

Form **990****Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**2021**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service**A For the 2021 calendar year, or tax year beginning and ending**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization JUST CAPITAL FOUNDATION, INC.		D Employer identification number 36-4764467
	Doing business as		E Telephone number (646) 854-2141
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	44 EAST 30TH STREET, 11TH FLOOR		
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10016		G Gross receipts \$ 11,131,024.
F Name and address of principal officer: MARTIN WHITTAKER SAME AS C ABOVE		H(a) Is this a group return for subordinates? Yes ☒ No	
I Tax-exempt status: ☒ 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527		H(b) Are all subordinates included? Yes No	
J Website: ▶ JUSTCAPITAL.COM		H(c) Group exemption number ▶	
K Form of organization: ☒ Corporation Trust Association Other ▶		L Year of formation: 2013	M State of legal domicile: DE

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: JUST CAPITAL'S MISSION IS TO BUILD A MORE JUST ECONOMY THAT WORKS FOR ALL AMERICANS BY HELPING		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	31
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	64
	6 Total number of volunteers (estimate if necessary)	6	31
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	16,070,003.	10,840,875.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	398,378.	260,701.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,190.	2,278.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	48,050.	27,170.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,519,621.	11,131,024.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	947,759.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	6,597,333.	7,811,947.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 558,363.	9,102.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,676,274.	2,194,361.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,282,709.	10,954,067.
19 Revenue less expenses. Subtract line 18 from line 12	7,236,912.	176,957.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	3,914,783.	4,314,649.
	22 Net assets or fund balances. Subtract line 21 from line 20	707,728.	930,637.
		3,207,055.	3,384,012.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	MARTIN WHITTAKER, CHIEF EXECUTIVE OFFICER				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	MAGDALENA M. CZERNIAWSKI	MAGDALENA M. CZERNIA	07/27/22	☐	P00535099
	Firm's name ▶ MARKS PANETH LLP	Firm's EIN ▶ 11-3518842			
	Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017		Phone no. 212-503-8800		

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

JUST CAPITAL'S MISSION IS TO BUILD A MORE JUST ECONOMY THAT WORKS FOR ALL AMERICANS BY HELPING COMPANIES IMPROVE HOW THEY SERVE ALL THEIR STAKEHOLDERS WORKERS, CUSTOMERS, COMMUNITIES, THE ENVIRONMENT, AND SHAREHOLDERS AS DEFINED BY THE PUBLIC.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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 services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 9,541,809. including grants of \$ 947,759.) (Revenue \$ 287,871.)

JUST CAPITAL IS THE ONLY INDEPENDENT NONPROFIT THAT TRACKS, ANALYZES, AND ENGAGES WITH LARGE CORPORATIONS AS WELL AS THEIR INVESTORS ON HOW THEY PERFORM ON THE PUBLIC'S PRIORITIES. OUR RESEARCH, RANKINGS, INDEXES, AND DATA-DRIVEN TOOLS EMPOWER ALL MARKET PARTICIPANTS TO HELP BUILD A MORE JUST ECONOMY.

WE POLL AMERICANS EVERY YEAR TO IDENTIFY THE ISSUES THAT MATTER MOST IN DEFINING JUST BUSINESS BEHAVIOR TODAY. WE THEN DEFINE METRICS THAT MAP TO THOSE ISSUES AND TRACK AND ANALYZE THE LARGEST, PUBLICLY TRADED U.S. COMPANIES. SINCE 2015 WE'VE POLLED MORE THAN 150,000 AMERICANS ON THEIR PRIORITIES FOR CAPITALISM AND JUST BUSINESS BEHAVIOR. OUR SURVEY RESEARCH NOT ONLY PROVIDES A CLEAR ROADMAP FOR WHAT ISSUES MATTER MOST

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 \$)

4e Total program service expenses ► 9,541,809.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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 during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <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 provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," 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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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 "Yes," 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c 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	
25a 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? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</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 or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	10
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 64		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
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 payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders 11a		
b 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 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
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		
c Enter the amount of reserves on hand 13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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.

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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	31			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent		31		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **FL, NY, CT, CA, DE**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records **MARTIN WHITTAKER, CEO - (646) 854-2141**

44 EAST 30TH STREET, 11TH FLOOR, NEW YORK, NY 10016

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARTIN WHITTAKER CHIEF EXECUTIVE OFFICER	40.00			X				800,100.	0.	65,722.
(2) MOHAMMAD TAHIR KHAN CHIEF TECHNOLOGY OFFICER	40.00					X		271,350.	0.	58,168.
(3) ALISON OMENS CHIEF STRATEGY OFFICER	40.00					X		270,100.	0.	34,130.
(4) ROBERT MARSH CHIEF INFORMATION OFFICER	40.00					X		240,850.	0.	45,718.
(5) TERESA YUNG CHIEF FIN. AND OPERATIONS	40.00			X				251,150.	0.	27,876.
(6) MICHELLE MULLINEAUX CHIEF COMMUNICATIONS & MARKETING OFF	40.00					X		237,700.	0.	38,218.
(7) SHANE KHAN HEAD OF RESEARCH	40.00					X		192,148.	0.	19,110.
(8) ABIGAIL DISNEY DIRECTOR	0.50	X						0.	0.	0.
(9) ALAN FLEISCHMANN DIRECTOR	2.00	X						0.	0.	0.
(10) AMY LIU DIRECTOR	0.50	X						0.	0.	0.
(11) ANDREA JUNG DIRECTOR	0.50	X						0.	0.	0.
(12) ANNETTE NAZARETH DIRECTOR	0.50	X						0.	0.	0.
(13) ARIANNA HUFFINGTON DIRECTOR	0.50	X						0.	0.	0.
(14) CARLOS DOMINGUEZ DIRECTOR (OUTGOING)	0.50	X						0.	0.	0.
(15) DAN ARIELY DIRECTOR	0.50	X						0.	0.	0.
(16) DAN HESSE DIRECTOR	4.00	X						0.	0.	0.
(17) DAVID VOGEL DIRECTOR	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HOLLY GORDON DIRECTOR	0.50	X						0.	0.	0.
(19) JAMES P. STEYER DIRECTOR	0.50	X						0.	0.	0.
(20) JASON WINGARD DIRECTOR	2.00	X						0.	0.	0.
(21) JEAN OELWANG SECRETARY & DIRECTOR	2.00	X		X				0.	0.	0.
(22) JEFFREY WALKER DIRECTOR	2.00	X						0.	0.	0.
(23) JIM BILDNER DIRECTOR	2.00	X						0.	0.	0.
(24) JOHN HOFMEISTER DIRECTOR (OUTGOING)	0.50	X						0.	0.	0.
(25) JOHN ROGERS DIRECTOR	0.50	X						0.	0.	0.
(26) KIP TINDELL DIRECTOR	2.00	X						0.	0.	0.
1b Subtotal								2,263,398.	0.	288,942.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,263,398.	0.	288,942.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **23**

3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ADRIENNE WONG 1664 ROUND TOP RD, WELLSBORO, PA 16901-6990	CONSULTING	117,067.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) LAUREL BRITTON DIRECTOR	4.00	X						0.	0.	0.
(28) MARC MORIAL DIRECTOR	0.50	X						0.	0.	0.
(29) MARK WEINBERGER DIRECTOR	4.00	X						0.	0.	0.
(30) MICHAEL WEINSTEIN DIRECTOR	4.00	X						0.	0.	0.
(31) MINDY LUBBER DIRECTOR	0.50	X						0.	0.	0.
(32) PAT RUSSO DIRECTOR	2.00	X						0.	0.	0.
(33) PAUL SCIALLA DIRECTOR	0.50	X						0.	0.	0.
(34) PAUL T. JONES, II CHAIRMAN, PRESIDENT & DIR	4.00	X		X				0.	0.	0.
(35) PETER GEORGESCU DIRECTOR	4.00	X						0.	0.	0.
(36) RANDALL LANE DIRECTOR (OUTGOING)	0.50	X						0.	0.	0.
(37) RAY CHAMBERS DIRECTOR	0.50	X						0.	0.	0.
(38) RINALDO BRUTOCO DIRECTOR	4.00	X						0.	0.	0.
(39) ROBERT DEUTSCH TREASURER & DIRECTOR	4.00	X		X				0.	0.	0.
(40) ROOSEVELT GILES DIRECTOR	2.00	X						0.	0.	0.
(41) SHARON BLOCK DIRECTOR (OUTGOING)	0.50	X						0.	0.	0.
(42) STEVE SCHMIDT DIRECTOR (OUTGOING)	0.50	X						0.	0.	0.
(43) XAV BRIGGS DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,840,875.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 130,072.					
	h Total. Add lines 1a-1f			10,840,875.				
Program Service Revenue	2 a LICENSE FEES	Business Code 518210		260,701.	260,701.			
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			260,701.				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,278.			2,278.
4 Income from investment of tax-exempt bond proceeds								
5 Royalties								
6 a Gross rents		6a	(i) Real	(ii) Personal				
b Less: rental expenses		6b						
c Rental income or (loss)		6c						
d Net rental income or (loss)								
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses		7b						
c Gain or (loss)		7c						
d Net gain or (loss)								
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a MISCELLANEOUS	Business Code 900099		27,170.	27,170.			
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			27,170.				
	12 Total revenue. See instructions			11,131,024.	287,871.	0.	2,278.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	947,759.	947,759.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	1,144,850.	745,589.	269,387.	129,874.
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	5,181,022.	4,636,379.	241,567.	303,076.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	146,442.	136,498.	4,578.	5,366.
9 Other employee benefits	903,061.	812,453.	51,442.	39,166.
10 Payroll taxes	436,572.	385,316.	30,483.	20,773.
11 Fees for services (nonemployees):				
a Management				
b Legal	13,500.		13,500.	
c Accounting	30,293.		30,293.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	779,537.	674,358.	105,179.	
12 Advertising and promotion	155,863.	155,863.		
13 Office expenses	34,600.	30,023.	2,420.	2,157.
14 Information technology	392,072.	337,611.	45,227.	9,234.
15 Royalties				
16 Occupancy	601,145.	521,629.	42,043.	37,473.
17 Travel	5,702.	1,539.	4,163.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,265.	268.	997.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	66,459.	57,668.	4,648.	4,143.
23 Insurance	24,072.	20,888.	1,683.	1,501.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a OTHER	49,738.	43,159.	3,479.	3,100.
b BAD DEBT EXPENSE	25,000.	21,693.	1,749.	1,558.
c RECRUITMENT & TRAINING	8,908.	7,730.	623.	555.
d EMPLOYEE & PARTNER GIFT	6,207.	5,386.	434.	387.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,954,067.	9,541,809.	853,895.	558,363.
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)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	9,056.	1	12,517.
	2 Savings and temporary cash investments	2,396,472.	2	2,241,059.
	3 Pledges and grants receivable, net	774,934.	3	1,300,361.
	4 Accounts receivable, net	78,065.	4	242,610.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	83,338.	9	91,221.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 229,238.		
	b Less: accumulated depreciation	10b 173,024.		
		82,673.	10c	56,214.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	296,667.	14	256,667.
15 Other assets. See Part IV, line 11	193,578.	15	114,000.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,914,783.	16	4,314,649.	
Liabilities	17 Accounts payable and accrued expenses	345,999.	17	270,223.
	18 Grants payable		18	164,000.
	19 Deferred revenue		19	125,750.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	361,729.	25	370,664.
	26 Total liabilities. Add lines 17 through 25	707,728.	26	930,637.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,101,802.	27	673,629.
	28 Net assets with donor restrictions	2,105,253.	28	2,710,383.
	Organizations that do not follow FASB ASC 958, check 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 equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,207,055.	32	3,384,012.
	33 Total liabilities and net assets/fund balances	3,914,783.	33	4,314,649.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,131,024.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,954,067.
3	Revenue less expenses. Subtract line 2 from line 1	3	176,957.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,207,055.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,384,012.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ 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? _____ 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		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2021)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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.")	6115792.	6386731.	7248863.	16070003.	10840875.	46662264.
2 Tax revenues levied for the organization'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						
4 Total. Add lines 1 through 3	6115792.	6386731.	7248863.	16070003.	10840875.	46662264.
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)						31764805.
6 Public support. Subtract line 5 from line 4.						14897459.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	6115792.	6386731.	7248863.	16070003.	10840875.	46662264.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	223.	239.	1,438.	3,190.	2,278.	7,368.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			14,319.	48,050.	27,170.	89,539.
11 Total support. Add lines 7 through 10						46759171.
12 Gross receipts from related activities, etc. (see instructions)					12	771,883.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	31.86 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	27.50 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► ☐
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► ☐
17a 10% -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 meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		► ☒
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		► ☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► ☐

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 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 supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a The organization satisfied the Activities Test. Complete line 2 below.			
b The organization is the parent of each of its supported organizations. Complete line 3 below.			
c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
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.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2021 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

Part VI

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**MISCELLANEOUS**

2019 AMOUNT: \$ 14,319.

2020 AMOUNT: \$ 48,050.

2021 AMOUNT: \$ 27,170.

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

JUST CAPITAL CONTINUES TO DIVERSIFY AND EXPAND ITS DONOR BASE, HAVING INCREASED THE NUMBER OF FOUNDATIONS FROM WHICH IT RECEIVES GRANTS AND THE NUMBER OF INDIVIDUAL DONORS DURING 2021. JUST CAPITAL'S PUBLIC SUPPORT PERCENTAGE FOR THE FIVE-YEAR PERIOD ENDED DECEMBER 31, 2021, WAS 31.86%, UP FROM 27.50% IN THE PREVIOUS YEAR. THIS PERCENTAGE HAS CONTINUED TO INCREASE EACH YEAR FOR THE LAST FIVE YEARS AND THE FOUNDATIONS CONTINUES TO DEVELOP AND IMPLEMENT WAYS TO EXPAND THE LEVEL OF PUBLIC SUPPORT OVER THE SHORT AND LONG TERM.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

23
OMB No. 1545-0047

2021

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** 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

☐ 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.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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).

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
<u>1</u>		\$ <u>49,447.</u>	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>5,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>5,145.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>21,114.</u>	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>150,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>5,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
7		\$ 25,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
8		\$ 10,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
9		\$ 50,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
10		\$ 100,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
11		\$ 25,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
12		\$ 400,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
13		\$ 500,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
14		\$ 965,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
15		\$ 15,278.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
16		\$ 41,500.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
17		\$ 10,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
18		\$ 15,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
19		\$ 59,511.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
20		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
21		\$ 10,290.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
22		\$ 25,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
23		\$ 20,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
24		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
25		\$ 5,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
26		\$ 100,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
27		\$ 7,600.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
28		\$ 4,910,654.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
29		\$ 250,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
30		\$ 45,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
31		\$ 5,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
32		\$ 19,420.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
33		\$ 15,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
34		\$ 1,500,833.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
35		\$ 15,435.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
36		\$ 200,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JUST CAPITAL FOUNDATION, INC.	36-4764467

Part I 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
37		\$ 8,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
38		\$ 10,290.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
39		\$ 350,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
40		\$ 10,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
41		\$ 60,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
42		\$ 20,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

Part I 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
43		\$ 50,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
44		\$ 25,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
45		\$ 200,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
46		\$ 150,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
47		\$ 100,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)
48		\$ 25,000.	Person ☒ Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.

36-4764467

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
1	DONATED STOCK	\$ 49,447.	09/02/21
4	DONATED STOCK	\$ 21,114.	08/19/21
19	DONATED STOCK	\$ 59,511.	08/06/21
		\$	
		\$	
		\$	

Name of organization

Employer identification number

JUST CAPITAL FOUNDATION, INC.**36-4764467****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.**

35
OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☐ Yes	☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☐ Yes	☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a Public exhibition

d ☐ Loan or exchange program

b Scholarly research

e ☐ Other _____

c Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 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's collection? Yes No

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? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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 (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		44,910.	22,094.	22,816.
d Equipment		16,205.	16,205.	0.
e Other		168,123.	134,725.	33,398.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				56,214.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(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" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	370,664.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	370,664.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	11,365,678.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	234,654.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	234,654.
3	Subtract line 2e from line 1	3	11,131,024.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	11,131,024.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	11,188,721.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	234,654.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	234,654.
3	Subtract line 2e from line 1	3	10,954,067.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	10,954,067.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE FOUNDATION BELIEVES IT HAD NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2021, IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

39

OMB No. 1545-0047

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

2021

Open to Public
Inspection

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-476467

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? ☒ Yes ☐ No
- 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 or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
B LAB 15 WATERLOO AVENUE BERWYN, PA 19312	20-5958773	501(C)(3)	272,206.	0.			IMPERATIVE 21
CHIEF EXECUTIVES FOR CORPORATE PURPOSE, INC. - 85 BROAD STREET 27TH FL - NEW YORK, NY 10004	13-4024259	501(C)(3)	20,000.	0.			IMPERATIVE 21
COMMON FUTURE 2323 BROADWAY OAKLAND, CA 94612	20-1544255	501(C)(3)	20,000.	0.			IMPERATIVE 21
CONSCIOUS CAPITALISM, INC 995 MARKET ST FLOOR 2 SAN FRANCISCO, CA 94111	20-2238653	501(C)(3)	20,000.	0.			IMPERATIVE 21
FINANCIAL HEALTH NETWORK 135 S LASALLE ST NO 2125 CHICAGO, IL 60603	20-3006098	501(C)(3)	281,000.	0.			WORKER FINANCIAL WELLNESS INITIATIVE
GLOBAL IMPACT INVESTING NETWORK, INC. - 30 BROAD STREET - NEW YORK, NY 10004	27-3166994	501(C)(3)	20,000.	0.			IMPERATIVE 21

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 8.
- 3 Enter total number of other organizations listed in the line 1 table ▶

Part II	Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)
---------	--

[illegible]

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

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

JUST CAPITAL SELECTS GRANTEES BASED ON ITS ASSESSMENT OF THE GRANTEE'S WORK
CONTRIBUTION TO JUST-RELATED INITIATIVES AND ALIGNMENT WITH ITS OVERALL
MISSION. DEPENDING ON THE NATURE AND/OR SIZE OF THE GRANT, JUST CAPITAL MAY
REQUIRE INTERIM AND FINAL FINANCIAL AND NARRATIVE REPORTING. JUST CAPITAL
TEAM MEMBER(S) MAY ALSO CONDUCT MONTHLY OR QUARTERLY CALLS WITH GRANTEES TO
OBTAIN AN UPDATE ON THEIR RECENT ACTIVITY RELATED TO THE GRANT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

42

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2021

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

[illegible]

Part III

Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THERE IS A REIMBURSEMENT POLICY IN PLACE FOR HEALTH CLUB DUES, NYC CITIBIKE FEES, AND CLASS PASS FEES. THE ORGANIZATION DOES NOT PROVIDE THE EMPLOYEES CASH. THE ORGANIZATION REIMBURSED \$4,119 IN HEALTH CLUB FEES, CITIBIKE FEES, AND CLASS PASS FEES DURING THE YEAR.

PART I, LINE 7:

THE BOARD OF DIRECTORS APPROVED THE BONUS FOR MARTIN WHITTAKER AND THE CEO APPROVED THE BONUSES FOR THE OFFICERS AND KEY EMPLOYEES.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

45

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution 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 traded	X	3	130,072.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2021

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

47
OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMPANIES IMPROVE HOW THEY SERVE ALL THEIR STAKEHOLDERS WORKERS,
CUSTOMERS, COMMUNITIES, THE ENVIRONMENT, AND SHAREHOLDERS AS DEFINED
BY THE PUBLIC.

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

TO THE AMERICAN PUBLIC WHEN IT COMES TO JUST BUSINESS BEHAVIOR, BUT
ALSO DETAILS TIMELY, RELEVANT INSIGHTS INTO AMERICAN SENTIMENTS INTO
THE MOST CRITICAL ISSUES OF OUR TIME.

IN 2021, WE TRACKED, ANALYZED, AND RANKED 954 COMPANIES ACROSS FIVE
STAKEHOLDER GROUPS, 20 ISSUES, AND 241 DATA POINTS. OF THESE COMPANIES,
448 REGISTERED FOR OUR CORPORATE PORTAL AND 320 ENGAGED WITH OUR DATA
REVIEW PERIOD. WE WORKED WITH OVER 50 COMPANIES TO HELP THEM IMPROVE
THEIR STAKEHOLDER PERFORMANCE. OUR ANNUAL RANKINGS OF AMERICA'S MOST
JUST COMPANIES SHOWCASED THE COMPANIES AT THE FOREFRONT OF
STAKEHOLDER-DRIVEN LEADERSHIP, TRACKING HOW CORPORATE LEADERS DELIVERED
VALUE TO ALL THEIR STAKEHOLDERS INCLUDING THEIR WORKERS, CUSTOMERS,
COMMUNITIES, SHAREHOLDERS, AND THE ENVIRONMENT. IN 2021, WE LAUNCHED A
NEW, EXPANSIVE PARTNERSHIP WITH CNBC WHICH INCLUDES THE EXCLUSIVE
RIGHTS TO PUBLISH THE JUST 100 LIST OF COMPANIES LEADING OUR RANKING OF
AMERICA'S MOST COMPANIES, AS WELL AS ONGOING PROFILES AND SEGMENTS THAT
ELEVATE ESG DATA AND STAKEHOLDER METRICS ON PAR WITH TRADITIONAL
FINANCIAL METRICS TO DEFINE WHAT GOOD LOOKS LIKE REGARDING CORPORATE
PERFORMANCE TODAY.

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

IN ADDITION TO THE RANKINGS, THROUGHOUT 2021 WE BUILT OUT DATA-DRIVEN INSIGHTS AND PROGRAMMATIC INITIATIVES, PARTNERSHIPS, AND PRODUCTS TO DIRECTLY ENCOURAGE AND SUPPORT CORPORATIONS TO ADOPT BUSINESS PRACTICES THAT ADVANCE A STAKEHOLDER MODEL OF CAPITALISM. BELOW ARE KEY HIGHLIGHTS:

ADVANCING RACIAL EQUITY: THROUGH THE COUNTRY'S ONGOING RECKONING WITH RACIAL INJUSTICE, COMPANIES HAVE PLEDGED BILLIONS TOWARD ADVANCING RACIAL EQUITY, SETTING COMMITMENTS AND GOALS AND STARTING NEW INITIATIVES. IN 2021, WE FOCUSED ON TRACKING HOW COMPANIES WERE PERFORMING AGAINST THESE COMMITMENTS, LAUNCHING OUR CORPORATE RACIAL EQUITY TRACKER TO MONITOR POLICIES AND PRACTICES AND A SUPPORTING SERIES OF SPOTLIGHTS TO HELP COMPANIES TAKE ACTION ON KEY ISSUES FROM PAY EQUITY TO BOARD DIVERSITY. WE ALSO LAUNCHED THE CORPORATE RACIAL EQUITY ALLIANCE ALONGSIDE POLICYLINK AND FSG, PUBLISHING THE 2021 CEO BLUEPRINT FOR RACIAL EQUITY. WITH THE ALLIANCE, WE STARTED TO DEVELOP NEW CORPORATE PERFORMANCE STANDARDS TO SET THE BAR FOR WHAT GOOD LOOKS LIKE, EMBED ACCOUNTABILITY, AND ESTABLISH CONSISTENCY IN HOW CORPORATIONS APPROACH EQUITY.

SUPPORTING WORKER FINANCIAL WELLNESS: AFTER LAUNCHING THE WORKER FINANCIAL WELLNESS INITIATIVE IN 2020 WITH PAYPAL, THE FINANCIAL HEALTH NETWORK, AND THE GOOD JOBS INSTITUTE, WE SPENT 2021 BUILDING A COHORT OF PARTICIPATING COMPANIES AMONG THEM, CHIPOTLE, CHOBANI, PRUDENTIAL, AND VERIZON AND CREATING A COMMUNITY OF PRACTICE AND LEARNING AMONG PARTICIPANTS. WE ALSO WORKED TO CONTINUE ELEVATING THE IMPORTANCE OF A LIVING WAGE AS A PAY BENCHMARK AND, GOING FORWARD, ARE LOOKING TO ENSURE THAT THE STRIDES MADE TO RECOGNIZE WORKERS' FINANCIAL NEEDS

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

DURING THE PANDEMIC LAST OVER THE LONG TERM.

DEMONSTRATING THE INVESTOR CASE: JUST CAPITAL ALSO HELPS DRIVE CAPITAL TOWARD MORE JUST COMPANIES THROUGH DEVELOPING INVESTMENT PRODUCTS, CONVENING ESG INVESTORS FOR TIMELY CONVERSATIONS, AND DEMONSTRATING THE CONNECTION BETWEEN STAKEHOLDER PERFORMANCE AND MARKET PERFORMANCE. AS OF 2021, OUR SUITE OF PRODUCTS REPRESENTED A TOTAL OVER \$425 MILLION IN AUM ACROSS 11 DIFFERENT INVESTMENT PRODUCTS USING JUST CAPITAL DATA. OUR FLAGSHIP JUST ETF WAS ALSO AWARDED MORNINGSTAR ANALYST'S RATING OF BRONZE IN 2021. WE PARTNERED WITH GOLDMAN SACHS ASSET MANAGEMENT, BLACKROCK, LORD ABBETT, MORGAN STANLEY INVESTMENT MANAGEMENT, AND VANGUARD IN 2021 TO DEVELOP A QUESTIONNAIRE THAT OPENS A CONSTRUCTIVE AND VOLUNTARY DIALOGUE BETWEEN ASSET MANAGERS AND MUNICIPAL BOND ISSUERS ON CRITICAL SOCIAL ISSUES TO IMPROVE DISCLOSURE AND TRANSPARENCY ON TOPICS RELATED TO RACIAL EQUITY AND INCLUSION.

WEIGHING IN ON KEY ESG ISSUES: OUR 2021 SURVEY RESEARCH HELPED TO HIGHLIGHT WHAT ISSUES AMERICANS AGREE COMPANIES SHOULD ADD TO THEIR ESG AGENDAS AND WHAT OTHERS SHOULD RISE IN IMPORTANCE. WE ANALYZED THE STATE OF CORPORATE DISCLOSURE ON THESE ISSUES, INCLUDING HUMAN CAPITAL METRICS AND CLIMATE COMMITMENTS. UNDER A NEW ADMINISTRATION, WE WEIGHED IN ON NEW AND EMERGING ESG PUBLIC POLICY MEASURES INCLUDING THE U.S. SECURITIES AND EXCHANGE COMMISSION'S MOVE TO MANDATE CLIMATE RISK DISCLOSURE IN ANNUAL REPORTING.

NAVIGATING COVID-19'S CONTINUED IMPACT: AS THE PANDEMIC EVOLVED THROUGHOUT 2021, WE TURNED OUR FOCUS TO ITS LONG-TERM EFFECTS ON THE NATION'S WORKFORCE. WE POLLED THE AMERICAN PUBLIC TO LEARN WHAT THEY

Name of the organization	Employer identification number
JUST CAPITAL FOUNDATION, INC.	36-4764467

WANTED TO SEE COMPANIES PRIORITIZE TO HIRE IN A TIGHT LABOR MARKET AND TO SUPPORT THEIR EMPLOYEES FACING CAREGIVING CHALLENGES. WE ALSO EXAMINED HOW BOTH WORKERS AND MANAGEMENT FELT ABOUT WORKPLACE HEALTH AND SAFETY MEASURES AND PROVIDED GUIDANCE FOR COMPANIES IN APPROACHING REMOTE WORK, DEPENDENT CARE, AND PAID SICK LEAVE OVER THE LONG TERM.

OVERALL 2021 HIGHLIGHTS INCLUDE:

213 PRESS HIGHLIGHTS

178 EDITORIAL BYLINES

1,150,000 PAGEVIEWS

278 DONORS

OVER \$300,000 RAISED FOR THE DEEPAK CHOPRA SCHOLARS FUND

MORE THAN \$400,000 IN GIVING TUESDAY CONTRIBUTIONS

JUST CAPITAL POLLING HAS SHOWN A GROWING DESIRE FOR ACCOUNTABILITY, TRANSPARENCY, AND ACTION FROM CORPORATE AMERICA. THROUGHOUT THE COMING YEAR, JUST'S RESEARCH, POLLING, ANALYSIS, AND PROGRAMS WILL WORK TO INCENTIVIZE, GUIDE, AND SUPPORT COMPANIES' EFFORTS TO REBUILD TRUST WITH THEIR STAKEHOLDERS. WE'LL BE ESPECIALLY FOCUSED ON WORKERS, HELPING ENSURE ALL JOBS OFFER FAIR PAY, OPPORTUNITY FOR GROWTH, AND A FOCUS ON EQUITY FOR EMPLOYEES.

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

THE FINANCIAL STATEMENTS OF JUST CAPITAL FOUNDATION, INC. (THE "FOUNDATION") WERE AUDITED BY AN INDEPENDENT ACCOUNTANT, AS REQUIRED BY THE APPLICABLE STATE LAW UNDER THE DIRECTION OF AN AUDIT COMMITTEE. THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTANT AND REVIEWED BY THE ORGANIZATION'S OFFICERS, PRESIDENT AND AUDIT COMMITTEE WHO ARE GIVEN AMPLE

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

TIME AND OPPORTUNITY TO DISCUSS THEIR COMMENTS AND QUESTIONS WITH THE PREPARER, THE ORGANIZATION'S LEGAL COUNSEL AND, IF NEEDED, OTHER MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS. FINALLY THE FOUNDATION WILL PROVIDE A COPY OF THE FORM 990 TO THE BOARD OF DIRECTORS (EACH MEMBER RECEIVING THEIR INDIVIDUAL COPY), GIVING THE BOARD AN OPPORTUNITY TO PROVIDE INPUT AND ADDRESS ITS QUESTIONS OR COMMENTS BEFORE OR AT THE NEXT BOARD MEETING BEFORE FILING WITH THE IRS.

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

EACH DIRECTOR, OFFICER, AND OTHER STAFF MEMBER AND COMMITTEE MEMBER WITH GOVERNING-BOARD-DELEGATED POWERS SHALL, BEFORE INITIAL ELECTION OR APPOINTMENT AND ANNUALLY THEREAFTER, SIGN A STATEMENT AND GIVE SUCH STATEMENT TO THE SECRETARY OF JUST CAPITAL FOUNDATION, INC., WHICH AFFIRMS THAT SUCH PERSON: (A) HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, (B) HAS READ AND UNDERSTANDS THE CONFLICT OF INTEREST POLICY, (C) HAS AGREED TO COMPLY WITH THE CONFLICT OF INTEREST POLICY, (D) UNDERSTANDS THAT THE FOUNDATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES (AND WILL ENDEAVOR TO FURTHER SUCH PURPOSES), AND (E) UNDERSTANDS THAT HE OR SHE MUST DISCLOSE ANY CONFLICT OF INTEREST; SPECIFICALLY, THE DIRECTOR, OFFICER, AND OTHER STAFF MEMBER, OR COMMITTEE MEMBER MUST IDENTIFY, TO THE BEST OF HIS OR HER KNOWLEDGE ANY ENTITY OF WHICH HE OR SHE IS AN OFFICER, DIRECTOR, TRUSTEE, MEMBER, OR EMPLOYEE AND WITH WHICH THE FOUNDATION HAS A RELATIONSHIP, AND ANY TRANSACTION IN WHICH THE FOUNDATION IS A PARTICIPANT.

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

THE EXECUTIVE COMMITTEE APPROVES THE COMPENSATION OF THE FOUNDATION'S CEO

Name of the organization

JUST CAPITAL FOUNDATION, INC.

Employer identification number

36-4764467

AFTER A REVIEW OF HIS QUALIFICATIONS, HIS PROPOSED EMPLOYMENT CONTRACTS, AND COMPARABILITY DATA FROM OTHER ORGANIZATIONS. A SUMMARY OF EACH REVIEW AND DECISION IS PROVIDED IN THE MINUTES OF THE BOARD MEETING AT WHICH (OR THE UNANIMOUS WRITTEN CONSENT IN LIEU OF MEETING IN WHICH) THE DECISION WAS MADE. FOR THE REMAINDER OF OFFICERS AND KEY EMPLOYEES, THE CEO DETERMINES COMPENSATION WITH CONSULTATION FROM THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO DONORS AND PROSPECTIVE DONORS UPON REQUEST.

PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.