			** PUBLIC DISCLOSURE COPY *	*				
	Ω	00	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047			
Forr	n y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (e	except private foundatio	ns) <b>2021</b>			
-			Do not enter social security numbers on this form as it may	y be made public.	Open to Public			
Intern	al Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the late		Inspection			
A For the 2021 calendar year, or tax year beginning $ m JUL1$ , $2021 m$ and ending $ m JUN$ $30$ , $2022 m$								
B C	heck if oplicab	le: C Name of	organization	D Employer identified	cation number			
	Addre	EDUC	ATIONAL ENRICHMENT FOUNDATION					
	Name Chang		usiness as	74-23545	78			
	Initial return		and street (or P.O. box if mail is not delivered to street address) Room/suit	te E Telephone number	r			
	Final return	5049	E. BROADWAY BLVD. 107	520-325-	8688			
	termir ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	876,856.			
	Amen return	1005	ON, AZ 85711	H(a) Is this a group re	eturn			
	Applied		nd address of principal officer: DAWN BELL	for subordinates	? Yes X No			
	pendi	SAME	AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No			
ΙT	ax-ex	empt status: [	X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) or 52	If "No," attach a	list. See instructions			
			EEFTUCSON.ORG	H(c) Group exemption				
_			X Corporation Trust Association Other ► L Yea	ar of formation: 1984 N	<b>I</b> State of legal domicile: $\mathrm{AZ}$			
Pa	rt I	Summary						
ė	1	Briefly describ	e the organization's mission or most significant activities: ${{{ m TO}}\;\;{ m PROVID}}$	E RESOURCES	TO EXPAND			
anc			ICH THE STUDENT LEARNING EXPERIENCE IN					
Activities & Governance			$\mathbf{x} \models \square$ if the organization discontinued its operations or disposed of mo	ore than 25% of its net as				
Ň			ing members of the governing body (Part VI, line 1a)		15			
8			ependent voting members of the governing body (Part VI, line 1b)		15			
ies			of individuals employed in calendar year 2021 (Part V, line 2a)		5			
ivit			of volunteers (estimate if necessary)		25			
Act			d business revenue from Part VIII, column (C), line 12		0.			
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.			
				Prior Year	Current Year			
ne			and grants (Part VIII, line 1h)	732,434.	763,092.			
Revenue			ce revenue (Part VIII, line 2g)	0.				
Rev			come (Part VIII, column (A), lines 3, 4, and 7d)	-2,836.	52,635.			
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	-20,490. 795,237.			
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	729,598. 427,724.	265,732.			
			nilar amounts paid (Part IX, column (A), lines 1-3)	427,724.	205,752.			
		<u> </u>	to or for members (Part IX, column (A), line 4)	209,560.	224,633.			
ses	15	Salaries, othe	compensation, employee benefits (Part IX, column (A), lines 5-10)	209,500.	224,055.			
Expenses	16a	Professional f	andraising fees (Part IX, column (A), lines 5-10)	0.	0.			
EXP				203,214.	252,153.			
			es (Part IX, column (A), lines 11a-11d, 11f-24e)	840,498.	742,518.			
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	-110,900.	52,719.			
-s	19	Revenue less	expenses. Subtract line 18 from line 12					
ance	~~	<b>T</b>		Beginning of Current Year 1,624,713.	End of Year 1,420,013.			
Net Assets or Fund Balances	20	Total assets (I		103,201.	30,724.			
let ∕ und	21		(Part X, line 26)	1,521,512.	1,389,289.			
	22 rt II	Net assets or	fund balances. Subtract line 21 from line 20	I,J4I,JI4•	I,JUJ,40J.			
		-	declare that I have examined this return, including accompanying schedules and state	mente and to the heet of m	knowledge and bolief it is			
			Declaration of preparer (other than officer) is based on all information of which prepar		י אווטישוטעטט מווע שפוופו, ול 3			
uu,	00110	sig and complete	become and on properties (other man endory to based on an internation of which propa	or mao any miomougo.				

Ciana	Signature of officer		Date
Sign Here	HELEN GOMEZ, TREASURE		
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	MONICA A. VERA, CPA	MONICA A. VERA, CP	A 04/04/23 self-employed P01456278
Preparer	Firm's name <b>BEACHFLEISCHMAN</b>	PLLC	Firm's EIN ▶ 86-0683059
Use Only	Firm's address 1985 E. RIVER RC	AD, SUITE 201	
	TUCSON, AZ 85718		Phone no. 520 - 321 - 4600
May the I	RS discuss this return with the preparer shown ab	ove? See instructions	X Yes No
			- 000

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

	990 (2021) EDUCATIONAL ENRICHMENT FOUNDATION t III Statement of Program Service Accomplishments	74-2354578 Pa
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	TO PROVIDE RESOURCES TO EXPAND AND ENRICH THE STUDENT	LEARNING
	EXPERIENCE IN THE TUCSON UNIFIED SCHOOL DISTRICT.	
2	Did the organization undertake any significant program services during the year which were not listed on t prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ices?
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program servic	es, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations t	o others, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 478,976 • including grants of \$ 265,732 • )	(Revenue \$
	EEF OFFERS THE FOLLOWING PROGRAMS TO TUSD STUDENTS AN	ND EDUCATORS:
	STUDENT BASIC NEEDS: DISADVANTAGED TUSD STUDENTS WERE	E HELPED TO OBTAI
	326 PAIRS OF SHOES, 840 PAIRS OF SOCKS, 100 SCHOOL UN	NIFORMS, 730
	BACKPACKS, 175 UNDERGARMENTS, AND 120 EYE EXAMS AND (	
	ADDITIONALLY, 30 REFUGEE STUDENTS RECEIVED SPORTS PHY	
	COULD PARTICIPATE IN SCHOOL SPORTS. TO RELIEVE EXCONO	
	\$30,000 IN (\$25-\$50) GROCERY GIFT CARDS WERE PROVIDE	D TO 1,000 FAMILI
	DURING HOLIDAY SEASON.	
	CLASSROOM GRANTS PROVIDE SUPPORT TO EDUCATORS HELPING	
	OWN OUT-OF-POCKET EXPENSES TO SUPPOER THEIR CLASSROOM	
<u>/h</u>		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ Total program service expenses ► 478,976.	)
4e	Total program service expenses ► 478,976.	Form <b>990</b>
32002	12-09-21 SEE SCHEDULE O FOR CONTINUATION	
	2 404 759078 25978 2021.05070 EDUCATIONAL ENRIC	

Form 990 (	2021)	EDUCATIONAL
Part IV	Checklist o	f Required Schedules

EDUCATIONAL ENRICHMENT FOUNDATION

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? If "Yes," complete Schedule C, Part II	4		- 23
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
~~	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		x
		<b>2</b> 1		

132003 12-09-21

3 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

Form	990	(2021)
	330	(2021)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
_0	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
2	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
d		28a		x
h	"Yes," complete Schedule L, Part IV	20a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		- 23
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		x
00	"Yes," complete Schedule L, Part IV	28c 29	Х	- 23
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	- 23	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>			x
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
132004	12-09-21	Form	990	(2021)
	4			

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

2021)	EDUCATIONAL	ENRICHMENT	FOUNDATION
Statements	Regarding Other IR	S Filings and Tax	Compliance (continued)

Form 990 (2021)

Part V

					Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		_					
	filed for the calendar year ending with or within the year covered by this return	2a	5		37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions	s				37		
				3a		X		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other							
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X		
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
	any contributions that were not tax deductible as charitable contributions?			6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribut							
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).					x		
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pay							
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired					
	to file Form 8282?			7c		Х		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrad	xt?	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?		7f		Х		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	999 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation f	ile a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained							
				8				
9	Sponsoring organizations maintaining donor advised funds.							
а				9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders	11a						
	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?			13a				
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
-	organization is licensed to issue qualified health plans	13b						
с	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
10	excess parachute payment(s) during the year?			15		x		
	If "Yes," see the instructions and file Form 4720, Schedule N.			10				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmer	it inco	me?	16		X		
10	If "Yes," complete Form 4720, Schedule O.	100						
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	anv						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17				
	If "Yes," complete Form 6069.							
12200	5 12-09-21 5			Form	1 990	(2021)		
	404 759078 25978 2021.05070 EDUCATIONAL EN	RICH	MENT FOUN					
			<b> 00</b> M		-			

Form 990	(2021)
----------	--------

X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

1a	ion A. Governing Body and Management				Yes	
	Enter the number of voting members of the governing body at the and of the tax year				Vaa	
	Enter the number of veting members of the governing body at the end of the tax year		4 -	·	res	N
	Enter the number of voting members of the governing body at the end of the tax year	1a	15	4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		4 -			
	Enter the number of voting members included on line 1a, above, who are independent		15	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	nip with any ot	her			
	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under t	he direct supe	ervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed	?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?		5		
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint one or				
	more members of the governing body?			7a		
	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the follow	ring:			
a	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	Γ
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					Γ
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
ect	ion B. Policies (This Section B requests information about policies not required by the Internal I	Revenue Code	.)			
					Yes	
0a	Did the organization have local chapters, branches, or affiliates?			10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such					Γ
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	Х	T
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	,				t
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	Γ
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Х	t
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "					t
	on Schedule O how this was done			12c	х	
	Did the organization have a written whistleblower policy?			13	Х	t
	Did the organization have a written document retention and destruction policy?			14	Х	t
	Did the process for determining compensation of the following persons include a review and appro					t
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		dont			
	The organization's CEO, Executive Director, or top management official			15a	x	E
	Other officers or key employees of the organization			15a	<u></u>	+
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			130		┢
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a				
				16a		ſ
	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu			108		┢
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org		aliun			
				166		L
	exempt status with respect to such arrangements?			16b		L
						_
	List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 000 T (ac.	ation 501/2)/0	)e ontre		
		and 990-1 (sec	101 501(0)(3	)s only	) avai	a
	for public inspection. Indicate how you made these available. Check all that apply.           Own website         Another's website         X         Upon request         Other (explain the content of the content	in on Schodul				
•		in on Schedule		nd #	oo!-'	
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or attempting quality is a write the terrest of the second se	Connict of Intel	est policy, ar	ia tinai	ICIAI	
	statements available to the public during the tax year.	a alva av 1	unta 🖒			
	State the name, address, and telephone number of the person who possesses the organization's b $HELEN GOMEZ - 520 - 325 - 8688$	ooks and reco	oras 🗩			
	5049 E. BROADWAY BLVD., 107, TUCSON, AZ 85711					
				F .		
2006	12-09-21 6			Form	9 <b>90</b>	(2

Part VII	Co	mpensation	of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensate	d
	์ Em	ployees, and	d Independe	ent Contra	ctors				

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per	(do box	not c , unle	(C Pos heck ss pe	<b>C)</b> itior more rson	ן than is bot	one h an	(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Offlicer		Highest compensated sant/vo	Ĺ	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) DAWN BELL	40.00			37				07 476	0	15 004
EXECUTIVE DIRECTOR				X		-		87,476.	0.	15,824.
(2) AGNES ATTAKAI	0.00	v						0	0.	0
BOARD MEMBER		X						0.	0.	0.
(3) DR. ANNE DUDLEY	0.00	x						0.	0.	0.
BOARD MEMBER (4) IVAN ESCOBOSA	1.00							0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(5) LISA GONZALES	2.00					-		0.	• •	0.
BOARD MEMBER	2.00	x						0.	Ο.	0.
(6) ALMA INIGUEZ	1.00								••	<b>0</b> .
BOARD MEMBER	1.00	x						0.	Ο.	0.
(7) MARICELA MEZA	1.00									
BOARD MEMBER		x						0.	Ο.	0.
(8) MARIA PARHAM	1.00							•••		
BOARD MEMBER		x						0.	0.	0.
(9) DR. SHANNON ROBERTS	1.00									
BOARD MEMBER		x						0.	0.	0.
(10) MARISSA L. SITES	1.00									
BOARD MEMBER		x						0.	0.	0.
(11) XAVIER WALKER	2.00									
BOARD MEMBER		X						0.	Ο.	0.
(12) JEFFREY SAWYER	2.00									
BOARD MEMBER		X						0.	0.	0.
(13) GABRIEL TRUJILLO (EX OFFICIO)	0.00									
BOARD MEMEBER		X						0.	0.	0.
(14) AMANDA THOMAS	2.00									
PRESIDENT		Х		Х				0.	0.	0.
(15) RYAN C. ANDERSON	1.00									
VICE PRESIDENT		Х		X				0.	0.	0.
(16) RICARDO HERNANDEZ	2.00								_	-
TREASURER		Х		X				0.	0.	0.
						1				- 000 (222

132007 12-09-21

Form 990 (2021)

09070404 759078 25978

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

7

Form 990 (2021) EDUCATIO	NAL ENR	ICI	IME	ENT	ΓI	FOU	JN	DATION	74-2	3545	578	Page	∋ <b>8</b>
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	vees,	, and	d Hi	ghes	st C	Compensated Employe	es (continued)				
(A)	(B)			(0		-		(D)	(E)			(F)	
Name and title	Average			Posi	ition			Reportable	Reportable	,		mated	
	hours per					than d is both		compensation	compensatio			ount of	
	week					or/trus		from	from related			ther	
	(list any	ъ						the	organization			ensatio	<b>_</b>
	hours for	irect							U U				n
	related	or d	ee			sated		organization	(W-2/1099-MI			m the	
	organizations	Istee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	,	•	nization	
	below	al tr	onal		loye	e con		1099-NEC)				related	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgar	nizations	5
	1110)	Ĕ	lus	ŧ	Ke)	en <u>H</u> ic	ß						
		-											
		-											
1b Subtotal								87,476.		0.	15	,824	4.
								0.		0.			<u>.</u>
c Total from continuation sheets to Part V								87,476.		0.	15	,824	
d Total (add lines 1b and 1c)								-		-	1.5	,024	± •
2 Total number of individuals (including but	not limited to th	nose	liste	ed at	oove	e) wh	no r	received more than \$100	,000 of reportab	ble			~
compensation from the organization													0
										-		Yes N	lo
3 Did the organization list any former officer	r, director, trust	ee, I	key e	empl	loye	e, or	' hig	phest compensated emp	oloyee on				
line 1a? If "Yes," complete Schedule J for	such individual										3	2	X
4 For any individual listed on line 1a, is the s													
and related organizations greater than \$15											4	2	X
5 Did any person listed on line 1a receive or									idual for convicor	F	•		_
					-			-			-	5	X
rendered to the organization? If "Yes," con	npiele Schedul	eji	or su	icn	bers	SON .					5	2	7
Section B. Independent Contractors													
1 Complete this table for your five highest c										npensa	ation fro	om	
the organization. Report compensation for	r the calendar y	ear	endiı	ng w	vith	or w	ithi	n the organization's tax	year.				
(A)								(B)			(C)		
Name and busines	s address	N	ONE	6				Description of s	ervices	Co	ompen	sation	
2 Total number of independent contractors	(including but r	not li	mite	d to	tho	se lis	stec	d above) who received n	nore than				
\$100,000 of compensation from the organ	ization 🕨				_ (	)							
											Form 9	<b>90</b> (202	21)
												•	

132008 12-09-21

Forn	n 990	0 (2	EDUCATIONAL E	NRICHMENT	FOUNDATI	ON	74-2354	578 Page 9
	rt V							
			Check if Schedule O contains a response	or note to any line	in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated	(D) Revenue excluded
nts its	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
Âŋ. Aŋ.			Fundraising events 1c					
Gift lar			Related organizations 11					
ini's		е	Government grants (contributions) 1e					
rior S		f	All other contributions, gifts, grants, and					
jë t			similar amounts not included above If	763,092.				
and the second		g	Noncash contributions included in lines 1a-1f	62,150.				
<u>a Ö</u>		h	Total. Add lines 1a-1f		763,092.			
				Business Code				
Program Service Revenue	2	а						
ue v		b						
ven S		С						
Be		d						
Pro		e						
_			All other program service revenue					
	3	g	Total. Add lines 2a-2f					
	3		other similar amounts)		74,971.			74,971.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
	_		(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)	►				
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a 38,328.</b>					
0		b	Less: cost or other basis					
evenue			and sales expenses					
eve			Gain or (loss)		22 226			22 226
يد ت			Net gain or (loss)	▶	-22,336.			-22,336.
Other Re	8	а	Gross income from fundraising events (not					
0			including \$ of					
			contributions reported on line 1c). See Part IV, line 18 8a	0.				
		h	Part IV, line 18         8a           Less: direct expenses         8b	20,955.				
			Net income or (loss) from fundraising events		-20,955.			-20,955.
			Gross income from gaming activities. See		- ,			
		-	Part IV, line 19					
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities	►				
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold					
		с	Net income or (loss) from sales of inventory	▶				
sr				Business Code				
eor	11	а	MISCELLANEOUS INCOME	900009	465.			465.
Miscellaneous Revenue		b				ļ	ļ	
Sce		c		<b>├</b> ─── <b>│</b>				
Ϊ			All other revenue		465.			
		е	Total. Add lines 11a-11d	····· •	795,237.	0.	0.	32,145.
10000	12	00	Total revenue. See instructions	▶	1,5,2,1,0			Form <b>990</b> (2021)
13200	12-	-09-	-21					10111 330 (2021)

9

EDUCATIONAL ENRICHMENT FOUNDATION

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

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	265,732.	265,732.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	180,409.	59,535.	75,772.	45,102
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	24,836.	8,196.	10,431.	6,209
10	Payroll taxes	19,388.	6,398.	8,143.	4,847
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	31,293.		31,293.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	250.		250.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	19,998.	8,648.	11,350.	
12	Advertising and promotion	12,738.			12,738
13	Office expenses	22,774.	2,982.	13,394.	6,398
14	Information technology	6,153.		6,153.	
15	Royalties				
16	Occupancy	20,142.	6,647.	8,460.	5,035
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,244.		5,244.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,605.	1,520.	1,934.	1,151
23	Insurance	3,952.	1,304.	1,660.	988
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	FISCAL SPONSORED PROJEC	118,014.	118,014.		
b	DUES & SUBSCRIPTIONS	5,816.		5,816.	
с	DONOR & VOLUNTEER EXPEN	1,174.		691.	483
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	742,518.	478,976.	180,591.	82,951
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	0 12-09-21				Form <b>990</b> (202 <sup>-</sup>

132010 12-09-21

09070404 759078 25978

10 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net

#### 172,712. 221,045. Cash - non-interest-bearing 1 1 414,730. 287,856. 2 2 Savings and temporary cash investments 50. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 4 Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined 6 7 2

(A)

Beginning of year

(B)

End of year

0.

8	Inventories for sale or use				8	
9				4,404.	9	1,490.
10a	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	32,971. 14,748.			
b	Less: accumulated depreciation	10b	14,748.	22,828.	10c	18,223. 891,399.
11	Investments - publicly traded securities			1,009,989.	11	891,399.
12	Investments - other securities. See Part IV, line 1	1			12	
13	Investments - program-related. See Part IV, line	11			13	
14	Intangible assets				14	
15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equa			1,624,713.	16	1,420,013.
17	Accounts payable and accrued expenses			66,892.	17	30,724.
18	Grants payable			36,309.	18	0.
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete F	Part IV o	of Schedule D		21	
22	Loans and other payables to any current or form	ner offic	er, director,			
	trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
	controlled entity or family member of any of thes	e perso	ons		22	
23	Secured mortgages and notes payable to unrela	ted thir	d parties		23	
24	Unsecured notes and loans payable to unrelated	d third p	arties		24	
25	Other liabilities (including federal income tax, page	yables t	o related third			
	parties, and other liabilities not included on lines	17-24).	Complete Part X			
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			103,201.	26	30,724.
	Organizations that follow FASB ASC 958, che	ck here				
	and complete lines 27, 28, 32, and 33.			220 806		465 004
27	Net assets without donor restrictions			330,726.	27	465,224.
28	Net assets with donor restrictions			1,190,786.	28	924,065.
	Organizations that do not follow FASB ASC 9	58, che	ck here 🕨 🛄			
	and complete lines 29 through 33.					
29	Capital stock or trust principal, or current funds				29	
30	Paid-in or capital surplus, or land, building, or eq				30	
31	Retained earnings, endowment, accumulated in			1 501 510	31	1 200 200
32	Total net assets or fund balances			1,521,512.	32	1,389,289.
33	Total liabilities and net assets/fund balances			1,624,713.	33	1,420,013.
						Form <b>990</b> (2021)

Form 990 (2021)

Assets

Liabilities

Net Assets or Fund Balances

132011 12-09-21

09070404 759078 25978

Dort VI Descus illustices of black Associate		ιu	ge <b>12</b>
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response or note to any line in this Part XI			
1 Total revenue (must equal Part VIII, column (A), line 12)		5,2	
2 Total expenses (must equal Part IX, column (A), line 25) 2		2,5	
3 Revenue less expenses. Subtract line 2 from line 1 3			19.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	1,52		
5 Net unrealized gains (losses) on investments 5	-18	4,9	42.
6 Donated services and use of facilities6			
7 Investment expenses7			
8 Prior period adjustments 8			
9 Other changes in net assets or fund balances (explain on Schedule O) 9			0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
column (B))	1,38	9,2	89.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>	
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
separate basis, consolidated basis, or both:			
Separate basis Consolidated basis Both consolidated and separate basis			
<b>b</b> Were the organization's financial statements audited by an independent accountant?	2b	Х	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis	s,		
consolidated basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit	t,		
review, or compilation of its financial statements and selection of an independent accountant?		Х	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule	O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Au	udit		
Act and OMB Circular A-133?	За		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au	udit		
or audits, explain why on Schedule O and describe any steps taken to undergo such audits			

Form **990** (2021)

132012 12-09-21

SCHEDULE A	١
------------	---

Department of the Treasury

Internal Revenue Service

(Form 990)

## Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization	
--------------------------	--

Employer identification number

			RICHMENT FOU					4-2354578		
Part I	Reason for Public	Charity Status.	(All organizations must c	omplete tl	his part.) S	See instruction	S.			
The orga	anization is not a private found	dation because it is: (	For lines 1 through 12, c	heck only	one box.)					
1	A church, convention of ch	urches, or associatio	on of churches described	d in <b>sectio</b>	on 170(b)( <sup>.</sup>	1)(A)(i).				
2	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A medical research organiz	ation operated in co	njunction with a hospita	described	d in <b>sectio</b>	on 170(b)(1)(A)	(iii). Enter	the hospital's name,		
	city, and state:									
5	An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental u	nit describ	oed in		
	section 170(b)(1)(A)(iv). (C	Complete Part II.)								
6	A federal, state, or local go	vernment or governn	nental unit described in a	section 17	70(b)(1)(A)	)(v).				
7 X	An organization that norma	ally receives a substa	intial part of its support f	rom a gov	ernmental	l unit or from th	ne general	public described in		
	section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9	An agricultural research org	ganization described	in section 170(b)(1)(A)(	<b>ix)</b> operate	ed in conju	unction with a l	and-grant	college		
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of	the colleg	e or		
	university:									
10	An organization that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, membersh	nip fees, ar	nd gross receipts from		
	activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of it	s support	from gross investment		
	income and unrelated busi	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	uired by the org	ganization	after June 30, 1975.		
	See section 509(a)(2). (Co	mplete Part III.)								
11 📃	An organization organized	and operated exclus	ively to test for public sa	ifety. See	section 50	09(a)(4).				
12	An organization organized a	and operated exclus	ively for the benefit of, to	perform	the function	ons of, or to ca	rry out the	e purposes of one or		
	more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section 5	<b>09(a)(3).</b> (	Check the box on		
_	lines 12a through 12d that	describes the type of	of supporting organizatio	n and con	nplete line	s 12e, 12f, and	l 12g.			
a	<b>Type I.</b> A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported or	ganization(s), t	ypically by	<i>y</i> giving		
	the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting		
_	organization. You must o	complete Part IV, Se	ections A and B.							
b L	<b>Type II.</b> A supporting org	anization supervised	l or controlled in connec	tion with it	ts support	ed organizatio	n(s), by ha	iving		
	control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manag	ge the sup	ported		
_	organization(s). You mus	t complete Part IV,	Sections A and C.							
c L	Type III functionally inte	egrated. A supporting	g organization operated	in connec	tion with,	and functional	y integrate	ed with,		
_	its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.				
d	Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection \	with its suppor	ted organi	zation(s)		
	that is not functionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	equirement and	l an attent	iveness		
_	requirement (see instruct		-							
e∟	Check this box if the orga					а Туре I, Туре	II, Type III			
	functionally integrated, o				zation.					
	ter the number of supported of									
<b>g</b> Pr	ovide the following information (i) Name of supported	n about the supporte (ii) EIN	ed organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monoton	(vi) Amount of other		
	organization		(described on lines 1-10	in your governi	ing document?	support (see ins	-	support (see instructions)		
			above (see instructions))	Yes	No		,			
Total										
								1		

#### Schedule A (Form 990) 2021

#### EDUCATIONAL ENRICHMENT FOUNDATION

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

fails to qualify under the tests listed below, please complete Part II	I.)
--	-----

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	605,043.	842,408.	852,753.	732,434.	763,092.	3,795,730.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge $\dots$								
4	Total. Add lines 1 through 3	605,043.	842,408.	852,753.	732,434.	763,092.	3,795,730.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						104,892.		
_	Public support. Subtract line 5 from line 4.						3,690,838.		
Sec	ction B. Total Support								
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
7	Amounts from line 4	605,043.	842,408.	852,753.	732,434.	763,092.	3,795,730.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	22 405		42 242	24.240	<b>F4 0F4</b>			
	and income from similar sources $\dots$	33,427.	34,474.	43,248.	34,312.	74,971.	220,432.		
9	Net income from unrelated business								
	activities, whether or not the			10 105			10 105		
	business is regularly carried on			10,165.			10,165.		
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
	Total support. Add lines 7 through 10						4,026,327. <b>690.</b>		
12	Gross receipts from related activities,		,			12	690.		
13	First 5 years. If the Form 990 is for th		rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)			
800	organization, check this box and stor		rooptago			<u></u>			
-	ction C. Computation of Publ			[			91.67 %		
	Public support percentage for 2021 (					14 15	<u>91.67 %</u> 93.47 %		
	Public support percentage from 2020 33 1/3% support test - 2021. If the o								
104	stop here. The organization qualifies	-							
h	33 1/3% support test - 2020. If the o								
N	and stop here. The organization qual								
179									
110	<b>17a 10%</b> -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization most the facts and circumstances test, check this hav and stop here. Explain in Part VI how the organization								
	and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
h	10% -facts-and-circumstances tes	•	•		•	17a and line 15 is			
	more, and if the organization meets the	-							
	organization meets the facts-and-circ								
18	Private foundation. If the organization		-				s S		
				, , a, or / i	,		(Form 990) 2021		

132022 01-04-22

#### EDUCATIONAL ENRICHMENT FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
2	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		•		•		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	L	<u> </u>	1		<u> </u>	<u> </u>
14	First 5 years. If the Form 990 is for th	ne organization's f	irst, second, third	, tourth, or fifth tax	year as a section	501(c)(3) organ	ization,
<u></u>						<u></u>	▶∟
	ction C. Computation of Publ						
15	Public support percentage for 2021 (	line 8, column (f), o	divided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colu	mn (f), divided by	line 13, column (f)	)	17	%
18	Investment income percentage from	2020 Schedule A,	Part III, line 17			18	%
	<b>33 1/3% support tests - 2021.</b> If the						
	more than 33 1/3%, check this box a						
۲	<b>33 1/3% support tests - 2020.</b> If the						
	line 18 is not more than 33 1/3%, che	•					
20							
	Private foundation. If the organization	л ий пот спеск а		a, or 190, Check	uns box and see if		
1320	23 01-04-22			15		Schedu	ile A (Form 990) 2021
יבר	0404 759078 25978	20	21 05070		AL ENDICU		JN 25978_1
570	1202 133010 43310	<u>ک</u> 0 ہ	ат•0J0/0	POCKITON	VT UNVICU		TT 27210 T

09070404 759078 25978

#### EDUCATIONAL ENRICHMENT FOUNDATION

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

132024 01-04-21

16 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

#### chedule A (Form 990) 2021 EDUCATIONAL ENRICHMENT FOUNDATION

		5457		age <b>5</b>
Ра	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			L
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
2				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how	2		
~	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	).		
а	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			

**b** \_\_\_\_\_ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.* 

c 🗋	The organizatior	n supported a gover	nmental entity. D	escribe in Part VI	how you supported	a governmental entity	(see instructions).
-----	------------------	---------------------	-------------------	--------------------	-------------------	-----------------------	---------------------

17

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

132025 01-04-22

3b | Schedule A (Form 990) 2021

2a

2b

За

Yes No

09070404 759078 25978

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

#### Schedule A (Form 990) 2021 EDUCATIONAL ENRICHMENT FOUNDATION Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations EDUCATIONAL ENRICHMENT FOUNDATION

Part V	Type III Non-Functionally Integrated 509(a)(3) Support				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instruction					
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.		
Section A	- Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1 Net	short-term capital gain	1			
<b>2</b> Rec	overies of prior-year distributions	2			
3 Othe	er gross income (see instructions)	3			
4 Add	lines 1 through 3.	4			
5 Dep	reciation and depletion	5			
6 Port	ion of operating expenses paid or incurred for production or				
colle	ection of gross income or for management, conservation, or				
mair	ntenance of property held for production of income (see instructions)	6			
7 Othe	er expenses (see instructions)	7			
8 Adjı	usted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Section B	- Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1 Agg	regate fair market value of all non-exempt-use assets (see				
instr	ructions for short tax year or assets held for part of year):				
a Ave	rage monthly value of securities	<b>1</b> a			
<b>b</b> Ave	rage monthly cash balances	1b			
<b>c</b> Fair	market value of other non-exempt-use assets	1c			
d Tota	al (add lines 1a, 1b, and 1c)	1d			
e Disc	count claimed for blockage or other factors				
(exp	lain in detail in <b>Part VI</b> ):				
2 Acq	uisition indebtedness applicable to non-exempt-use assets	2			
3 Sub	tract line 2 from line 1d.	3			
4 Cas	h deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
see	instructions).	4			
5 Net	value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Mult	tiply line 5 by 0.035.	6			
7 Rec	overies of prior-year distributions	7			
8 Min	imum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount				Current Year	
<b>1</b> Adju	usted net income for prior year (from Section A, line 8, column A)	1			
2 Ente	er 0.85 of line 1.	2			
3 Mini	imum asset amount for prior year (from Section B, line 8, column A)	3			
4 Ente	er greater of line 2 or line 3.	4			
5 Inco	ome tax imposed in prior year	5			
6 Dist	tributable Amount. Subtract line 5 from line 4, unless subject to				
eme	ergency temporary reduction (see instructions).	6			

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

Schedule A (Form 990) 2021

132026 01-04-22

09070404 759078 25978

#### EDUCATIONAL ENRICHMENT FOUNDATION

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	r		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	s	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
-	Excess from 2018				
-	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2021

132027 01-04-22

Schedule A	(Form 990) 2021	EDUCATIONAL	ENRICHMENT	FOUNDATION	74-2354578	B Page 8
Part VI	Part IV, Section A, lines 1 line 1; Part IV, Section D,	1, 2, 3b, 3c, 4b, 4c, 5a, 6, , lines 2 and 3; Part IV, Se	9a, 9b, 9c, 11a, 11b, a ction E, lines 1c, 2a, 2l	and 11c; Part IV, Secti b, 3a, and 3b; Part V, I	l, line 17a or 17b; Part III, line 12; on B, lines 1 and 2; Part IV, Secti ine 1; Part V, Section B, line 1e; l	on C.
	Section D, lines 5, 6, and (See instructions.)	8; and Part V, Section E,	lines 2, 5, and 6. Also	complete this part for	any additional information.	
					<u> </u>	0001 000
132028 01-04-			20		Schedule A (Form	
070404	759078 25978	2021	.05070 EDUC	ATTONAL ENR	ICHMENT FOUN 259	78 1

09070404 759078 25978

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### \*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

Attach to Form 990 or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Employer identification number

EDUCATIONAL	ENRICHMENT	ΓΟΙΙΝΠΑΤΤΟΝ	74-2354578
BDUCKIIONAL	BIANTCHERENT	FOUNDATION	

Drganization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

#### Schedule B (Form 990) (2021)

Name of organization

Part I

74-2354578

Person Payroll

Noncash

(Complete Part II for noncash contributions.)

58,913.

# (b) (a) (c) Name, address, and ZIP + 4 **Total contributions** No. 1 \$

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$40,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>25,258.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
123452 11-11-2	22		Schedule B (Form 990) (2021)
09070404	759078 25978 2021.05070 EDUCAT:	IONAL ENRICHMENT	FOUN 259781

X

(d)

Type of contribution

### EDUCATIONAL ENRICHMENT FOUNDATION

Page 2

#### Hame of organization

EDUCATIONAL ENRICHMENT FOUNDATION

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X Person Payroll 25,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution X 8 Person Payroll 25,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 X Person Payroll 20,310. Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 10 Х Person Payroll 17,100. Noncash \$ (Complete Part II for noncash contributions.) (c) (a) (b) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) 123452 11-11-21 Schedule B (Form 990) (2021)

23

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

Name of organization

09070404 759078 25978

74-2354578

Employer identification number

\_\_\_\_Page **2** 

Sche	edule	B (F	orr	n 9	90)	(20	21)

Name of organization

Page 3 Employer identification number

74-2354578

#### EDUCATIONAL ENRICHMENT FOUNDATION

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
 - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			

09070404 759078 25978

24 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

Schedule E	B (Form 990) (2021)		Page <b>4</b>
Name of o	rganization		Employer identification number
EDUCA	TIONAL ENRICHMENT FOUNI	DATION	74-2354578
Part III	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	a) through (e) and the following line en , charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year http: For organizations r less for the year. (Enter this info. once.) \$\$
(a) No.	Use duplicate copies of Part III if additiona		
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gi	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	[
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gi	[
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		[	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
123454 11-11	1-21		Schedule B (Form 990) (2021)

09070404 759078 25978 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

#### SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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

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

OMB No. 1545-0047 Open to Public Inspection

#### EDUCATIONAL ENRICHMENT FOUNDATION

Employer identification number 74-2354578

Par				ls or A		complete if t	
	organization answered "Yes" on Form 990, Part IV, line 6.						
		or advis	ed funds	(	<b>b)</b> Funds and	other acco	unts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year		a lation at a second second		-1-		
5	Did the organization inform all donors and donor advisors in writing that the						
~	are the organization's property, subject to the organization's exclusive lega					Yes	└── No
6	Did the organization inform all grantees, donors, and donor advisors in writi						
	for charitable purposes and not for the benefit of the donor or donor adviso		• • •		-	Yes	No No
Par	impermissible private benefit?           t II         Conservation Easements.         Complete if the organization answ						
1	Purpose(s) of conservation easements held by the organization (check all the			r art iv,			
•	Preservation of land for public use (for example, recreation or educat		Preservation o	of a histo	prically import	ant land are	a
	Protection of natural habitat		$\square$ Preservation of				<i>.</i>
	Preservation of open space			n u oorti			
2	Complete lines 2a through 2d if the organization held a qualified conservati	on contri	bution in the form	n of a co	onservation e	asement on	the last
_	day of the tax year.			i oi u oo		t the End of t	
а	Total number of conservation easements				2a		
	Total acreage restricted by conservation easements				2b		
	Number of conservation easements on a certified historic structure include				2c		
	Number of conservation easements included in (c) acquired after 7/25/06, a						
	listed in the National Register				2d		
3	Number of conservation easements modified, transferred, released, extingu				ization during	g the tax	
	year 🕨						
4	Number of states where property subject to conservation easement is loca	ed 🕨					
5	Does the organization have a written policy regarding the periodic monitorin	ıg, inspe	ction, handling o	F			
	violations, and enforcement of the conservation easements it holds?					Yes	🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of vio	lations, a	and enforcing co	nservatio	on easement	s during the	year
	▶						
7	Amount of expenses incurred in monitoring, inspecting, handling of violatio	ns, and e	nforcing conserv	ation ea	sements dur	ing the year	
	▶\$						
8	Does each conservation easement reported on line 2(d) above satisfy the re-	-					
	and section 170(h)(4)(B)(ii)?					Yes	└── No
9	In Part XIII, describe how the organization reports conservation easements		-				
	balance sheet, and include, if applicable, the text of the footnote to the org	anization	's financial stater	nents th	at describes	the	
Der	organization's accounting for conservation easements. t III Organizations Maintaining Collections of Art, Histo	ical Tr		)there	Cimilar Ac	aata	
Fai	<b>t III</b> Organizations Maintaining Collections of Art, Histo Complete if the organization answered "Yes" on Form 990, Part IV, I		easures, or v	Julier	Similar AS	5612.	
				and hal	anaa ahaat u	(orl/o	
Ia	If the organization elected, as permitted under FASB ASC 958, not to report						
	of art, historical treasures, or other similar assets held for public exhibition,				rice of public		
h	service, provide in Part XIII the text of the footnote to its financial statemen				a abaat wark	o of	
b	If the organization elected, as permitted under FASB ASC 958, to report in						
	art, historical treasures, or other similar assets held for public exhibition, ed	ucation,	Jiresearchinnui	literation	e oi public se	invice,	
	provide the following amounts relating to these items:				► ¢		
	(i) Revenue included on Form 990, Part VIII, line 1				► \$ ► \$		
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other				· ·		
2	the following amounts required to be reported under FASB ASC 958 relatin			a yalli,	PIONUE		
-	Revenue included on Form 990, Part VIII, line 1	-			▶ \$		
	Assets included in Form 990, Part X				↓ \$		
	For Paperwork Reduction Act Notice, see the Instructions for Form 990			<u></u>	•	ule D (Form	1 990) 2021
	1 10-28-21	-			201100		
		6					

09070404 759078 25978

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

Partial Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)         Jusing the organization's accuration, accouncids, check any of the following that make significant use of its collection tens (check all that apply): <ul> <li>□ Proteine significant accouncies of the organization's collections and orphin how they further the organization's secured to the provide a description of the organization's collections and orphin how they further the organization's secured to receive donations of art, historical treasures, or other similar assets         • Provide a description of the organization's collections and orphin how they further the organization's secured to receive donations of art, historical treasures, or other similar assets         • Devide a description of the organization's collection?       Yes       No         • Devide a description of the organization's collection?       Yes       No         • Temported an amount on from B00, Part X, Ime 31.       Ta Is the organization and part, threads, custodian or other internodiary for contributions or ther assets not included       Amount         • B If Yes, "explain the arrangement in Part XIII and complete the following table:       Image: Ima</li></ul>	Sche		ONAL ENRICH						5457		age <b>2</b>
collection lems (check all that apply): <ul> <li>□ Puble exhibition</li> <li>□ Contar exchange program</li> <li>□ Contrepretex batac</li> <li>□ Contar exchange prog</li></ul>	Par	t III   Organizations Maintaining C	ollections of Art	, Historical T	reasures, o	or Other	<sup>-</sup> Similar	Asset	t <b>s</b> (contir	nued)	
a       Public exhibition       d       □ can or exchange program         b       Scholary research       e       □ Other         c       Preservation for future generations       e       □ Other         d       Provide a description of the organization is collections and explain how they further the organization's exempt purpose in Part XIII.       Scholary research       No         Part IV       Exerct on the organization assert of the organization assert of Yes' on Form 990, Part X, line 0.       No         Fart IV       Exerct on the organization assert of the organization assert of Yes' on Form 990, Part X, line 0.       No         fails the organization angent, trustee, custodian or other intermodiary for contributions or other assets not included on Form 990, Part X, line 21.       Yes       No         b       If Yes, 'sopian the arrangement in Part XIII and complete the following table:       Amount       Ind       Ind         c       Baginning balance       Ind       I	3	Using the organization's acquisition, accession	on, and other records	, check any of the	e following tha	it make sig	gnificant use	e of its			
b       Scholarly research       e       Other         c       Prevention for future generations       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       Uning the year, did the organization solections and explain how they further the organization assured "Yes" on Form 990, Part IV. Ine 9, or reported an amount on Form 990, Part X, Ine 21.       The second Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV. Ine 9, or reported an amount on Form 990, Part X, Ine 21.       The is the organization anglerit, fusite, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Ine 21.       The iso organization anglerit, fusite, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Ine 21.       Yes       No         b       If "Yes," explain the arrangement in Part XIII check here If the explanation has been provided on Part XII.       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here If the explanation has been provided on Part XII.       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here If the explanation has been provided on Part XII.       Yes       No         c       Genes or fart fulfilts       10       10       10       10       10         c       Check organization include an amount on Form 990. Part X, Ine 10.       10       10       10		collection items (check all that apply):									
c       Prevale a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets       to be sold to raise tunds rather than to be maintained as part of the organization's exempt purpose in Part XIII.         Part IVI       Exerct voidal Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.       Ta is the organization an agent, trustee, custodial or other intermediary for contributions or other assets not included on form 990, Part X, line 21.         Ta is the organization an agent, trustee, custodial or other intermediary for contributions or other assets not included on form 990, Part X, line 21.       Amount         C       Beginning balance       10       Amount         C       Beginning balance       11       4         D if 'yes,' explain the arrangement in Part XIII and complete the following table:       11       4         D if 'yes,' explain the arrangement in Part XIII.       21, for escrow or custodial account lability?       1Ne         D if 'yes,' explain the arrangement in Part XIII.       21, for escrow or custodial account lability?       No         D if 'yes,' explain the arrangement in Part XIII.       22, 172, 465, 555, 555, 552, 452, 409, 557, 72, 465, 552, 452, 409, 557, 72, 465, 552, 4532, 409, 557, 72, 465, 552, 4532, 409, 557, 72, 465, 552, 4532, 409, 557, 72, 465, 552, 4532, 409, 553, 553, 5532, 409,	а	Public exhibition	d	Loan or exe	change progra	am					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV. line 9, or     reported an amount on Form 990, Part X, line 21.     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X2     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X2     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X2     Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     If Yes, "explain the arrangement In Part XIII. Check here if the explanation has been provided on Part XIII     Part Y Endowment Funds. Complet if the organization answered Yes" on Form 900, Part X, line 21, 075     Outper topology and the agent of the current yes in form 900, Part X, line 21, 075     Outper topology and the agent of the current yes     Additions during the year     Is a Beginning of year balance     Sole Current yes     Outper compositions     Sole 22, 025     Sole 38, 264     Is 4, 808     Ior 7, 155     Ior 935     Ior 93	b	Scholarly research	е	Other							
5       During the year, did the organization aclock or receive domations of art, historical freasures, or other similar assets:	с	Preservation for future generations									
To be sold to raise funds rather than to be maintained as part of the organization's collection?         Yes         No           Part IV         Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part N, line 9, or reported an amount on Form 990, Part X, line 21.         The is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Yes         No           b         If "Yes," explain the arrangement in Part XIII and complete the following table:         Amount         Yes         No           c         Baginning balance         1d         Amount         Ite         Amount           d         Additions during the year         1e         Ite         Ite <th>4</th> <th colspan="9">Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.</th>	4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Imagent intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Imagent intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Imagent includes a mount on Form 990, Part X, line 21.       Imagent include an amount on Form 990, Part X, line 21. for escrow or custodial account liability?       Imagent in Part XIII.	5	During the year, did the organization solicit of	r receive donations of	f art, historical trea	asures, or oth	er similar a	assets		_		_
reported an amount on Form 990, Part X, line 21.         1a Is the organization an agent, truste, custodian or other intermediary for contributions or other assets not included on Form 980, Part X         b If "Yes," explain the arrangement in Part XIII and complete the following table:         c Beginning balance         d Additions during the year         1d         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ves       No         b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       Image: the part of the p		to be sold to raise funds rather than to be ma	aintained as part of th	e organization's c	ollection?			. L	Yes		No
1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X       Image: Contributions of Control Contrete Contente Control Contro Control Control Control Co	Par			e if the organizati	on answered '	"Yes" on F	<sup>5</sup> orm 990, P	art IV, I	ine 9, or		
on Form 990, Part X7       Yes       No         b       If "Yes," sxplain the arrangement in Part XIII and complete the following table:       Amount         c       Beginning balance       Amount         d       Additions during the year       Id         e       Distributions during the year       Id         d       Additions during the year       Id         d       Distributions during the year       Id         d       Distributions during the year       Id         d       Distributions during the year       Id         e       Distributions during the year       Id         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         (a) Current year       (b) Phor years       Distributions         for											
b       If Yes," explain the arrangement in Part XIII and complete the following table:       Amount         c       Beginning balance       It         d       Additions during the year       It         e       Distributions during the year       It         d       Ending balance       It         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account tability?       Yes       No         b       If Yes, "explain the arrangement in Part XIII. Check here if the explanation naswered "Yes" on Form 990, Part IV, line 10.       It       It         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.       It       It       It         a       Beginning of year balance       822,025       676,174       659,555       532,409.5       517,724.6         b       Contributions       822,025       676,174       659,555       532,409.4       10,071,55       10,074.4         c       Vert investment earnings, gains, and losses       37,065       22,765       676,174       659,555       532,409.4       14,241.1       18,100.4         e       Other expenditures for facilities       37,065       22,025       676,174       659,555       532,409.4       10,000       %	<b>1</b> a							_	1		٦
c       Beginning balance       Id         d       Additions during the year       Id         e       Distributions during the year       Id         f       Ending balance       If         2       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       ft "Yes," explain the arrangement in Part XIII. Check here if the explanation nawsered "Yes" on Form 990, Part X, line 10.       Image: State Sta								∟	Yes		J No
c       Beginning balance       1c       1d         d       Additions during the year       1d       1d         e       Distributions during the year       1d       1d         2a       Didthe organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XII. Check here if the explanation has been provided on Part XII.       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.       Yes       No         f       a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         a Beginning of year balance       (a) Current year       (b) Pior year       (c) Two years back       (e) Four years back         a Grants or scholarships       37, 065.       32, 264.       14, 808.       107, 155.       10, 874.         G Grants or scholarships       37, 065.       22, 756.       22, 290.       14, 241.       18, 100.         G Part V expenditures for facilities       and programs       1.0000       %       %       Yes       No         g End of year balance       99.0000       %       1.00000       %       %       Sa(i)	b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:					A.m.o.u.n	+	
d Additions during the year       1d         e Distributions during the year       1e         1       1e         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10.       Image: Complete if the organization answered "Yes" on Form 990, Part N, line 10.         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back       (e) Four years back         1a Grants or scholarships       57, 861.       38, 264.       14, 808.       107, 155.       10, 974.         1d dring or expenditures for facilities       37, 065.       22, 756.       22, 290.       14, 241.       18, 100.         2 End of year balance       731, 871.       822, 025.       676, 174.       659, 555.       532, 409.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶       1.0000       %         9 Permanent endowment ▶       99.0000       %       f       Set No       Sat)       Sat) No									Amoun	ι	
e       Distributions during the year       Ie         f       Ending balance       If         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ves       No         Part V       Endowment Funds. Complete if the organization naswered "Yes" on Form 990, Part IV, line 10.       Image: State intervention include an amount on Form 990, Part V, line 10.         1a       Beginning of year balance       (a) Current year       (b) Pror year       (c) Two years back       (d) Three years back         b       Contributions       57, 861, 38, 264, 144, 808, 107, 155, 10, 874, 108, 202, 222, 289, 110, 970, 133, 343, 24, 101, 34, 232, 22, 2389, 108, 73, 861, 334, 324, 101, 34, 232, 22, 2389, 108, 73, 861, 22, 756, 22, 290, 14, 241, 18, 100, 100, 976         c       Other expenditures for facilities       37, 055, 22, 756, 22, 220, 14, 241, 18, 100, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 109, 108, 108, 109, 108, 108, 109, 108, 108, 109, 108, 108, 109, 108, 108, 109, 108, 108, 108, 108, 109, 108, 108, 108, 108, 108, 109, 108, 108, 108, 108, 108, 108, 108, 108											
f       Ending balance       11         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If *Ves*, explain the arrangement in Part XII. Check here if the explanation has been provided on Part XII.       Image: State Stat											
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Yes       No         Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part K, line 10.       Image: Complete if the organization answered 'Yes' on Form 990, Part K, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       822, 025.       676, 174.       659, 555.       532, 409.       517, 246.         1a       Contributions       57, 861.       38, 264.       14, 800.       100, 71, 155.       10. 874.         c       No       Monistrative expenses       310, 343.       24, 101.       34, 232.       22, 399.         d       Grants or scholarships       37, 065.       22, 290.       14, 241.       18, 100.         e       Other expenditures for facilities       37, 071.       822, 025.       676, 174.       659, 555.       532, 409.         g       End of year balance       1.0000       %       %       %       %       %       %											
b       If *Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 900, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prov years back       (c) Two years back       (c) Four years back         1a       Beginning of year balance       57, 651.       38, 264.       14, 808.       107, 155.       10, 874.         c       Net investment earnings, gains, and losses       -110, 950.       130, 343.       24, 101.       34, 232.       22, 383.         d Grants or scholarships									N		
Part V         Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           (a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           b Contributions         57,861.         38,264.         14,808.         107,155.         10,874.           c Net investment earnings, gains, and losses         -110,950.         130,343.         24,101.         34,232.         22,238.           d Grants or scholarships         37,065.         22,756.         22,290.         14,241.         18,100.           e Other expenditures for facilities and programs         10,000         %         676,174.         659,555.         532,409.           2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a Board designated or quasi-endowment ▶         1.0000         %           b Permanent endowment ▶         99.0000         %         %         The percentages on lines 2a, 2b, and 2c should equal 100%.           3a Are there endowment ▶         99.0000         %         Sa(1)         X           (i) Unrelated organizations         (a) Cost or other         (b) Cost or other         (c) Accurated           (ii) Unrelated organizations         (a) Cost or other         (b) Cost or other         (b) Cost or other <td< th=""><td></td><td>0</td><td></td><td>-</td><td></td><td>-</td><td></td><td></td><td></td><td></td><td>] <b>NO</b></td></td<>		0		-		-					] <b>NO</b>
(a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       822,025       676,174       659,555       532,409       517,246         b       Contributions       57,61.138,264       14,408       107,155       10,874         c       Net investment earnings, gains, and losses       37,065       22,756       22,290       14,241       18,100         e       Other expenditures for facilities       37,065       22,756       22,290       14,241       18,100         e       Other expenditures for facilities       37,065       22,025       676,174       659,555       532,409         g       End of year balance       731,871       822,025       676,174       659,555       532,409         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       80ard designated or quasi-endowment ▶       1.0000       %         b       Permanent endowment ▶       99.0000       %       %       %       %         (i) Unrelated organizations       1.0000       %       %       %       %       %         form endowment ▶       99.0000       %       %       %       %											
1a Beginning of year balance       822,025       676,174       659,555       532,409       517,246         b Contributions       57,661       38,264       14,908       107,155       10,974         c Net investment earnings, gains, and losses       -110,950       130,343       24,101       34,232       22,389         G Grants or scholarships       -37,065       22,756       22,290       14,241       18,100         e Other expenditures for facilities and programs       -371,871       822,025       676,174       659,555       532,409       532,409         g End of year balance       731,871       822,025       676,174       659,555       532,409       532,409         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       a       board designated or quasi-endowment ▶       10000       %         c Term endowment ▶       99.0000       %       %       3a(i)       X       3a(i)       X         if Yes' on line 3a(i), are the related organizations       10000       %       3a(i)       X       3a(i)       X         b If Yes' on line 3a(i), are the related organizations listed as required on Schedule R?       3a(i)       X       3a(i)       X         d H Yes' on line 3a(i), are the related organization's	i ui							s back	(e) Four	vears	back
b       Contributions       57,861       38,264       14,808       107,155       10,874.         c       Net investment earnings, gains, and losses       -110,950.       130,343.       24,101.       34,232.       22,389.         d       Grants or scholarships       37,065.       22,756.       22,290.       14,241.       18,100.         e       Other expenditures for facilities       37,065.       22,250.       676,174.       659,555.       532,409.         g       End of year balance       731,871.       822,025.       676,174.       659,555.       532,409.         g       End of year balance       1.0000       %       %       1.0000       %         b       Pervide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶       1.0000       %         c       Term endowment ▶       99.0000       %       %       Yee No       3a(i) X       3	10	Regipping of year balance					-		(0) ! 04	-	
c       Net investment earnings, gains, and losses       -110,950, 130,343, 24,101, 34,232, 22,389, 22,389, 37,065, 22,756, 22,290, 14,241, 18,100, 00, 22,756, 22,290, 14,241, 18,100, 00, 22,025, 22,290, 14,241, 18,100, 00, 00, 00, 00, 00, 00, 00, 00, 00		r	· · · · ·							,	
d Grants or scholarships       37,065.       22,756.       22,290.       14,241.       18,100.         e Other expenditures for facilities and programs       i       37,065.       22,756.       22,290.       14,241.       18,100.         f Administrative expenses       i       i       i       i       i       i       18,100.         g End of year balance       731,871.       822,025.       676,174.       659,555.       532,409.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶       1.0000       %         b Permanent endowment ▶       99.0000       %       %       §       §       No         (i) Unrelated organizations       1.0000       %       §       §       No       §         (ii) Related organizations		r	,	,		<i>'</i>		<u>′</u>		,	
e Other expenditures for facilities and programs			,					<i>.</i>		,	
and programs		r		11,700				,		10,	100.
f       Administrative expenses       731, 871.       822, 025.       676, 174.       659, 555.       532, 409.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment ▶       1.0000       %         b       Permanent endowment ▶       99.0000       %       %       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations       Yes       No         3a(i)       Related organizations       3a(ii)       X       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(ii)       X         4       Describe in Part XIII the intended uses of the organization's endowment funds.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Image: Solution answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 1	e										
g End of year balance       731,871.       822,025.       676,174.       659,555.       532,409.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶       1.0000       %         b Permanent endowment ▶       99.0000       %       %         c Term endowment ▶       99.0000       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations       3a(i) X         (i) Unrelated organizations       3a(ii) X       3a(ii) X       3a(ii) X         (ii) Related organizations       3a(ii) X       3a(ii) X       3a(ii) X         b If "Yes" on line 3a(ii), are the related organization's endowment funds.       9       90.000       90.001         Part VI       Land, Buildings, and Equipment.       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         b Buildings       13,003.2,673.10,330.       40,673.10,330.       40,673.10,330.         c Leasehold improvements       13,003.2,673.10,330.       18,223.         total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.       18,223. <th></th>											
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment ▶       1.0000       %         b       Permanent endowment ▶       99.0000       %         c       Term endowment ▶      %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:		E CONTRACTOR E C	731 871	822 025	676	6 174	659	555		532	109
a Board designated or quasi-endowment ▶       1.0000       %         b Permanent endowment ▶       99.0000       %         c Term endowment ▶      %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations         (ii) Related organizations       3a(i) X       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(ii) X         4 Describe in Part XIII the intended uses of the organization's endowment funds.	-		· · ·			0,1/ <del>1</del> .	000	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		552,	405.
b       Permanent endowment ▶       99.0000       %         c       Term endowment ▶       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i)         (i)       Unrelated organizations       3a(i)       X         (ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b         Part VI       Land, Buildings, and Equipment.       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value basis (investment)         b       Buildings       13,003.2,673.10,330.       10,330.         c       Leasehold improvements       19,968.12,075.7,893.       18,223.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.			1 0000		a)) neiù as.						
c       Term endowment      %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:				<u>%</u>							
The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value basis (other)</li> <li>(e) Cost or other basis (other)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(e) Cost or other basis (other)</li> <li>(f) Accumulated depreciation</li> <li>(f) Accumulated depreciation</li> <l< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></l<></ul>											
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes No         (i) Unrelated organizations       3a(ii) X         (ii) Related organizations       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         b Buildings       13,003.2,673.10,330.       4 Equipment       10,330.         c Leasehold improvements       19,968.12,075.7,893.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.	С		-								
by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	0-										
(i)       Unrelated organizations       3a(i)       X         (ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b         Part VI       Land, Buildings, and Equipment.       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other       (b) Cost or other       (c) Accumulated         b       Buildings       5b       5b       10, 330.         c       Leasehold improvements       13,003.       2,673.       10,330.         d       Equipment       19,968.       12,075.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.	за		ssion of the organizat	tion that are held	and administe	ered for the	e organizati	on	I	Vac	No
(ii) Related organizations       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI         Land, Buildings, and Equipment.       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       13,003.       2,673.       10,330.         c Leasehold improvements       13,003.       2,673.       10,330.         d Equipment       19,968.       12,075.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.		-							0-(1)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (other) basis (other) (c) Accumulated depreciation (d) Book value basis (other) (c) Accumulated depreciation (d) Book value basis (other) (c) Accumulated depreciation (c) Accumulated (c) Accumulated depreciation (c) Accumulated depreciation (c) Accumulated (c) Accumu											v
4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       13,003.2,673.10,330.         d Equipment       19,968.12,075.7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.	<b>L</b>	(II) Related organizations	tions listed as your ins	d an Cabadula D	·····						
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land					۲				30		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a Land				vinent lunus.							
Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a Land				Part IV. line 11a.	See Form 990	). Part X. lii	ne 10.				
basis (investment)       basis (other)       depreciation         1a Land				<u>`</u>					(d) Boo	k valu	<u></u>
1a Land       1a Land         b Buildings       13,003.         c Leasehold improvements       13,003.         d Equipment       19,968.         e Other       19,968.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.		Description of property		• •		• •			( <b>u</b> ) Doo	it valu	0
b Buildings       13,003.       2,673.       10,330.         c Leasehold improvements       13,003.       2,673.       10,330.         d Equipment       19,968.       12,075.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.		Land		,	. /						
c Leasehold improvements       13,003.       2,673.       10,330.         d Equipment       19,968.       12,075.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.											
d Equipment					13,003.		2,673	•	1	0,3	30.
e Other       19,968.       12,075.       7,893.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       18,223.					,		,			, ,	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					19,968.		12,075			7,8	93.
						-		-		-	
			,	, ( <i>2</i> ),(0	· - / ·····		Scl	hedule			

132052 10-28-21

	ENRICHMENT H	FOUNDATION	74-2354578 Page
Part VII Investments - Other Securities.	an Faire 000 Dart N/ line		
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)			
	(b) Book value	(c) Method of valuation: Cost of	
<ol> <li>Financial derivatives</li> <li>Closely held equity interests</li> </ol>			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<b>Fotal</b> . (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	
(1)			-
(2)		1	
(3)			
(4)			· · · · · · · · · · · · · · · · · · ·
(5)			
(6)	·		
(7)			· · · · · · · · · · · · · · · · · · ·
(8)			· · · · · · · · · · · · · · · · · · ·
(9)			· · · · · · · · · · · · · · · · · · ·
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		▶
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, li	ne 25.
. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote t	to the organization's financial statem	ents that reports the
organization's liability for uncertain tax positions under			

09070404 759078 25978

Sche	dule D (Form 990) 2021 EDUCATIONAL ENRICHMENT	FOUNDATION	74-	2354578	Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenu			
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	635	,237.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments		,942.		
b	Donated services and use of facilities	2b4	,237.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d 20	,955.		
е	Add lines 2a through 2d		2e	-159	
3	Subtract line 2e from line 1			794	,987.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	250.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		4c		250.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				,237.
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	-	ses per Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				100
1	Total expenses and losses per audited financial statements		1	/6/	460.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		0.07		
а	Donated services and use of facilities		<u>,237.</u>		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)		,955.		100
е	Add lines 2a through 2d				,192.
3	Subtract line 2e from line 1			/42	,268.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		0.5.0		
а	Investment expenses not included on Form 990, Part VIII, line 7b		250.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b				250.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)	5	742	,518.
	t XIII Supplemental Information.				

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

#### PART V, LINE 4:

THE ORGANIZATION HAS ADOPTED INVESTMENT POLICIES FOR ENDOWMENT ASSETS WITH

DONOR RESTRICTIONS THAT ATTEMPT TO MAINTAIN SUFFICIENT CASH TO SUSTAIN

OPERATIONS AND TO INVEST EXCESS CASH TO MAXIMIZE INCOME WHILE PRESERVING

PRINCIPAL.

THESE ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY OR FOR A DONOR-SPECIFIED PERIOD(S). THE ORGANIZATION'S RISK TOLERANCE IS CONSIDERED HIGH; LOSSES ARE NOT TO EXCEED 35% IN ANY ONE-YEAR PERIOD AND LOSSES ARE NOT TO EXCEED 5% OVER A FOUR-YEAR PERIOD. THE TARGET RATE OF RETURN IS 8.15% PER YEAR. THE ORGANIZATION'S INVESTMENT OBJECTIVES ARE AS FOLLOWS: 132054 10-28-21 Schedule D (Form 990) 2021 29 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

-GROW CAPITAL WITHIN REASONABLE AND PRUDENT LEVELS OF RISK IN EQUITY MUTUAL FUNDS;

-PROVIDE A HEDGE COMPONENT, WHICH MAY HELP REDUCE PORTFOLIO VOLATILITY AND POTENTIALLY INCREASE RETURN; -PROTECT CAPITAL AND MAXIMIZE CASH FLOW IN VARIOUS DOMESTIC AND EMERGING

MARKET BOND PORTFOLIOS; AND

-SET FORTH AN INVESTMENT STRUCTURE THAT INCLUDES VARIOUS ASSET CLASSES, INVESTMENT MANAGEMENT STYLES, ASSET ALLOCATION AND ACCEPTABLE RANGES THAT ARE EXPECTED TO PRODUCE AS SUFFICIENT LEVEL OF OVERALL DIVERSIFICATION AND TOTAL INVESTMENT RETURN, OVER THE LONG-TERM.

PART X, LINE 2:

FINANCIAL STATEMENT ASC 740 FOOTNOTE:

THE ORGANIZATION IS EXEMPT FROM INCOME TAXES UNDER BOTH FEDERAL INTERNAL REVENUE CODE SECTION 501(C)(3) AND ARIZONA INCOME TAX LAWS, AND IS CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION UNDER INTERNAL REVENUE CODE SECTION 509(A)(1). INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE ORGANIZATION'S TAX EXEMPT PURPOSE, HOWEVER, MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS TAXABLE INCOME (UBTI).

FROM TIME TO TIME, THE ORGANIZATION MAY BE SUBJECT TO PENALTIES AND INTEREST ASSESSED BY VARIOUS TAXING AUTHORITIES, WHICH ARE CLASSIFIED AS GENERAL AND ADMINISTRATIVE EXPENSES, IF THEY OCCUR.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES

20,955.

132055 10-28-21

Schedule D (Form 990) 2021 EDUCAT	IONAL ENRICHMENT	FOUNDATION	74-2354578 Page 5
PART XII, LINE 2D - OTHER			
SPECIAL EVENT EXPENSES			20,955.
			Schedule D (Form 990) 2021
132055 10-28-21	31		

09070404 759078 25978 2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978\_1

Name of the organization       Employer identification         EDUCATIONAL       ENRICHMENT       FOUNDATION       74 - 2         Part I       General Information on Grants and Assistance       1       Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?       Image: Complexity of the organization is procedures for monitoring the use of grant funds in the United States.         Part II       Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.         1 (a) Name and address of organization       (b) EIN       (c) IRC section       (d) Amount of valuation (book, valuation (	354578
Part I       General Information on Grants and Assistance         1       Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?         2       Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.         Part II       Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.         1 (a) Name and address of organization       (b) EIN       (c) IBC section       (d) Amount of       (f) Method of       (n) Description of       (b) Purpose of	No
<ul> <li>1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</li> <li>2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</li> <li>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.</li> <li>1 (a) Name and address of organization (b) EIN (c) IBC section (d) Amount of (f) Method of (g) Description of (h) Purpose (h) Purpos</li></ul>	
<ul> <li>2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</li> <li>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.</li> <li>1 (a) Name and address of organization (b) FIN (c) IBC section (d) Amount of (f) Method of (g) Description of (h) Purpose (h)</li></ul>	
Part II       Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.         1 (a) Name and address of organization       (b) FIN       (c) IBC section       (d) Amount of       (f) Method of       (g) Description of       (b) FIN	
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	
	, ,
or government (if applicable) cash grant noncash assistance FMV, appraisal, other) noncash assistance or assistance	•
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table     Enter total number of other organizations listed in the line 1 table	

#### Schedule I (Form 990) 2021

#### 1 EDUCATIONAL ENRICHMENT FOUNDATION

74-2354578

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CLASSROOM GRANTS TO TEACHERS	0	3,005.	0.		
COLLEGE SCHOLARSHIPS	0	8,000.	. 0.		
INTERSCHOLASTIC SCHOLARSHIPS	0	43,726.	. 0.		
STUDENT NEEDS	0	23,509.	. 181,998.	FMV	CLOTHING, SUPPLIES, OTHER
TEACHER AWARDS Part IV Supplemental Information. Provide the information re	0 Quirod in Part L lin	1,510.			
PART I, LINE 2:	quied in rarti, in		r (b), and any other a		
FOR ALL GRANTS AND FISCAL SPONSOR	ED PROJEC	T EXPENSES	5, EEF REQU	VIRES PROOF OF	
EXPENDITURE OF AWARDED FUNDS (REC	EIPTS) TH	АТ МАТСН І	HOSE AWARD	ED OR FISCAL	
SPONSORED PROJECT BUDGETS. SCHOL	ARSHIPS A	ND MOST SI	UDENT NEED	S ITEMS	
REQUIRE AN APPLICATION THAT IS AP	PROVED BY	TUSD AND	THEN BY EE	F. OTHER	
STUDENT NEEDS ITEMS, SUCH AS HYGI	ENE ITEMS	, ARE AVAI	LABLE AT I	USD FAMILY	
RESOURCE CENTERS AND AVAILABLE TO	TUSD STU	DENTS. TU	ISD SCHOOLS	HAVE EEF	
LIAISONS (COUNSELORS, NURSES, PRI	NCIPALS,	AND TEACHE	RS) WHO HE	LP DETERMINE	
THE NEED OF THE STUDENTS AND CONN	ECT THEM	WITH THE A	PPROPRIATE	EEF	

Schedule I (Form 990) EDUCATIONAL ENH	RICHMENT	FOUNDATION	I		74-2354578 Page 2
Part III Continuation of Grants and Other Assistance to Dome	stic Individuals	(Schedule I (Form 99	90), Part III.)		
(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
STUDENT AWARDS	0.	3,984.	. 0.		
	1			1	

Schedule I (Form 990) Part IV Supplemental Info	EDUCATIONAL ormation	ENRICHMENT	FOUNDATION	74-2354578 Page 2
RESOURCE.				
				Schedule I (Form 990)
070404 759078 25978	2 202	35 1 05070 EDD		TCHMENT FOIN 25978 1

09070404 759078 25978

#### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047 

**Open to Public** 

ſ

L

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Interna	al Revenue Service	Go to www.irs.gov	/Form990 fo	r instructions and	I the latest inform	nation.		Inspection
Name	lame of the organization Emp					Employe	r identification number	
EDUCATIONAL ENRICHMENT FOUNDATION					7	4-2354578		
Par	rt I   Types of Prop	perty						
			<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash cont amounts repo Form 990, Part V	rted on		(d) d of determining ontribution amounts
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household	goods						
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly trade	ed						
10	Securities - Closely held	stock						
11	Securities - Partnership,	LLC, or						
	trust interests							
12	Securities - Miscellaneou	JS						
13	Qualified conservation c	ontribution -						
	Historic structures							
14	Qualified conservation c							
15	Real estate - Residential							
16	Real estate - Commercia	ll						
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supp							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts					150 -		
25	· · ·	ENT NEEDS)	X	75,000	62	2,150.	ALR MAP	RKET VALUE
26		)						
27	Other  (	)						
28	Other 🕨 (	)				L		
29	Number of Forms 8283 r for which the organizatio	, ,				29		Yes No
30a	During the year, did the o must hold for at least thr exempt purposes for the	ree years from the dat	te of the initia	al contribution, and	l which isn't requi	ired to be us	ed for	
b	If "Yes," describe the arr							
31	Does the organization ha	•	policy that r	equires the review	of any nonstanda	ard contribut	ions?	31 X
	Does the organization hi							
	contributions?	······		0	<i>, , ,</i>			32a X
	If "Yes," describe in Part					(-) :	l e el	
33	If the organization didn't	report an amount in	column (c) fc	or a type of propert	y for which colum	in (a) is chec	cked,	
	describe in Part II.	ation Act Notice			0		0-1	dule M (Ferry 000) 000 f
LHA	For Paperwork Reduce	CTION ACT NOTICE, SEE	e the instruc	tions for Form 99	υ.		Sche	dule M (Form 990) 2021

09070404 759078 25978

	this part for any additional information.	umber of contributions, the number of items received, or a combination of both. Also complete
132142 11-17-2	1	Schedule M (Form 990) 202
		37
70404	759078 25978	2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978_1

Schedule M (Form 990) 2021 EDUCATIONAL ENRICHMENT FOUNDATION 74-2354578 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization 74-2354578 Page 2 SCHEDULE O (Form 990)

Department of the Trees

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



EDUCATIONAL ENRICHMENT FOUNDATION

74–2354578

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

UP TO \$1,000 CHANNEL RESOURCES DIRECTLY TO K-12 EDUCATORS WHO DEVELOP

AND IMPLEMENT UNIQUE PROJECTS THAT STIMULATE LEARNING AND EXPLORE

CONCEPTS, IDEAS, AND PRINCIPLES BEYOND NORMAL CLASSROOM CURRICULUM.

LAST YEAR, \$90,000 WAS AWARDED TO EDUCATORS.

COLLEGE SCHOLARSHIPS ARE AWARDED TO ACADEMICALLY ELIGIBLE STUDENTS TO

HELP THEM OFFSET THE COST TO ATTEND COLLEGE AND WORK TOWARDS A DEGREE.

COVID IMPACTED MANY STUDENTS COLLEGE PURSUIT SO APPLCATIONS WERE DOWN

SIGNIFICANTLY. SEVERAL STUDENTS APPLIED AND QUALIFIED FOR MORE THAN ONE

SCHOLARSHIP. \$10,700 WAS AWARDED TO 5 STUDENTS.

INTERSCHOLASTIC SCHOLARSHIPS ARE AWARDED TO NEEDY, ACADEMICALLY ELIGIBLE STUDENTS TO PARTICIPATE IN SPORTS AND FINE ARTS ACTIVITIES. OVER 800 INTERSCHOLASTIC SCHOLARSHIPS TOTALING \$43,727 WERE AWARDED LAST FISCAL YEAR.

\$50,000 IN RESTRICTED FUNDS WAS INVESTED IN BUILDING A NEW STEM LAB AT AN ELEMENTARY SCHOOL IN AN IMPROVERISHED AREA OF THE COMMUNITY WHERE STUDENTS ARE NOT EXPOSED TO WHITE COLLAR, HIGHER EDUCATION CAREER POSSIBILITIES. THIS STEM LAB EXPOSES THEM TO STEM AND INTRODUCES THEM TO THOUGHT-PROBOKING CONCEPTS AND EXPERIEMENTATION EARLY TO OPEN THEIR MINDS AND EXPAND THEIR VISION TO SEE THE WORLD OF POSSIBILITIES AND POTENTIAL FOR THEMSELVES. THE OBJECTIVE IS TO POSITIVELY CHANGE THE TRAJECTORY OF THEIR FUTURES AND BREAK THE CYCLE OF POVERTY.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2021

 132211 11-11-21
 Schedule O (Form 990) 2021

FISCAL SPONSORED PROJECTS: THE ORGANIZATION PARTNERS WITH SCHOOL AND

COMMUNITY GROUPS TO HELP RAISE AND DISTRIBUTE FUNDS FOR

MISSION-COMPATIBLE PROJECTS FOR TUSD TEACHERS, STUDENTS, AND SCHOOL

SITES.

DUE TO COVID-19 LINGERING, PROGRAMS CONTINUED TO EXPERIENCE BELOW

"NORMAL" PARTICIPATION NUMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

EEF'S FINANCE COMMITTEE THAT INCLUDES THE EEF BOARD PRESIDENT, BOARD TREASURER AND 3-4 ADDITIONAL BOARD MEMBERS AND STAFF WILL REVIEW THE 990, COMPARING DATA TO AVAILABLE REPORTS. ONCE THE FINANCE COMMITTEE APPROVES THE 990, A COPY OF THE DRAFT WILL BE PRESENTED TO THE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

A CONFLICT OF INTEREST IS DEFINED AS AN ACTUAL OR PERCEIVED INTEREST BY AN EMPLOYEE, VOLUNTEER OR BOARD MEMBER IN AN ACTION THAT RESULTS IN, OR HAS THE APPEARANCE OF RESULTING IN, PERSONAL, ORGANIZATIONAL OR PROFESSIONAL GAIN. A CONFLICT OF INTEREST OCCURS WHEN AN EMPLOYEE, VOLUNTEER OR BOARD MEMBER HAS A DIRECT OR FIDUCIARY INTEREST WHICH COULD CREATE AN ACTUAL OR PERCEIVED CONFLICT BETWEEN THE PERSONAL INTEREST OF THE EMPLOYEE, VOLUNTEER OR BOARD MEMBER AND THAT OF THE EDUCATIONAL ENRICHMENT FOUNDATION (THE FOUNDATION).

EACH INDIVIDUAL SHALL DISCLOSE TO THE FOUNDATION ANY PERSONAL INTEREST WHICH HE OR SHE MAY HAVE IN ANY MATTER PENDING BEFORE THE FOUNDATION AND SHALL REFRAIN FROM PARTICIPATION IN ANY DECISION ON SUCH MATTER. 132212 11-11-21 Schedule O (Form 990) 2021 39

2021.05070 EDUCATIONAL ENRICHMENT FOUN 25978 1

Name of the organization

IT IS IN THE INTEREST OF THE FOUNDATION AND ITS EMPLOYEES, VOLUNTEERS AND BOARD MEMBERS TO STRENGTHEN TRUST AND CONFIDENCE IN EACH OTHER AND IN THE FOUNDATION, TO EXPEDITE RESOLUTION OF PROBLEMS, TO MITIGATE THE EFFECT AND TO MINIMIZE ORGANIZATIONAL AND INDIVIDUAL STRESS THAT CAN BE CAUSED BY AN ACTUAL OR PERCEIVED CONFLICT OF INTEREST. THEREFORE, ANY CONFLICT OF INTEREST, POTENTIAL CONFLICT OF INTEREST OR THE APPEARANCE OF A CONFLICT OF INTEREST IS TO BE REPORTED TO THE EXECUTIVE DIRECTOR OR THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS IMMEDIATELY. THE BOARD OF DIRECTORS WILL REVIEW THE POTENTIAL CONFLICT OF INTEREST TO DETERMINE IF AN ACTUAL CONFLICT EXISTS. EMPLOYEES, VOLUNTEERS AND BOARD MEMBERS ARE TO MAINTAIN INDEPENDENCE AND OBJECTIVITY WITH CLIENTS, THE COMMUNITY AND THE FOUNDATION AND ARE CALLED TO MAINTAIN A SENSE OF FAIRNESS, CIVILITY, ETHICS AND PERSONAL INTEGRITY EVEN THOUGH LAW, REGULATION OR CUSTOM DOES NOT REQUIRE THEM.

FORM 990, PART VI, SECTION B, LINE 15A:

ANNUALLY, THE EXECUTIVE COMMITTEE CONDUCTS A THOROUGH PERFORMANCE REVIEW WHICH INCLUDES A SELF-EVALUATION, GOALS AND OBJECTIVES IDENTIFICATION, AND AN ANONYMOUS BOARD AND STAFF SURVEY. IF SATISFIED WITH THE EXECUTIVE DIRECTOR'S PERFORMANCE, THE EXECUTIVE COMMITTEE REVIEWS THE EXECUTIVE DIRECTOR SALARIES AT TEN OTHER NONPROFITS IN ARIZONA WITH SIMILAR SIZES AND BUDGETS AND USES THOSE TO DETERMINE A FAIR WAGE FOR OUR EXECUTIVE DIRECTOR. THE TREASURER REVIEWS AND APPROVES THE PROPOSED WAGE. DOCUMENTATION OF THE COMPENSATION REVIEW AND BOARD DECISIONS REGARDING COMPENSATION IS KEPT ON RECORD.

	19:	LINE	С,	SECTION	VI,	PART	ORM 990,	FOR
Schedule O (Form 990							212 11-11-21	132212
40	40							

Name of the organization EDUCATION	AL ENRICHMENT FOUNDATION	Employer identification nu 74-2354578
EF MAKES ALL COVERNING	DOCUMENTS AND THE CONFLICT OF I	NTEREST POLICY
AVAILABLE TO MEMBERS OF	THE PUBLIC AND/OR MEDIA UPON RE	QUEST.
32212 11-11-21	41	Schedule O (Form 990)