.	0.		23,348.	
BUSINESS INSURANCE	4,042.	0.		4,042.	
POSTAGE AND DELIVERY	107.	0.		107.	
FILING FEES	1,785.	0.		1,785.	
OFFICE EQUIPMENT, FURNITURE,					
AND ENHANCEMENTS	2,748.	0.		2,748.	
OTHER	5,952.	0.		5,952.	
DUES AND SUBSCRIPTIONS	11,644.	0.		11,644.	
PROFESSIONAL DEVELOPMENT	777.	0.		777.	
TO FORM 990-PF, PG 1, LN 23	53,851.	94.		53,757.	

ND LOANS REPORTED S	SEPARATELY	STATEMENT 7
TERMS OF REPAY	YMENT I)	NTEREST RATE
		1.0000%
DESCRIPTION OF CONSIDERATION		FMV OF CONSIDERATION
,000. NOT APPLICABLE	_	0.
PURPOSE OF LOAN		
BALANCE DUE		T FMV OF LOAN
0	. 0	0.
TERMS OF REPAY	YMENT I	NTEREST RATE
		.0000%
DESCRIPTION OF CONSIDERATION		FMV OF CONSIDERATION
,000. NOT APPLICABLE	 3	0.
PURPOSE OF LOAN		
BALANCE DUE		T FMV OF LOAN
332,000	. 0	0.
	TERMS OF REPAY ALL PRINCIPAL INTEREST DUE 1 DESCRIPTION OF TONSIDERATION OOO. NOT APPLICABLE PURPOSE OF LOAN BALANCE DUE TERMS OF REPAY ALL PRINCIPAL INTEREST DUE 1 DESCRIPTION OF TONSIDERATION OOO. NOT APPLICABLE PURPOSE OF LOAN SCHOOL'S GENERAL CO PURPOSE OF LOAN SCHOOL'S GENERAL CO PURPOSE OF LOAN BALANCE DUE BALANCE DUE	ALL PRINCIPAL AND INTEREST DUE 12/15/21 DESCRIPTION OF T CONSIDERATION OOO. NOT APPLICABLE PURPOSE OF LOAN SCHOOL'S GENERAL CORPORATE PURPOSES OR OPERATING EXPENSES DOUBTFUL ACC. BALANCE DUE TERMS OF REPAYMENT ALL PRINCIPAL AND INTEREST DUE 7/31/21 DESCRIPTION OF T CONSIDERATION OOO. NOT APPLICABLE PURPOSE OF LOAN SCHOOL'S GENERAL CORPORATE PURPOSES OR OPERATING EXPENSES DOUBTFUL ACC. BALANCE DUE DOUBTFUL ACC. BALANCE DUE DOUBTFUL ACC. BALANCE DUE ALLOWANCE

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
EQUITY INCOME FUND ADM		7,572,850.	7,572,850.
EXPLORER FUND ADMIRAL		3,545,880.	3,545,880.
EXTENDED MKT INDEX INST		6,944,878.	6,944,878.
INST INDEX FUND INST		33,884,215.	33,884,215.
PRIMECAP CORE FUND		18,802,557.	18,802,557.
US GROWTH FUND ADMIRAL		7,122,584.	7,122,584.
INTER-TERM INVEST-GR ADM		1,798,669.	1,798,669.
LONG-TERM INVEST-GR ADM		1,930,496.	1,930,496.
SHORT-TERM INVEST-GR ADM		4,056,453.	4,056,453.
TOT INTL BOND IX INSTITL		6,664,052.	6,664,052.
TOTAL BOND MKT INDEX INST		7,919,639.	7,919,639.
INTERNATIONAL GROWTH ADM		13,018,299.	13,018,299.
INTERNATIONAL VALUE FUND		13,155,875.	13,155,875.
TOT INTL STOCK IX INST		26,263,067.	26,263,067.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	152,679,514.	152,679,514.
FORM 990-PF	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BALL CORP		130,469.	130,469.
MARRIOTT INTL INC NEW		203,264.	203,264.
BROOKFIELD FIN INC		210,838.	210,838.
SEAGATE HDD CAYMAN		35,537.	35,537.
CITIGROUP INC		102,038.	102,038.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	682,146.	682,146.

FORM 990-PF PART VII - LIST TRUSTEES AND	OF OFFICERS, DIRECTORS FOUNDATION MANAGERS		STAT	EMENT 10
NAME AND ADDRESS	TITLE AND COMPEN- AVRG HRS/WK SATION			EXPENSE
LOUIS D. PIZZARELLO, M.D., M.P.H. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018			0.	0.
HON. KEVIN B. MCGRATH, JR. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	VICE CHAIR & DIRECTOR	0.	0.	0.
JOHN L. CORCORAN, CPA 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	TREASURER & DIRECTOR	0.	0.	0.
DANIEL M. CALLAHAN 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	SECRETARY & DIRECTOR	0.	0.	0.
MARGARET DUFFY 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.
SISTER MARY FLOOD, O.P., M.D.,	DIRECTOR			
PH.D. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	1.00	0.	0.	0.
JANE B. O'CONNELL 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 2.00	0.	0.	0.
PAUL A. SIDOTI, M.D. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.
SHARON MCLENNON WIER, PH.D., MSED. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.
MARIO M. KRANJAC 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.

LAVELLE FUND FOR THE BLIND, INC.			13	-1740463
ALEXANDER G. LUNNEY 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.
JOSE M. ROMAN, D.MIN., J.D., M.A. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	DIRECTOR 1.00	0.	0.	0.
JOHN J. CAFFREY 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	EMERITUS 1.00	0.	0.	0.
J. ROBERT LUNNEY 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	EMERITUS 1.00	0.	0.	0.
VICTOR D. ZIMINSKY JR. 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	EMERITUS 1.00	0.	0.	0.
SUSAN G. OLIVO 307 WEST 38TH STREET, SUITE 1905 NEW YORK, NY 10018	EXECUTIVE DIRE		61,591.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	226,600.	61,591.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VI-B, LINE 5D

STATEMENT 11

GRANTEE'S NAME

DR. SHROFF'S CHARITY EYE HOSPITAL

GRANTEE'S ADDRESS

5027, KEDARNATH ROAD DARYAGANJ, NEW DELHI, INDIA, 110002

GRANT AMOUNT

DATE OF GRANT

AMOUNT EXPENDED

679,116. 07/12/17

558,842.

PURPOSE OF GRANT

TO ESTABLISH A SCALABLE AND REPLICABLE TRAINING MODEL FOR MID-LEVEL EYE CARE PROFESSIONALS THAT, BY PLACING MORE SUCH TRAINED PHYSICIANS AT DR. SHROFF'S AND OTHER NORTH INDIAN EYE HOSPITALS, WILL HELP INCREASE THE VOLUME, EFFICIENCY, ACCESSIBILITY, AND SUSTAINABILITY OF EYE CARE IN THE REGION'S HIGH-NEED SETTINGS.

NOTE: THIS IS A MULTI-YEAR GRANT APPROVED FOR \$679,116 OF WHICH THE LAVELLE FUND FOR THE BLIND, INC. HAS PAID \$78,186 IN 2021, \$135,235 IN 2020, \$125,333 IN 2019 AND \$340,362 IN 2017. THE LAVELLE FUND IS MONITORING THE GRANT CAREFULLY TO ENSURE THAT MONIES ARE SPENT AS PLANNED. THERE ARE NO REMAINING FUTURE COMMITMENTS ON THIS GRANT.

DATES OF REPORTS BY GRANTEE

7/31/21, 7/31/21, 8/14/19, 11/30/18

ANY DIVERSION BY GRANTEE

TO KNOWLEDGE OF THE FUND, NO GRANTEE DIVERSION OF FUNDS FROM GRANT PURPOSE.

RESULTS OF VERIFICATION

THE LAVELLE FUND HAD NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORTS RECEIVED, THEREFORE NO INDEPENDENT VERIFICATION IS REQUIRED TO BE UNDERTAKEN.

FUNDACION GUATEMALTECA PARA NINOS CON SORDOCEGUERA ALEX (FUNDAL)

GRANTEE'S ADDRESS

1A CALLE Y CARRETERA INTERAMERICANA, 0-20 ZONA 1 D GUATEMALA CITY, GUATEMALA CITY, GUATEMALA, 01057

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

399,000. 12/02/21

PURPOSE OF GRANT

TO SUPPORT THE "FORGING PATHS TOWARDS INCLUSION AND SUSTAINABILITY" PROJECT.

NOTE: THIS IS A MULTI-YEAR GRANT APPROVED FOR \$399,000 OF WHICH THE LAVELLE FUND FOR THE BLIND, INC. HAS PAID \$135,000 IN 2021. THE LAVELLE FUND IS MONITORING THE GRANT CAREFULLY TO ENSURE THAT MONIES ARE SPENT AS PLANNED. THE REMAINING FUTURE COMMITMENT ON THIS GRANT IS \$264,000.

DATES OF REPORTS BY GRANTEE

INITIAL REPORT DUE 11/01/22

ANY DIVERSION BY GRANTEE

TO KNOWLEDGE OF THE FUND, NO GRANTEE DIVERSION OF FUNDS FROM GRANT PURPOSE.

RESULTS OF VERIFICATION

NOT APPLICABLE AS THE GRANTEE HAS NOT YET SUBMITTED ANY PROGRESS REPORTS TO DATE.

CL GUPTA EYE INSTITUTE

GRANTEE'S ADDRESS

RAM GANGA VIHAR PHASE II EXTENSION , MORADABAD, INDIA, 244001

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

368,196. 12/07/21

PURPOSE OF GRANT

TO SUPPORT THE "ELIMINATE RURAL AVOIDABLE BLINDNESS BACKLOG DURING COVID-19 PANDEMIC IN WESTERN UTTAR PRADESH, INDIA" PROJECT. THIS IS A THREE-YEAR GRANT. THE YEAR-1 REPORT IS SCHEDULED FOR 11/15/2022.

NOTE: THIS IS A MULTI-YEAR GRANT APPROVED FOR \$368,196 OF WHICH THE LAVELLE FUND FOR THE BLIND, INC. HAS PAID \$123,466 IN 2021. THE LAVELLE FUND IS MONITORING THE GRANT CAREFULLY TO ENSURE THAT MONIES ARE SPENT AS PLANNED. THE REMAINING FUTURE COMMITMENT ON THIS GRANT IS \$244,730.

DATES OF REPORTS BY GRANTEE

INITIAL REPORT DUE 11/15/22

ANY DIVERSION BY GRANTEE

TO KNOWLEDGE OF THE FUND, NO GRANTEE DIVERSION OF FUNDS FROM GRANT PURPOSE.

RESULTS OF VERIFICATION

NOT APPLICABLE AS THE GRANTEE HAS NOT YET SUBMITTED ANY PROGRESS REPORTS.

ORGANISATION PREVENTION DE LA CECITE

GRANTEE'S ADDRESS

17 VILLA D'ALSIA PARIS, PARIS, FRANCE, 75014

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

5,089. 03/26/21

5,089.

PURPOSE OF GRANT

TO BUILD THE CAPACITY OF LIONS SIGHT FIRST MADAGASCAR, ENABLING THEM TO PREPARE FOR THE EVENTUAL DECREASE IN FUNDING FROM LIONS CLUB INTERNATIONAL FOUNDATION, AND SUSTAIN THEIR MUCH-NEEDED CATARACT PROGRAM THROUGH AN OWNERSHIP AND IMPLEMENTATION MODEL.

DATES OF REPORTS BY GRANTEE

6/29/21

ANY DIVERSION BY GRANTEE

TO KNOWLEDGE OF THE FUND, NO GRANTEE DIVERSION OF FUNDS FROM GRANT PURPOSE.

RESULTS OF VERIFICATION

THE LAVELLE FUND HAD NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORTS RECEIVED, THEREFORE NO INDEPENDENT VERIFICATION IS REQUIRED TO BE UNDERTAKEN.

SENSE INTERNATIONAL PER

GRANTEE'S ADDRESS

JR. DANIEL ALCIDES CARRIN NO. 202, OF. 205 SAN BORJA LIMA, LIMA, PERU, 041

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

69,566. 03/26/21

23,883.

PURPOSE OF GRANT

TO BE USED TO PROMOTE QUALITY AND INCLUSIVE EDUCATION EXPERIENCE FOR STUDENTS WITH DEAF BLINDNESS IN PERU.

NOTE: THIS IS A MULTI-YEAR GRANT APPROVED FOR \$69,566 OF WHICH THE LAVELLE FUND FOR THE BLIND, INC. HAS PAID \$23,883 IN 2021. THE LAVELLE FUND IS MONITORING THE GRANT CAREFULLY TO ENSURE THAT MONIES ARE SPENT AS PLANNED. THE REMAINING FUTURE COMMITMENT ON THIS GRANT IS \$45,683.

DATES OF REPORTS BY GRANTEE

3/01/22

ANY DIVERSION BY GRANTEE

TO KNOWLEDGE OF THE FUND, NO GRANTEE DIVERSION OF FUNDS FROM GRANT PURPOSE.

RESULTS OF VERIFICATION

THE LAVELLE FUND HAD NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORTS RECEIVED, THEREFORE NO INDEPENDENT VERIFICATION IS REQUIRED TO BE UNDERTAKEN.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 12

ACTIVITY ONE

THE BROTHER JAMES KEARNEY SCHOLARSHIP PROGRAM FOR THE BLIND AIMS TO HELP MAKE QUALITY UNDERGRADUATE AND GRADUATE EDUCATION AFFORDABLE FOR U.S. RESIDENTS WHO ARE LEGALLY BLIND AND FINANCIALLY NEEDY.

BY ASSISTING INDIVIDUALS WHO ARE LEGALLY BLIND OR VISUALLY IMPAIRED IN ATTAINING QUALITY EDUCATION, THE SCHOLARSHIP PROGRAM FURTHERS THE FUND'S EXEMPT PURPOSE BY ASSISTING INDIVIDUALS WHO ARE LEGALLY BLIND OR VISUALLY-IMPAIRED LIVE INDEPENDENT AND PRODUCTIVE LIVES. THE SCHOLARSHIP PROGRAM IS INTENDED TO SUPPORT A LEGALLY BLIND OR VISUALLY IMPAIRED STUDENT'S FULL-TIME PROGRAM OF STUDY LEADING TO A 4-YEAR (BACHELOR'S) DEGREE OR GRADUATE DEGREE PROGRAM.

IN 2021, THE FUND AWARDED A TOTAL OF \$335,915 IN SCHOLARSHIP GRANTS. THE COST OF ADMINISTERING THE SCHOLARSHIP PROGRAM WAS \$53,725.

TO FORM 990-PF, PART VIII-A, LINE 1

EXPENSES

53,725.

FORM 990-PF

SUMMARY OF PROGRAM-RELATED INVESTMENTS

STATEMENT 13

DESCRIPTION

PROGRAM-RELATED INVESTMENT LOAN TO THE LAVELLE SCHOOL FOR THE BLIND. THE LOAN BEARS A 0% INTEREST RATE WITH ALL PRINCIPAL OUTSTANDING DUE BY JULY 31, 2022, AND WITH PROCEEDS BEING USED TOWARD ANY OF THE SCHOOL'S GENERAL CORPORATE PURPOSES OR OPERATING EXPENSES. THE SCHOOL MAY ALSO CHOOSE TO PREPAY THIS LOAN IN WHOLE OR IN PART AT ANY TIME IN ITS DISCRETION.

TO FORM 990-PF, PART VIII-B, LINE 1

AMOUNT

332,000.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SUSAN G. OLIVO, EXECUTIVE DIRECTOR AND CEO LAVELLE FUND FOR THE BLIND, INC, 307 WEST 38TH ST, STE 1905 NEW YORK, NY 10018

TELEPHONE NUMBER

212-668-9801

EMAIL ADDRESS

SOLIVO@LAVELLEFUND.ORG

FORM AND CONTENT OF APPLICATIONS

IF YOUR ORGANIZATION IS SEEKING A GRANT, THE BEST PLACE TO START IS TO REVIEW GRANT GUIDELINES. PLEASE REFER TO WWW.LAVELLEFUND.ORG/PROPOSAL-GUIDELINES FOR INFORMATION.

IF YOU HAVE QUESTIONS, CONTACT THE FUND AT WWW.LAVELLEFUND.ORG/GENERAL-INQUIRIES.

AFTER REVIEWING THE GUIDELINES, APPLICATION LINKS CAN BE ACCESSED THROUGH THE APPLICATION SECTION OF THE ABOVE REFERENCED WEBSITE.

ANY SUBMISSION DEADLINES

PLEASE REFER TO DETAILS INDICATED ON WWW.LAVELLEFUND.ORG/HOW-TO-APPLY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE LAVELLE FUND FOR THE BLIND PROVIDES FUNDING TO ORGANIZATIONS WITH U.S. 501(C)(3) TAX-EXEMPT STATUS OR VERIFIABLE NON-U.S. CHARITABLE STATUS (IN THE CASE OF FOREIGN-BASED, NON-PROFIT ORGANIZATIONS WITHOUT A U.S.-BASED 501(C)(3) FISCAL INTERMEDIARY). SEE WWW.LAVELLEFUND.ORG/PROPOSAL-GUIDELINES/ FOR ADDITIONAL RESTRICTIONS.

3a Grants and Contributions Paid During the Year				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
- Name and address (name of Sasmisse)	or substantial contributor	recipient		
C. L. GUPTA EYE INSTITUTE	N/A	NC (ER)	#21-29ER: ELIMINATING RURAL AVOIDABLE BLINDNESS	
RAM GANGA VIHAR PHASE II EXTENSION MORADAB D, INDIA 2440021			BACKLOG DURING COVID19 PANDEMIC IN WESTERN UTTAR	102.466
MORADABID, INDIA 2440021			PRADESH (INDIA)	123,466.
	7.73	D.G.	#10 05 FINANCIAL AGGIGGIANGE AND GUDDODE DECORAN FOR	
CARE, INC. 2 5 7 H AVENUE, FLOOR 22	N/A	PC	#18-05: FINANCIAL ASSISTANCE AND SUPPORT PROGRAM FOR PEOPLE WITH OCULAR CANCERS (AND OTHER CANCERS	
NE PRK, NY 10001			AFFECTING VISION)	131,100.
\overline{c}				
CTATES FOR DISABILITY SERVICES	N/A	PC	#21-09D: EDUCATIONAL SERVICES FOR BLIND AND VISUALLY	
3 M C MANNING BLVD			IMPAIRED STUDENTS WITH DISABILITIES	
ALBAY, NY 12208-1708				10,000.
CFARAL ASSOCIATION FOR THE BLIND AND	N/A	PC	#19-19: VISION HEALTH AND WELLNESS AWARENESS	
V STALLY IMPAIRED			EXPANSION	
5 CHANT AVENUE				107 000
UTICA, NY 13501				127,993.
Cheanyo	N/A	PC	#21-28: CHCANYS VISION GRANT PHASE II	
11 ROADWAY RM 1402 NW Y RK NY 10006-1934				34,000.
				, ,
C RIS'IAN BLIND MISSION INTERNATIONAL,	N/A	PC	#19-02: SIMULATED OPHTHALMIC SURGICAL TRAINING	
P. BOX 340				
WHEATON, IL 60187				2,500.
CITY ACCESS NEW YORK, INC.	N/A	PC	#17-16: CAREER DISCOVERY PROJECT	
1207 CASTLETON AVENUE	[., -5			
STATEN ISLAND, NY 10310				85,103.
Total from continuation sheets	<u> </u>	1		5,142,254.

Recipient	If recipient is an individual,	Farmelation	Durance of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DOMINICAN COLLEGE OF BLAUVELT 470 WESTERN HIGHWAY ORANGEBURG, NY 10962	N/A	PC	#21-19: HYBRID ONLINE LEARNING FOR TEACHERS OF STUDENTS WHO ARE BLIND OR VISUALLY IMPAIRED (TVIS) INCLUDING THOSE WITH MULTIPLE DISABILITIES, IN THE GREATER NEW YORK METROPOLITAN AREA	107,858.
DOWN CAN COLLEGE OF BLAUVELT 4 0 W STERN HWY OP NO BURG, NY 10962	N/A	PC	SCH2019-2: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	10,478.
DC. N CAN COLLEGE OF BLAUVELT 400 m STERN HWY ORANG BURG, NY 10962	N/A	PC	SCH2014-2: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	11,721.
DI S'ROFF'S CHARITY EYE HOSPITAL 5000, KEDAR NATH ROAD, DARYAGANJ NEW DELHI, INDIA	N/A	NC (ER)	#17-08: DEVELOPMENT OF ACCESSIBLE, HIGH QUALITY AND EFFICIENT EYE CARE DELIVERY SYSTEM THROUGH A SCALABLE AND REPLICABLE MODEL OF ALLIED EYE HEALTH PERSONNEL	78,186,
FARRFIPLD UNIVERSITY 10 0 N. BENSON RD FAIRF ELD, CT 06824	N/A	PC	SCH2019-3: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	13,324.
FORDHAM UNIVERSITY 45 COLUMBUS AVE., 8TH FLOOR NEW YORK, NY 10023	N/A	PC	SCH2014-3: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	26,180.
FORDHAM UNIVERSITY 45 COLUMBUS AVE., 8TH FLOOR NEW YORK, NY 10023	n/A	PC	SCH2019-4: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	89,857.

3a Grants and Contributions Paid During the Year				
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
FREEDOM GUIDE DOGS FOR THE BLIND 1210 HARDSCRABBLE ROAD CASSVIL E, NY 13318	N/A	PC	#21-01: HOMETOWN TRAINING	108,000.
FARNS OF ARAVIND INC. // DBA ARAVIND EYE FORD TION INC. 4 7 F 57TH ST., APT. 7E NEW YORK, NY 10022	N/A	PC	#19-08: LEAP TOGETHER TOWARDS EXCELLENCE LAICOS COLLABORATIVE DEVELOPMENT SERIES TO ENHANCE EYE CARE	147,166.
FUNDA ION GUATEMALTECA PARA NINOS CON SCARCEGUERA ALEX (FUNDAL) 1A 44 LE Y CARRETERA INTERAMERICANA, 0-20 ZONA DE MIXCO GUATEMALA CITY, GUATEMALA	N/A	NC (ER)	#21-20: FORGING PATHS TOWARDS INCLUSION AND SUSTAINABILITY	135,000.
HAZIV INSTITUTE FOR THE BLIND AND VISUALLY IMPAIRED 700 TM STREET WINNETKA, IL 60093-0299	N/A	PC	#21-21: BRAILLE FOR EVERYDAY USE, A TACTILE BRAILLE WORKSHOP SERIES FOR PEOPLE WITH VISION LOSS	225,000.
HI EN ULLER INTERNATIONAL ON AG HAMMARSKJOLD PLAZA, FLOOR 2 N.W YORK, NY 10017	N/A	PC	#19-13: CHILDSIGHT NEW YORK	355,760.
HELEN KELLER INTERNATIONAL ON. DAG HAMMARSKJOLD PLAZA, FLOOR 2 NEW YORK, NY 10017	N/A	PC	#21-02: SCALING UP DIABETIC RETINOPATHY SERVICES IN BANGLADESH PROGRAM (SDRS III)	268,790.
HELEN KELLER SERVICES 180 LIVINGSTON STREET, 2ND FLOOR BROOKLYN, NY 11201	N/A	PC	#21-31: FEELING THROUGH CURRICULUM	197,912.
Total from continuation sheets				

Part XIV Supplementary Information (continued) 3a Grants and Contributions Paid During the Year Recipient If recipient is an individual, show any relationship to Purpose of grant or

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
HIMALAYAN CATARACT PROJECT	N/A	PC	#21-03: STRENGTHENING EYE CARE IN NEPAL	
PO BOX 55	17.11		21 05, BIRDROIMBRING BIL CIRCL IN RELIE	
WATERBU Y, VT 05676-0055				70,000
L PRASAD EYE INSTITUTE OF THE	N/A	PC	#20-13: FUTURISTIC VISION CENTRES	
MERICAN EYE CARE SOCIETY				
4 MO TREAL PLACE RCHETER, NY 14618				90,310,
$\overline{\Box}$				
LETE SCHOOL FOR THE BLIND	N/A	PC	#21-14: DISCRETIONARY FUNDING FOR MISCELLANEOUS	
3 AULDING AVENUE			PROJECTS	
BRONY, NY 10469				50,000.
$\stackrel{\frown}{\leftarrow}$				
LIVILE SCHOOL FOR THE BLIND	N/A	PC	#21-07D: GALA SUPPORT	
3000 PAULDING AVENUE				5 000
BRONX, NY 10469				5,000.
LL MOYNE COLLEGE	N/A	PC	SCH2014-4: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
14 SALT SPRINGS RD S RAC SE, NY 13214			3, JULY 2014 - JUNE 2019	3,185.
5.1AC 5E, N1 13214				3,103,
LEARNING ALLY	N/A	PC	#19-09: COLLEGE SUCCESS PROGRAM	
20 POSZEL ROAD PRINCETON, NJ 08540				200,000.
				200,000
LIGHTHOUSE GUILD	N/A	PC	#20-26: LGI REMOTE CARE NETWORK	
250 W. 64TH ST.	·			
NEW YORK, NY 10023				191,840.
Total from continuation sheets				

Total from continuation sheets

3a Grants and Contributions Paid During the Ye Recipient	If recipient is an individual	Foundation	Durnoss of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LUTHERAN BRAILLE WORKERS	N/A	PC	#21-22: BRINGING CHRIST'S LIGHT TO THE NATIONS	
PO BOX 5000				
YUCAIPA CA 92399-1450				99,254
MANUILLE COLLEGE	N/A	PC	SCH2014-5: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
2 00 URCHASE ST.	17,72		3, JULY 2014 - JUNE 2019	
PYACH SE, NY 10577				12,331
$\overline{\mathbf{O}}$				
MAN ST COLLEGE	N/A	PC	SCH2014-6: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
ORTH ROAD			3, JULY 2014 - JUNE 2019	
POUGP EEPSIE, NY 12601				57,672
\bigcirc				
M.R. COLLEGE	N/A	PC	SCH2019-7: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
3200 NORTH ROAD POUGHKEEPSIE, NY 12601			4, JULY 2019 - JUNE 2024	5,713
TOOGNALIE SEE, NE 12001				3,713
WANTE WANTE BEAU GOLLEGE	AT / 2	PC	GANASA A DROMINER WENDNEY GANOLINGVED DROGENY DWAGE	
MARYMOUNT MANHATTAN COLLEGE 22 71ST ST.	N/A	PC	SCH2014-7: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3. JULY 2014 - JUNE 2019	
N.W Y RK, NY 10021			o, coll boll boll	12,813
MARYMOUNT MANHATTAN COLLEGE	N/A	PC	SCH2019-8: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
22 E. 71ST ST.			4, JULY 2019 - JUNE 2024	
NEW YORK, NY 10021				4,782
NEW YORK PUBLIC LIBRARY	N/A	PC	#21-34D: BRIDGE FUNDING FOR THE TRANSLATING ACCESS	
445 FIFTH AVE 8TH FL NEW YORK, NY 10016-0133			PROJECT	12,774
				,.,-
Total from continuation sheets				

3a Grants and Contributions Paid During the Year				
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
NORTHEASTERN ASSOCIATION OF THE BLIND AT ALBANY INC. 301 WASHINGTON AVE.	N/A	PC	#21-16D: BUILDING THE CAPACITY TO SERVE LEGALLY BLIND PERSONS OF ALL AGES IN THE MIDDLE HUDSON VALLEY	
ALBANY NY 12206				10,000.
NAVE ASTERN ASSOCIATION OF THE BLIND AT A DAY INC. 3 WISHINGTON AVE.	N/A	PC	#20-19: RECREATION, INTEGRATION, SOCIALIZATION AND EDUCATION (RISE) PROGRAM	
ALAM, NY 12206				165,921.
				
O INTERNATIONAL 5 0 8 H AVE., 11TH FLOOR	N/A	PC	#20-14: SITAPUR EYE HOSPITAL - ORBIS COMPREHENSIVE CHILDHOOD BLINDNESS PROJECT	
NEW WRK, NY 10018				90,304.
OLGAN SATION PREVENTION DE LA CECITE	N/A	NC (ER)	#21-04: SUSTAINING A CATARACT PROGRAM IN MADAGASCAR	
PARIS, FRANCE 75014				5,089.
OUR SPACE OUR PLACE 190 REMONT ST BOX 325 B STO, MA 02116-4705	N/A	PC	#21-26D: AFTER SCHOOL AND CAREER EXPLORATION PROGRAMS FOR BLIND AND VISUALLY IMPAIRED YOUTH	10,000.
PERKINS SCHOOL FOR THE BLIND 1. NORTH BEACON STREET WATERTOWN, MA 02472	N/A	PC	#18-20: BRINGING THE EDUCATION OF CHILDREN WITH VISION IMPAIRMENT AND MULTIPLE DISABILITIES TO SCALE IN LATIN AMERICA	234,101.
PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON STREET WATERTOWN, MA 02472	N/A	PC	#21-23: BUILDING CAPACITY FOR EDUCATIONAL LEADERSHIP AND COVID-19 RECOVERY IN LATIN AMERICA 2021-2023	100,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	1 10 11 11 11 11 11			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
RESEARCH FOUNDATION OF CITY UNIVERSITY OF	N/A	PC	#18-16: ORIENTATION AND MOBILITY GRANT	
NEW YORK, HUNTER COLLEGE				
695 PARK AVENUE				
NEW YOR , NY 10065				161,467
RIA ES DEPARTMENT OF PSYCHIATRIC	N/A	PC	#21-05: EYE2EYE: A PEER SUPPORT PROGRAM FOR	
RELIP LITATION AND COUNSELING PROFESSIONS			INDIVIDUALS AND FAMILIES COPING WITH VISION LOSS	
6 F HES LANE WEST, 8TH FL				
PISCATAWAY, NJ 08854				193,757
$\overline{\mathbf{O}}$				
ST TODDLES INC.	N/A	PC	#21-24: INVESTIGATION OF INDEPENDENT WALKING BEFORE	
120 OUTE 52, SUITE 44			AND WITH PEDIATRIC BELT CANES	
FISHY LL, NY 12524				174,066
S.N. FINTERNATIONAL PERU	N/A	NC (ER)	#21-06: PROMOTING A QUALITY AND INCLUSIVE EDUCATION	
JI DINIEL ALCIDES CARRIN NO. 202, OF.		, ,	EXPERIENCE FOR STUDENTS WITH DEAF BLINDNESS IN PERU	
205, SAN BORJA LIMA, PERU 041				23,883
SITON FALL UNIVERSITY	N/A	PC	SCH2019-10: BROTHER KEARNEY SCHOLARSHIP PROGRAM,	
45 ENTRE ST			PHASE 4, JULY 2019 - JUNE 2024	
S UTH ORANGE, NJ 07079				43,568
\overline{C}				
ST. JOHN'S UNIVERSITY	N/A	PC	SCH2014-10: BROTHER KEARNEY SCHOLARSHIP PROGRAM,	
30 MARILLAC HALL			PHASE 3, JULY 2014 - JUNE 2019	
QUEENS, NY 11439				15,000
ST. JOHN'S UNIVERSITY	N/A	PC	SCH2019-11: BROTHER KEARNEY SCHOLARSHIP PROGRAM,	
308 MARILLAC HALL			PHASE 4, JULY 2019 - JUNE 2024	
QUEENS, NY 11439				29,291
Total from continuation sheets		l		

#21-	Purpose of grant or contribution -12: CARROLL INTERNS -13: FMDG MUSIC SCHOOL BREAKS DOWN BARRIERS -30: ALINA VISION VIETNAM	Amount 69,968, 75,000,
#21-	-13: FMDG MUSIC SCHOOL BREAKS DOWN BARRIERS	75,000
#21-		75,000
	-30: ALINA VISION VIETNAM	
	-30: ALINA VISION VIETNAM	94,992
		•
INDI	-15: THE INSTITUTE ON MOVEMENT STUDIES FOR EVIDUALS WITH VISUAL IMPAIRMENTS OR DEAF BLINDNESS NG WITH CAMP ABILITIES LAVELLE FUND FOR THE BLIND NT	114,466
wiтн	-15: TEACH TEACHERS & PARENTS TO TEACH CHILDREN H VI AND ADDITIONAL DISABILITIES IN PHYSICAL EVITY AND SPORTS	17,333
		4,970.
#19-	-04: BENNY INITIATIVE PHASE III IMPLEMENTATION	50,000
	PIPF	#21-33D: INCREASING AND DIVERSIFYING THE PROFESSIONAL PIPELINE: A FORUM #19-04: BENNY INITIATIVE PHASE III IMPLEMENTATION

Part XIV Supplementary Information (continued) 3a Grants and Contributions Paid During the Year If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to any foundation manager Foundation Amount status of Name and address (home or business) or substantial contributor recipient VISUALLY IMPAIRED ADVANCEMENT N/A #21-32: CAPITAL IMPROVEMENT TO VIA'S MAIN STREET PC1170 MAIN STREET CAMPUS IN BUFFALO BUFFALO NY 14209 50,000. CIS/SERVICES FOR THE BLIND AND N/A PC #20-21: LAVELLE SCHOLARS ASSISTANCE PROGRAM 2020-2024 EENWICH STREET, 3RD FLOOR NRK, NY 10013 119,010. S/SERVICES FOR THE BLIND AND N/A PC #20-03: EXPANSION OF VISIONS SERVICES IN WESTCHESTER ALY IMPAIRED COUNTY, ROCKLAND COUNTY AND THE HUDSON VALLEY EENWICH STREET, 3RD FLOOR NEW WRK, NY 10013 175,000. NS/SERVICES FOR THE BLIND AND N/A PC #21-17D: BUILDING THE CAPACITY TO SERVE LEGALLY BLIND LY IMPAIRED PEOPLE OF ALL AGES IN THE LOWER HUDSON VALLEY 5 EENWICH STREET, 3RD FLOOR NEW YORK, NY 10013 10,000.

Total from continuation sheets

3b Grants and Contributions Approved for Future	e 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
CANISIUS COLLEGE 2001 MAIN STREET BUFFALO NY 14208	N/A	PC	SCH2019-1: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	129,810.
CAULUS COLLEGE 2.01 MAIN STREET BY FA.O, NY 14208	N/A	PC	SCH2014-1: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	440,902.
DOWNICAN COLLEGE OF BLAUVELT 4.0 W STERN HWY CRANCEBURG, NY 10962	N/A	PC	SCH2014-2: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	533,291.
DOM: N CAN COLLEGE OF BLAUVELT 4EC VISTERN HWY ORANGEBURG, NY 10962	N/A	PC	SCH2019-2: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	234,287.
D MINIC N COLLEGE OF BLAUVELT 4.2 WESTERN HIGHWAY OF THE EBURG, NY 10962	N/A	PC	#21-19: HYBRID ONLINE LEARNING FOR TEACHERS OF STUDENTS WHO ARE BLIND OR VISUALLY IMPAIRED (TVIS) INCLUDING THOSE WITH MULTIPLE DISABILITIES, IN THE GREATER NEW YORK METROPOLITAN AREA	468,822.
FAIRFIELD UNIVERSITY 10.2 N. BENSON RD FAIRFIELD, CT 06824	N/A	PC	SCH2016-12: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	544,138.
FAIRFIELD UNIVERSITY 1073 N. BENSON RD FAIRFIELD, CT 06824	N/A	PC	SCH2019-3: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	229,444.
Total from continuation sheets				11,243,321.

3b Grants and Contributions Approved for Future Pay				
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
FORDHAM UNIVERSITY 45 COLUMBUS AVE., 8TH FLOOR NEW YOR., NY 10023	N/A	PC	SCH2014-3: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	175,011.
FOR M UNIVERSITY 4 COLUMBUS AVE., 8TH FLOOR NOW YORK, NY 10023	N/A	PC	SCH2019-4: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	293,835.
FIGURE GUIDE DOGS FOR THE BLIND ARDSCRABBLE ROAD CASSFILLE, NY 13318	N/A	PC	#21-01: HOMETOWN TRAINING	108,000.
FE. LOS OF ARAVIND INC. // DBA ARAVIND EYE FULD TION INC. 412 1 57TH ST., APT. 7E NEW YORK, NY 10022	N/A	PC	#19-08: LEAP TOGETHER TOWARDS EXCELLENCE LAICOS COLLABORATIVE DEVELOPMENT SERIES TO ENHANCE EYE CARE	135,368.
F NDACI N GUATEMALTECA PARA NINOS CON SCODOCEGUERA ALEX (FUNDAL) 14 JULIE Y CARRETERA INTERAMERICANA, 0-20 Z NA DE MIXCO GUATEMALA CITY, GUATEMALA	N/A	NC (ER)	#21-20: FORGING PATHS TOWARDS INCLUSION AND SUSTAINABILITY	264,000.
HELEN KELLER INTERNATIONAL ON DAG HAMMARSKJOLD PLAZA, FLOOR 2 NEW YORK, NY 10017	N/A	PC	#21-02: SCALING UP DIABETIC RETINOPATHY SERVICES IN BANGLADESH PROGRAM (SDRS III)	379,279.
HELEN KELLER INTERNATIONAL ONE DAG HAMMARSKJOLD PLAZA, FLOOR 2 NEW YORK, NY 10017	N/A	PC	#19-13: CHILDSIGHT NEW YORK	355,172.
Total from continuation sheets				<i>,</i>

	e 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
HELEN KELLER SERVICES 180 LIVINGSTON STREET, 2ND FLOOR BROOKLY , NY 11201	N/A	PC	#21-31: FEELING THROUGH CURRICULUM	149,668.
LE CONE COLLEGE 1119 ALT SPRINGS RD 5; AC SE, NY 13214	N/A	PC	SCH2019-5: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	150,000.
LINGYNE COLLEGE 1 ALT SPRINGS RD SYRACUSE, NY 13214	N/A	PC	SCH2014-4: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	417,508.
LIGHT OUSE GUILD 250 W 64TH ST. NEW YORK, NY 10023	N/A	PC	#20-26: LGI REMOTE CARE NETWORK	197,427.
MA THATTANVILLE COLLEGE 2900 PURCHASE ST. PURCH SE, NY 10577	N/A	PC	SCH2019-6: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	450,000.
MANHATTANVILLE COLLEGE 29.2 PURCHASE ST. PURCHASE, NY 10577	N/A	PC	SCH2014-5: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	530,351.
MARIST COLLEGE 3399 NORTH ROAD POUGHKEEPSIE, NY 12601	N/A	PC	SCH2019-7: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	244,287.

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor recipient Recipient If recipient is an individual, show any relationship to any relationship to any foundation manager or status of contribution recipient		Purpose of grant or contribution	Amount
N/A	PC	SCH2014-6: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	235,352.
N/A	PC	SCH2014-7: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	345,737.
N/A	PC	SCH2019-8: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	145,218.
N/A	PC	SCH2019-9: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	150,000.
N/A	PC	SCH2014-8: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 3, JULY 2014 - JUNE 2019	315,818.
łk N/A	PC	#19-15: LOW VISION REFERRAL IMPLEMENTATION	78,778.
N/A	PC	#20-19: RECREATION, INTEGRATION, SOCIALIZATION AND EDUCATION (RISE) PROGRAM	86,079.
	any foundation manager or substantial contributor N/A N/A N/A N/A N/A N/A	If recipient is an individual, show any relationship to any foundation manager or substantial contributor N/A PC N/A PC N/A PC N/A PC N/A PC N/A PC PC N/A PC	If recipient is an individual, show any relationship or substantial contributor Foundation status of recipient

3b Grants and Contributions Approved for Future Pa	If recipient is an individual,			
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
,	or substantial contributor	recipient		
PERKINS SCHOOL FOR THE BLIND	N/A	PC	#21-23: BUILDING CAPACITY FOR EDUCATIONAL LEADERSHIP	
175 NORTH BEACON STREET WATERTO N, MA 02472			AND COVID-19 RECOVERY IN LATIN AMERICA 2021-2023	100,000
R YES DEPARTMENT OF PSYCHIATRIC	N/A	PC	#21-05: EYE2EYE: A PEER SUPPORT PROGRAM FOR	
REMARKLITATION AND COUNSELING PROFESSIONS 6 15 P/ES LANE WEST, 8TH FL			INDIVIDUALS AND FAMILIES COPING WITH VISION LOSS	
Processian				193,757
O				
SOUTH TODDLES INC. 120 OUTE 52, SUITE 44	N/A	PC	#21-24: INVESTIGATION OF INDEPENDENT WALKING BEFORE AND WITH PEDIATRIC BELT CANES	
FISHVILL, NY 12524				161,478
$\stackrel{\frown}{\leftarrow}$				
S NEE INTERNATIONAL PERU J. NIEL ALCIDES CARRIN NO. 202, OF.	N/A	NC (ER)	#21-06: PROMOTING A QUALITY AND INCLUSIVE EDUCATION EXPERIENCE FOR STUDENTS WITH DEAF BLINDNESS IN PERU	
205, SAN BORJA LIMA, PERU 041			DATE DE LA COMPANION DE LA COM	45,683
SETON FALL UNIVERSITY 45 ENTRE ST	N/A	PC	SCH2019-10: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	
S WITH ORANGE, NJ 07079			1 mod 1, 00d1 2015 00M 2021	364,538
$\overline{\mathbf{O}}$				
SETON HALL UNIVERSITY	N/A	PC	SCH2014-9: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE	
45. CENTRE ST SOUTH ORANGE, NJ 07079			3, JULY 2014 - JUNE 2019	476,721
ST. JOHN'S UNIVERSITY 308 MARILLAC HALL	N/A	PC	SCH2019-11: BROTHER KEARNEY SCHOLARSHIP PROGRAM, PHASE 4, JULY 2019 - JUNE 2024	
QUEENS, NY 11439			1 HADE 4, COLI 2015 COME 2024	120,709
Total from continuation sheets		1		

Part XIV Supplementary Information (continued) 3b Grants and Contributions Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient ST. JOHN'S UNIVERSITY N/A PC SCH2014-10: BROTHER KEARNEY SCHOLARSHIP PROGRAM. 308 MARILLAC HALL PHASE 3, JULY 2014 - JUNE 2019 QUEENS NY 11439 330,682. MAS AQUINAS COLLEGE N/A PC SCH2014-11: BROTHER KEARNEY SCHOLARSHIP PROGRAM **BUTE 340** PHASE 3. JULY 2014 - JUNE 2019 RKILL NY 10976 558,401. N/A NOMAS AOUINAS COLLEGE PC SCH2019-12: BROTHER KEARNEY SCHOLARSHIP PROGRAM UTE 340 PHASE 4 JULY 2019 - JUNE 2024 LL NY 10976 150,000. RROLL CENTER FOR THE BLIND N/A #21-12: CARROLL INTERNS PC NTRE ST MA 02458-2530 144,546. E FIL MEN M. D'AGOSTINO GREENBERG MUSIC N/A PC #21-13: FMDG MUSIC SCHOOL BREAKS DOWN BARRIERS ROADWAY, SUITE 1904 RK NY 10023 75,000. HE EDED HOLLOWS FOUNDATION USA N/A PC #21-30: ALINA VISION VIETNAM FIFTH AVENUE, 6TH FLOOR NEW YORK NY 10003 105,008. THE RESEARCH FOUNDATION FOR SUNY N/A SO III FI #21-15: THE INSTITUTE ON MOVEMENT STUDIES FOR (BROCKPORT) INDIVIDUALS WITH VISUAL IMPAIRMENTS OR DEAF BLINDNESS 350 NEW CAMPUS DRIVE ALONG WITH CAMP ABILITIES LAVELLE FUND FOR THE BLIND BROCKPORT, NY 14420 GRANT 205,379.

Total from continuation sheets

3b Grants and Contributions Approved for Futur	e 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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
VISIONS/SERVICES FOR THE BLIND AND VISUALLY IMPAIRED	N/A	PC	#20-03: EXPANSION OF VISIONS SERVICES IN WESTCHESTER COUNTY, ROCKLAND COUNTY AND THE HUDSON VALLEY	
500 GREENWICH STREET, 3RD FLOOR			COUNTY, ROCKHAND COUNTY AND THE HODGON VALUET	
NEW YOR , NY 10013				175,000.
V CYS/SERVICES FOR THE BLIND AND	N/A	PC	#20-21: LAVELLE SCHOLARS ASSISTANCE PROGRAM 2020-2024	
5 0 GEENWICH STREET, 3RD FLOOR NP 1 RK, NY 10013				248,837.
O				
O)				
*				
<u>CD</u>				
ayer Copy				
<u>O</u>				
$\overline{\mathbf{O}}$				
Total from continuation sheets				

Part XIV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - AMERICAN FOUNDATION FOR THE BLIND
ENSURING STUDENTS WITH VISUAL IMPAIRMENTS HAVE ACCESS TO AND ENGAGEMENT
IN EDUCATION THROUGH NATIONAL DISSEMINATION ACTIVITIES
Taxpaver Copy

Part XIV Supplementary Information
3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - C. L. GUPTA EYE INSTITUTE
#21-29ER: ELIMINATING RURAL AVOIDABLE BLINDNESS BACKLOG DURING COVID19
PANDEMIC IN WESTERN UTTAR PRADESH (INDIA)
NAME OF RECIPIENT - CANCERCARE, INC.
#18-05: FINANCIAL ASSISTANCE AND SUPPORT PROGRAM FOR PEOPLE WITH
OCULAR CANCERS (AND OTHER CANCERS AFFECTING VISION)
Taxpaver Copy

123651 11-18-21

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

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

2021

LAVELLE FUND FOR THE BLIND, INC.

Employer identification number 13-1740463

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.

F	Part I Required Annual Payment							
1	Total tax (see instructions)						1	734,530.
_	5							
	a Personal holding company tax (Schedule PH (Form 1120), line				2a		-	
D	b Look-back interest included on line 1 under section 460(b)(2)				01			
	contracts or section 167(g) for depreciation under the income	tore	cast method		2b		-	
	• Cradit for fodoral toy paid on fuels (ago instructions)				00			
	c Credit for federal tax paid on fuels (see instructions)				2c		-	I
ว	d Total. Add lines 2a through 2c Subtract line 2d from line 1. If the result is less than \$500, do		complete or file this form	The cornor	ation		2d	
J			•	•			3	734,530.
1	Enter the tax shown on the corporation's 2020 income tax retu							,01,000.
7	or the tax year was for less than 12 months, skip this line and						4	64,843.
	of the tax year was for less than 12 months, skip this line and	UIILUI	the amount nom mic o c				-	
5	Required annual payment. Enter the smaller of line 3 or line	4. If	the corporation is require	d to skip lir	ne 4.			
٠	enter the amount from line 3			•	•		5	64,843.
F	Part II Reasons for Filing - Check the boxes below							,
	even if it does not owe a penalty. See instructions.		,	,	•			
6	The corporation is using the adjusted seasonal installn	nent	method.					
7	The corporation is using the annualized income installing							
8	The corporation is a "large corporation" figuring its firs			n the prior	year's tax.			
F	Part III Figuring the Underpayment							
			(a)		(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							1
	15th day of the 4th (Form 990-PF filers: Use 5th month),							
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	06/15	5/21	09/15/21		12/15/21
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,							
	enter 25% (0.25) of line 5 above in each column	10	7,606.		19,854.	26	,348.	608,981.
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	30,157.		20,000.	45	,000.	570,000.
	Complete lines 12 through 18 of one column							
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12			22,551.	22	,697.	41,349.
13	Add lines 11 and 12	13			42,551.	67,	,697.	611,349.
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	30,157.		42,551.	67,	,697.	611,349.
16	If the amount on line 15 is zero, subtract line 13 from line							
	14. Otherwise, enter -0-	16			0.		0.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17						
18	Overpayment. If line 10 is less than line 15, subtract line 10						Ţ	
	from line 15. Then go to line 12 of the next column	18	22,551.		22,697.	41,	,349.	

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

For Paperwork Reduction Act N

Form 2220 (2021)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21				
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23				
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27				
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal he	ere and on Form 1120, I	ine 34; or the comparab		3 \$ 0.

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

Form **2220** (2021)

Taxpayer Copy

Form 2220 (2021) FORM 990-PF Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

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

Part I Adjusted Seasonal Installment Method

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

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2018	1a				
b Tax year beginning in 2019	1b				
c Tax year beginning in 2020	1c				
2 Enter taxable income for each period for the tax year beginning in					
2021. See the instructions for the treatment of extraordinary items	2				
		First 4 months	First 6 months	First 9 months	Entire year
3 Enter taxable income for the following periods.		THOL 4 MOREIS	1 1131 0 1110111113	That a months	Littiro your
a Tax year beginning in 2018	3a				
b Tax year beginning in 2019	3b				
c Tax year beginning in 2020	3c				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the	_				
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
Add Pass Atherwoods C	_				
7 Add lines 4 through 6	7				
Divide line 7 by 2.0					
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8 b Extraordinary items (see instructions)	9a 9b				
c Add lines 9a and 9b	9c				
10 Figure the tax on the amt on In 9c using the instr for Form	90				
1120, Sch J, line 2, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a	10				
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b	114				
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10					
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See in tructions	18				
19 Total tax after credits. Subtract line 13 from 11 1	7	aver			
zero or less, enter -0-					

112821 01-06-22

Form **2220** (2021)

Form 2220 (2021) FORM 990-PF Page 4

Part II Annualized Income Installment Method

			(a)	(b)	(c)	(d)
			First 2	First 4	First 7	First 10
20	Annualization periods (see instructions)	20	months	months	months	months
	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21	364,789.	1,317,020.	3,010,814.	39,735,523.
22	Annualization amounts (see instructions)	22	6.000000	3.000000	1.714290	1.200000
23 a	Annualized taxable income. Multiply line 21 by line 22	23a	2,188,734.	3,951,060.	5,161,408.	47,682,628.
b	Extraordinary items (see instructions)	23b				
C	Add lines 23a and 23b	23c	2,188,734.	3,951,060.	5,161,408.	47,682,628.
	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24	30,423.	54,920.	71,744.	662,789.
	Enter any alternative minimum tax (trusts only) for each		·		·	
	payment period (see instructions)	25				
26	Enter any other taxes for each payment period. See instr.	26				
27	Total tax. Add lines 24 through 26	27	30,423.	54,920.	71,744.	662,789.
	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28				
	Total tax after credits. Subtract line 28 from line 27. If	20				
	zero or less, enter -0-	29	30,423.	54,920.	71,744.	662,789.
30	Applicable percentage	30	25%	50%	75%	100%
31	Multiply line 29 by line 30	31	7,606.	27,460.	53,808.	662,789.
Pa	rt III Required Installments					
	Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
	before completing the next column.		installment	installment	installment	installment
	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each					
	column from line 19 or line 31	32	7,606.	27,460.	53,808.	662,789.
	Add the amounts in all preceding columns of line 38.			7, 606	27, 460	F2 000
	See instructions	33		7,606.	27,460.	53,808.
34	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0	34	7,606.	19,854.	26,348.	608,981.
	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the		45.04	254 25	400 500	100 505
	instructions for line 10 for the amounts to enter	35	16,211.	351,054.	183,633.	183,632.
	Subtract line 38 of the preceding column from line 37 of the preceding column	36		8,605.	339,805.	497,090.

608,981. Form **2220** (2021)

680,722.

37

38



16,211.

7,606.

37 Add lines 35 and 36

See instructions

38 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10.

523,438.

26,348.

359,659.

19,854.

^{**} ANNUALIZED INCOME INSTALLMENT METHOD USING OPTION 1