Form 990

Department of the Treasury Internal Revenue Service **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.

OMB No. 1545-0047

Open to Public Inspection

For the 2021 calendar year, or tax year beginning , 2021, and ending D Employer identification number Check if applicable: American Stewards of Liberty, Inc. Address change 74-2726757 P.O. Box 801 Telephone number Name change Georgetown, TX 78627 Initial return 512-591-7843 Final return/terminated Amended return G Gross receipts \$ 331.714. F Name and address of principal officer: H(a) Is this a group return for subordinates Application pending H(b) Are all subordinates included?
If "No," attach a list. See instructions. Same As C Above 501(c) (Tax-exempt status: X 501(c)(3)) ◀ (insert no.) 4947(a)(1) or 527 Website: ► N/A H(c) Group exemption number Form of organization: X Corporation Association Other > L Year of formation: 1992 M State of legal domicile: TX Summary Briefly describe the organization's mission or most significant activities: Assist communities in the protection education and research of property rights. **Governance** if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box ► Number of voting members of the governing body (Part VI, line 1a)..... 3 6 4 4 Total number of individuals employed in calendar year 2021 (Part V, line 2a)..... 5 4 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12..... 0. 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 62,484. 40,628. Program service revenue (Part VIII, line 2g)..... 139,199 283,585. Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 7,501. 1,882 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).... 203,565 331,714. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). . . . 237,451 210,412. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 56,724 98,688. 294,175. 309,100. Revenue less expenses. Subtract line 18 from line 12 19 -90,610. 22,614. **End of Year** 5 **Beginning of Current Year** Total assets (Part X, line 16)..... 20 37,105 59,719. 21 Total liabilities (Part X, line 26)..... 53,286. 0. Net assets or fund balances. Subtract line 21 from line 20 22 -16,18159,719. Signature Block Part II 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. Signature of officer Sign Here Margaret Byfield Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN X if P00199224 Barrett Garcia Paid self-employed ▶ Barrett Garcia & Co Preparer Firm's name Use Only Firm's address 32302 Camino Capistrano, Suite 214 Firm's EIN ► 33-0935931 (949)San Juan Capistrano, CA 92675 496-6363 May the IRS discuss this return with the preparer shown above? See instructions. Yes No

	Merican Stew				74-2726757	Page 2
Pa	rt III Statement of Program	Service Accomp	olishments			
_	Check if Schedule O contain	is a response or note	e to any line in this Par	t NI		
1	Briefly describe the organization's r		_			
	Assist communities in	the protection	on, education a	ind research of pro	perty rights	·
		-		·		
- 2	Did the executation undertake and in	-: £:				
_	Did the organization undertake any sig Form 990 or 990-EZ?					_
					Yes	X No
9	If "Yes," describe these new services of			_		_
3	Did the organization cease conducti	ng, or make significa	ant changes in how it co	onducts, any program service	s? Yes	X No
	If "Yes," describe these changes on So					
4	Describe the organization's program Section 501(c)(3) and 501(c)(4) organd revenue, if any, for each program	anizations are requir anizations are requir am service reported.	ments for each of its the	ree largest program services, t of grants and allocations to	, as measured by ex others, the total exp	penses. enses,
4 a	(Code:) (Expenses \$	238,007.	including grants of \$) (Rever	nue \$)
	ASL assists communities current issues affecting protect those rights as publications. ASL also pursues public property rights, (2) property rights, (2) property rights.	ng those righ nd educates t c interest li roviding advi	ts, advocates he public and continuous tigation by (1) ce to attorneys	for the community's elected leaders the litigating issues working in proper	s policies the rough seminar s relating to	s and
	and (3) facilitating ca	ases related	to property ric	apte	rek Tridues ca	565'
			CO PIOPOICY III	<u> </u>		
4b	(Code:) (Expenses \$		including grants of \$) (Reven	¢	
	, (Exponses 4_		- Licidaling grants of P) (Reveil	ue ş	
						
Act	Code:) (Expenses \$		- Ludina Lucia			
40 (Code:) (Expenses \$	II	ncluding grants of \$) (Revenu	ie ż)
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410	When a second se	0.1				
	other program services (Describe on S	*	. 4			
	Expenses \$	including grants of) (Revenue \$)	
4eT	otal program service expenses 🕨	238,0	07.			

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

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Form 990 (2021) American Stewards of Liberty, Inc.

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? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
+	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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
i	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Yes,'	28c		Х
29		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32		32		Х
33		33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V. line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	T	X
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36		36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai	tV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V.	1	Yes	· No
1.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	110
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X 200 (00011
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Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?...... 2 b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?..... 3 a b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule Q....... 3b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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). X 5 a 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... X 5 b **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... 5 c c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?.... 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible as charitable contributions?..... 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.... 6 b 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 X 7 a services provided to the payor?..... b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?..... 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file X 7 c Form 8282?..... X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?... 7 e X 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?..... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C?..... Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring 8 organization have excess business holdings at any time during the year?..... 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the sponsoring organization make any taxable distributions under section 4966?..... b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... 9h 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.... 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders..... 11 a **b** Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)...... 12 a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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?..... 13a Note: See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans..... c Enter the amount of reserves on hand..... X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year?..... 14b b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule Q..... Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X 15 excess parachute payment(s) during the year?..... If 'Yes.' see the instructions and file Form 4720, Schedule N. X 16 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. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any 17

If 'Yes,' complete Form 6069.

Form 990 (2021) American Stewards of Liberty, Inc. 74-2726757 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 Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year.... 6 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.... 4 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? See Schedule 0 2 X 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... X 4 Did the organization become aware during the year of a significant diversion of the organization's assets?..... X 5 Did the organization have members or stockholders?.... 6 X 7 a 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?.... 7 a 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?..... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a X 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates?.... X 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11 a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe on Schedule O how this was done..... 12 c 13 Did the organization have a written whistleblower policy?..... $\overline{\mathbf{x}}$ 13 X 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? 15 a X X 15b 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?.... 16 a 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?..... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Another's website Other (explain on Schedule O) 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. See Schedule 0

State the name, address, and telephone number of the person who possesses the organization's books and records >

F'orm 990 (2021) American Stewards of I	Libert	y, Inc.		74-27267	757 Page 7
Part VII Compensation of Officers, Direct Independent Contractors	ors, Tru	stees, Key Employe	ees, Highest C	ompensated E	mployees, and
Check if Schedule O contains a response	or note to	any line in this Part VII			
Section A. Officers, Directors, Trustees, Ko	ey Emp	loyees, and Highes	t Compensate	d Employees	
1 a Complete this table for all persons required to be listed organization's tax year.	. Report o	ompensation for the calen	dar year ending wi	th or within the	
 List all of the organization's current officers, directions in columns (D), (E), and (F) in columns (D), (E), and (F) in columns 	ectors, tru f no comp	istees (whether individua pensation was paid.	ils or organization	s), regardless of ar	nount of
 List all of the organization's current key employees, if List the organization's five current highest comp who received reportable compensation (box 5 of Form W-2 organization and any related organizations. 	ensated e , Form 10	employees (other than a 99-MISC, and/or box 1 of F	n officer, director, Form 1099-NEC) of	trustee, or key em more than \$100,000	from the
 List all of the organization's former officers, key of reportable compensation from the organization and any 	related or	ganizations.			than \$100,000
 List all of the organization's former directors or truste organization, more than \$10,000 of reportable compen 	es that red sation fro	ceived, in the capacity as a m the organization and	former director or t any related organ	rustee of the izations.	
See the instructions for the order in which to list the pe	ersons ab	oove.			
Check this box if neither the organization nor any relate	ed organiz	ation compensated any cu	rrent officer, direct	or, or trustee.	
		(C)			
(A) Name and title	(B) Average hours per	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-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from
	week (list any	Form Highe emple Key e Office Office or din	MISC/1099-NEC)	MISC/1099-NEC)	the organization and related

(A) Name and title			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other					
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Margaret Byfield	40					8				
Executive Direc	0-	Х		Х				75,940.	0.	19,284.
(2) Danial Proficial	40			21				73,340.	0.	13,204.
CEO	0	Х		х				68,346.	0.	2,374.
(3) Mike Dail	1							00,010.		2,0,1.
Chairman	0	Х						0.	0.1	0.
(4) Carolyn Carey	1									
Vice Chairman	0	Х						0.	0.	0.
(5) Porter J. Martin	1									
Director	0	X						0.	0.	0.
(6) Phillip Martin	1									
Director	0	X						0.	0.	0.
(8)										
(9)										
(10)										
(11)										
(12)			+		\dashv		\dashv			
(13)			+							
(14)				1						

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Form **990** (2021)

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Fart VII Section A. Officers, Directors, In	ustees,	Key	En	npi	oye	es,	an	d Highest Con	npensated Emp	oloyee	S (continued)
483	(B)			Po	C) sition	I			((D)
(A) Name and title	Average hours per	box	c. unle	ess p	erson	e than is bot tor/trus	h an stee)	Reportable compensation from	(E) Reportable compensation from	Estin	(F) mated amount
	week (list any hours for	or dir	institu	Officer	Key	employee	om	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	comp	of other pensation from organization and related
	related organiza - tions	ector t	dional	ΩĘ	Key employee	oyee	<u>ā</u>			or	ganizations
	below dotted line)	or director	Institutional trustee		8	pensa					
(d.F.)			(5)			8					
(15)											
(16)											
(17)				_							
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(25)		-	+	\dashv	\dashv		+				
1 b Subtotal.						_		144 006			04 650
c Total from continuation sheets to Part VII, Sectio							-	144,286.	0.		21,658. 0.
d Total (add lines 1b and 1c)	n those lis	tod a	hove	 hu te	ho re		ad m	144,286.	0.	oncotio	21,658.
from the organization • 0			2046	J) VVI		JGGIVI	su II	lore triair \$100,000	or reportable comp		
3 Did the organization list any former officer, director	or trustee	kev	em	nlos	100	or h	inhe	et compensated a	mployoo		Yes No
on line 1a? If 'Yes,' complete Schedule J for such	individua	<i>I</i>	• • • •			• • • •		•••••		3	Х
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater such individual.	eportable than \$15	com 0,000	pen)? <i>If</i>	sati <i>'Ye</i>	on a	and o	the lete	r compensation from Schedule J for	om		12
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compens	ation	fror	m aı	ny u	nrela	 ited	organization or ir	ndividual	4	X
Section B. Independent Contractors										5	X
1 Complete this table for your five highest compensation from the organization. Report compensation.	ated indepation for th	ende e cal	ent c	cont ar ye	ract ar e	ors t	hat i	received more that h or within the orga	in \$100,000 of inization's tax year.		-
(A) Name and business addre								(B) Description of		(C Compe	;) nsation
							+				
	<u></u>						+	 			
							1				
2 Total number of independent contractors (including but		d to t	hose	e list	ed a	bove	<u> </u>	o received more th	an		
\$100,000 of compensation from the organization >		EA010	BI N	יוכפוף	21					Form 6	990 (2021)
	161		J_ V:	وتصورر						1 OHIII S	100 (CUCI)

_		Check if Schedule O contains a	response or note to a	ny line in this Part VI	II <u></u>		
_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
Ŋ	<u>ا چ</u>	a Federated campaigns	1a				312-314
Contributions, Gifts, Grants,	Amounts	b Membership dues	1 b				
Ŋ,	§	c Fundraising events	1 c				
		d Related organizations	1 d				
Ø.	퇽	e Government grants (contributions)	1 e				
P C	0	f All other contributions, gifts, grants, and similar amounts not included above	1f 40.628				
€3	5	Noncash contributions included in	10,0201				
5		lines 1a-1f	1 g				
		h Total. Add lines 1a-1f.		40,628.			
Program Service Revenue	1,		Business Code				
e e		a Membership Dues & Assessmen		184,820.	184,820.		
ë R		b Program services	541900	98,765.	98,765.		
Νįς	1	<u>_</u>					
જુ		<u> </u>					
Tan		f All other program service revenue.					
8		g Total. Add lines 2a-2f		000 50-			
	3			283,585.			
	3	other similar amounts)	as, interest, and				
	4	Income from investment of tax-exe					
	5	Royalties					
		(i) Real					
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
	(c Rental income or (loss) 6c					
	•	Net rental income or (loss)					
		a Gross amount from (i) Securities					
		sales of assets					
	Ł	other than inventory Less: cost or other basis					
		and sales expenses 7b					
		Gain or (loss) 7c					
	C	Net gain or (loss)	······				
<u>a</u>	8 a	Gross income from fundraising events					
		(not including \$					
Š		of contributions reported on line 1c).					
Other Reven		See Part IV, line 18	8a				
혼		Less: direct expenses	8b				
ō ∣	С	Net income or (loss) from fundraising	g events				
	9a	Gross income from gaming activities.					
-		See Part IV, line 19.	9a				
- 1		Less: direct expenses	9b				
		Net income or (loss) from gaming ad	ctrvities				
1	0a	Gross sales of inventory, less returns and allowances					
			10a 7,501.				
		-	106				
\dashv	C	Net income or (loss) from sales of in	Business Code	7,501.	7,501.		
1	1a		Dualliesa Code				
Revenue	b						
<u>ā</u>			 				
2	d	All other revenue					
		Total. Add lines 11a-11d					
1		Total revenue. See instructions		221 71	004 055		
AA		- Cam revenues Occ moductions		331,714.	291,086.	0.	0.

	Check if Schedule O contains a r	esponse or note to any	line in this Part IX		
Do 6b	not include amounts reported on lines , 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	organizations and domestic governments. See Part IV, line 21				3.00
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	165,944.	127,776.	19,914.	18,254.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	
7		29,393.	22,633.	3,527.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	29,333.		3,327.	3,233.
9	Other employee benefits				
10	9	15,075.	11,608.	1,809.	1,658.
11	Fees for services (nonemployees):			1,003.	1,000.
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	3,502.	2,697.	420.	385.
	Office expenses.	6,202.	4,776.	744.	682.
	Information technology		4,770.	/11.	002.
15					
16	Occupancy	6,258.	4,819.	751.	688.
17	Travel	13,444.	10,352.	1,613.	1,479.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		20,0021	2,7020.	2,413.
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	1,182.	910.	142.	130.
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.).	4,715.	3,631.	566.	518.
a	Printing and Publications	35,072.	27,005.	4,209.	3,858.
	Computer and website services	9,098.	7,005.	1,092.	1,001.
	Postage and Shipping	8,286.	6,380.	994.	912.
	Finance charges and fees	3,282.	2,527.	394.	361.
	All other expenses	7,647.	5,888.	918.	841.
5	Total functional expenses. Add lines 1 through 24e	309,100.	238,007.	37,093.	34,000.
	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)				

Form 990 (2021)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 1 59,719. 37,105 Savings and temporary cash investments..... 2 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net..... Δ 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 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B)..... 7 Notes and loans receivable, net..... 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 10 c 11 11 Investments -- publicly traded securities..... Investments — other securities. See Part IV, line 11..... 12 13 13 Investments - program-related. See Part IV, line 11...... 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 15 16 59,719. 37,105. Total assets. Add lines 1 through 15 (must equal line 33)..... 16 17 Accounts payable and accrued expenses 17 Grants payable..... 18 18 Deferred revenue. 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Loans and other payables to any current or former officer, director, trustee, 22 key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons...... Secured mortgages and notes payable to unrelated third parties..... 23 24 53,286. 24 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. 25 Total liabilities. Add lines 17 through 25..... 53,286. 26 0. Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 59,719. -16,18127 Net assets without donor restrictions..... 28 Net assets with donor restrictions..... Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 59,719. -16,181 32 Total net assets or fund balances..... 33 59,719. 33 Total liabilities and net assets/fund balances..... 37,105.

Forn	n 990 (2021) American Stewards of Liberty, Inc. 74-	2726757	,	Pa	age 12
Pai	Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	31,	714.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	09,	100.
3	Revenue less expenses. Subtract line 2 from line 1	3		22,	614.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-	16,	181.
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). See Schedule O	9		53,2	286.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)).	10		59,1	719.
Par	t XII Financial Statements and Reporting				
-	Check 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: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain on Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		2 b		X
	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	te			
С	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?		2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
	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?		3 a		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		3Ь		
BAA	TEEA0112L 09/22/21		Form	990 (2021)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number American Stewards of Liberty, Inc. 74-2726757 Part | Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations..... g Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed in your governing document? (vi) Amount of other support (see instructions) Yes Nο (A) (B) (C) (D) (E)

Schedule A (Form 990) 2021 American Stewards of Liberty, Inc. 74-2726757

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

Section A. Public Support						
Calendar year (or fiscal year peginning 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 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						
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)						
6 Public support. Subtract line 5 from line 4.						
ection B. Total Support			<u> </u>		<u> </u>	
alendar year (or fiscal year eginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
Net income from unrelated business activities, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
1 Total support. Add lines 7 through 10						
2 Gross receipts from related activities	ties, etc. (see ins	tructions)				
First 5 years. If the Form 990 is f organization, check this box and	or the organizationstop	n's first, second,	third, fourth, or fi	fth tax year as a s	section 501(c)(3)	
ection C. Computation of Pub	lic Support P	ercentage				
Public support percentage for 202Public support percentage from 2	•					0
5a 33-1/3% support test—2021. If the and stop here. The organization of	e organization die	d not check the be	ox on line 13, and	line 14 is 33-1/39	% or more, check the	his box
b 33-1/3% support test—2020. If the and stop here. The organization of	organization did	not check a box	on line 13 or 16a.	and line 15 is 33	-1/3% or more, che	ck this box
7a 10%-facts-and-circumstances tes or more, and if the organization n the organization meets the facts-a	neets the facts-ar	id-circumstances	test, check this be	ox and stop here.	Explain in Part VI	how .
b 10%-facts-and-circumstances tes or more, and if the organization n organization meets the facts-and-	neets the facts-ar	id-circumstances	test, check this be	ox and stop here.	Explain in Part VI	how the
, manizanon meste me tarte, and.	circumstances fe	st. the organization	on auzumes as a l	JUDIICIV SUDDOMEO	ORGANIZATION	Bran.

Schedule A (Form 990) 2021 American Stewards of Liberty, Inc. 74-2726757

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on li	e 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.	

Se	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')					.,,	
		223,827.	84,187.	116,948.	111,754.	225,448.	762,164.
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	36,367.	215,206.	204,390.	91,811.	106,266.	654,040.
3	Gross receipts from activities	30,307.	213,200.	204,330.	91,011.	100,200.	034,040.
	that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	260,194.	299,393.	321,338.	203,565.	331,714.	1,416,204.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
_	Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line	0.	0.	0.	0.	0.	0.
0	7c from line 6.)						1,416,204.
Sec	tion B. Total Support			<u>'</u>			_,,
Calen	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	260,194.	299,393.	321,338.	203,565.	331,714.	1,416,204.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						0.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
C	Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
13	Total support. (Add lines 9, 10c, 11, and 12.)	260,194.	299,393.	321,338.	203,565.	331,714.	1,416,204.
	First 5 years. If the Form 990 is forganization, check this box and	or the organization stop here	's first, second, th	hird, fourth, or fift	h tax vear as a se	ection 501(c)(3)	
	tion C. Computation of Pub						
	Public support percentage for 202						100.00 %
	Public support percentage from 2					16	100.00 %
	tion D. Computation of Inve		-				
17	Investment income percentage fo	r 2021 (line 10c, co	olumn (f), divided	by line 13, colun	nn (f))	17	0.00 %
	Investment income percentage from						0.00 %
	33-1/3% support tests—2021. If this not more than 33-1/3%, check to	this box and stop l	nere. The organiz	ation qualifies as	a publicly suppor	ted organization.	
	33-1/3% support tests—2020. If the line 18 is not more than 33-1/3%, Private foundation. If the organize	check this box and	d stop here. The	organization qual	ifies as a publicly	supported organi	zation 🟲 📗
		and the one	. = 50% 011 11110 17		on the sex and a		

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

Pa	art IV Supporting Organizations (continued)			
	U. H. annuitation accepted a gift or contribution from any of the following persons?		Yes	No
	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,	11a		
	the governing body of a supported organization?	11b		
	b A family member of a person described on line 11a above?	11c		
	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.	110		
Se	ction B. Type I Supporting Organizations		Yes	No
1	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	1		NO
2	during the tax year. 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		
Se	ction 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		ΠÊ
Se	ction 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		
Se	ction 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).			
	The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	ıctions	5).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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.			
	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.	За		
	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		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	ınızatı	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	v. 20, 1970 (explain in t complete Sections A	Part VI). See through E.
Sec	ction 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		
Sec	tion 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):			
ē	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
- 0	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6	····	
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion 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 integer (see instructions).	grated 1		
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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continu	ıed)	•
Sec	tion 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 - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8	
9	Distributable amount for 2021 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

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 — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018	And the second s		
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			a middle and the same makes and an a
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, explain in Part VI. See instructions.			Section Control of the Control of th
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018		Emm	
C Excess from 2019		The state of the s	n dili ev disemus serra seminarem bebanare ere
d Excess from 2020			
e Excess from 2021			

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Schedule A (Form 990) 2021

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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 B (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

Employer identification number

2021

OMB No. 1545-0047

Form 990 or 990-EZ Solicity	
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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 General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for a contributor's total contributions. Pecial Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1 regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part 16b, and that received from any one contributor, during the year, total contributions of the gre. (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributor, during the year, total contributions of more than \$1,000 exclusively for religious, cliterary, or educational purposes, or for the prevention of cruelty to children or animals. Complete 'NA' 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 contributions totaled more than \$1,000. If this box is checked, enter here the total contributions during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., purpose. Don't complete any of the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., purpose. Don't complete any of the General Rule applies to this organization because it received nonexclusively religious, charitable, etc.	tion
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during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the General Rule applies to this organization because it received nonexclusively religious, charitable.	aut no cuch
General Rule applies to this organization because it received nonexclusively religious, charitab	s that were received
walling 40,000 or more during the year	de etc. contributions
nution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Sch st 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	nedule B (Form 990), but it

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Employer identification number

American	Stewards	of	Liberty	Tnc
VMCTTCall	DIEMATUS	OT	TITLET CA'	THU

74-2726757

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>5,250.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 12,000.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 14,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$25,628.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
DAA	TFFA0702 10/06/21		(Complete Part II for noncash contributions.)

1 1 Pa

American Stewards of Liberty, Inc.

74-2726757

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
RAA	TEEA0703L 10/06/21	\$Schedule F	3 (Form 990) (2021)

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	x) (See separate instruc in 501(c)(4), (5), or (6) c	ctions), then organizations: Complete Part III.		-	
Name of orga				Employer identific	ation number
Americ	an Stewards of	Liberty, Inc.		74-272675	57
Part I-A	Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1 Prov	ride a description of the	organization's direct and indirect political on of 'political campaign activities.'			
2 Polit	ical campaign activity e	xpenditures. See instructions		▶\$	}
		campaign activities. See instructions			
Dart R	Complete if the o	rganization is everynt under secti	on 501(c)(3)		
1 Ente	r the amount of any exc	sise tax incurred by the organization under	section 4955		0.
		cise tax incurred by organization managers			
		a section 4955 tax, did it file Form 4720 for			
4a Was	a correction made?				Yes No
	es,' describe in Part IV.				
		rganization is exempt under secti			
1 Ente	r the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities > \$	
2 Ente 527 c	r the amount of the filine exempt function activitie	g organization's funds contributed to other	organizations for sec	tion ▶\$	
3 Total	l exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
		e Form 1120-POL for this year?			
5 Ente organ amou segre	r the names, addresses nization made payments int of political contribution egated fund or a politica	and employer identification number (EIN) s. For each organization listed, enter the all s received that were promptly and directly del all action committee (PAC). If additional spa	of all section 527 poli mount paid from the f ivered to a separate po ace is needed, provide	tical organizations to w illing organization's fund litical organization, such e information in Part IV	rhich the filing ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)	-				

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

Schedule C (Form 990) 2021

	(h)).	on is exclude diluct 3	ection 30 (C)(3) &i	nd filed Form 5768 (el	ection under
A Check ► if the filin	g organization belo	ngs to an affiliated group (a	nd list in Part IV each aff	iliated group member's name	
address,	EIN, expenses, a	nd share of excess lobbyir	na expenditures).	mates group momber 3 fame	' 1
B Check ► if the filir	ng organization ch	ecked box A and 'limited o	control' provisions appl	y.	
	'expenditures' me	ying Expenditures eans amounts paid or incu		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ires to influence p	ublic opinion (grassroots I	obbying)	9,273.	
b Total lobbying expenditu	res to influence a	legislative body (direct lol	bbvina)	3,2,3,	
c Total lobbying expenditu	ires (add lines 1a	and 1b)		9,273.	(
d Other exempt purpose e	xpenditures	**********		200 007	
e Total exempt purpose ex	kpenditures (add li	nes 1c and 1d)		309,100.	
f Lobbying nontaxable am columns	ount. Enter the ar	nount from the following to	able in both		
If the amount on line 1e, colu	mn (a) or (b) is:	The lobbying nontaxable	amount is:	01,020.	
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0		\$100,000 plus 15% of the exces	s over \$500,000.		
Over \$1,000,000 but not over \$1		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$1	7,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable ar	mount (enter 25%	of line 1f)		15,455.	0
h Subtract line 1g from line	: 1a. If zero or les:	s, enter -0		207.001	0
i Subtract line 1f from line	1c. If zero or less	, enter -0		0.	0
j If there is an amount other section 4911 tax for this y	than zero on either year?	line 1h or line 1i, did the or	ganization file Form 4720	reporting	
		4-Year Averaging Period	Inder Section 501/b)		
(oonic					
	Columns de	ow. See the separate inst	ructions for lines 2a th		
	Columns de	t made a section 501(h) el low. See the separate inst ying Expenditures During	ructions for lines 2a th	rough 2f.)	
Calendar year (or fiscal year beginning in)	Columns de	ow. See the separate inst	ructions for lines 2a th	rough 2f.)	(e) Total
Calendar year (or fiscal year	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021	
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line)	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	rough 2f.) od	(e) Total 61,820.
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021	61,820.
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line)	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021 61,820.	61,820 92,730
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021 61,820.	61,820. 92,730. 9,273.
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021 61,820.	92,730. 9,273. 15,455.
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line	Lobb	iow. See the separate inst ying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	(d) 2021 61,820.	

Dort ILP Complete if the every instinction is exceeded as a line of the complete if the every instinction is exceeded as a line of the complete if the every instinction is exceeded as a line of the every instinction in the complete if the every instinction is exceeded as a line of the every instinction in the complete if the every instinction is exceeded as a line of the every instinction in t	
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5	768
(election under section 501(h)),	

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		1)	(b)	
		No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If 'Yes,' enter the amount of any tax incurred under section 4912				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(cV4) section 501	-VE			

exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
	a Current year	2a	
	b Carryover from last year	2b	
	c Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Additional Information

As a part of our educational activities, we occasionally develop policy positions that the general public can advance to their local, state and federal representatives, such as a local government resolutions on an issue that calls for the protection of the citizens constitutionally protected property rights.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization American Stewards of Liberty, Inc.

				74-2726757	
Pa	art I Organizations Maintaining Donor	r Advised Funds or Other	Similar Fur	ids or Accounts	
	Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line	6.	
		(a) Donor advised fun	ds	(b) Funds and other accour	nts
1					
2					
3	1 55 -5 Telline of grante from (during Joseph 1 1 1 1 1 1 1				
4	Aggregate value at end or year				
5	Did the organization inform all donors and dono are the organization's property, subject to the or	or advisors in writing that the ass organization's exclusive legal cor	sets held in do	nor advised funds	No
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit of impermissible private benefit?	s, and donor advisors in writing to the donor or donor advisor, or	hat grant function for any other	Is can be used only purpose conferring	No
Pa	rt II Conservation Easements.				
	Complete if the organization answ	ered 'Yes' on Form 990, P	art IV, line	7.	
1		the organization (check all that a	apply).		
	Preservation of land for public use (for example	e, recreation or education)	Preservation	on of a historically important land a	rea
	Protection of natural habitat			on of a certified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization he last day of the tax year.	ld a qualified conservation contribu	tion in the form	of a conservation easement on the	
				Held at the End of the T	ax Year
	a Total number of conservation easements				
	b Total acreage restricted by conservation easeme	ents		2 b	
	c Number of conservation easements on a certifie	•			
	d Number of conservation easements included in structure listed in the National Register	*********************		. 2d	
3	Number of conservation easements modified, transftax year ►	ferred, released, extinguished, or te	rminated by the	e organization during the	
4	Number of states where property subject to conserve	ation easement is located ▶			
5	Does the organization have a written policy rega	arding the periodic monitoring, in	spection, hand	dling of violations,	_
	and enforcement of the conservation easements	s it holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, ins				
7	Amount of expenses incurred in monitoring, inspecti	ing, handling of violations, and enfo	orcing conserva	tion easements during the year	
8	Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?	ine 2(d) above satisfy the require	ements of sect	tion 170(h)(4)(B)(i)	No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to conservation easements.	ts conservation easements in its the organization's financial state	revenue and ments that de	expense statement and balance sh scribes the organization's accounting	eet, and ng for
)ar	t III Organizations Maintaining Collect	ions of Art Historical Trac	SCHEAC OF	Whor Cimilar Assets	
	Complete if the organization answer	ered 'Yes' on Form 990, Pa	art IV, line 8	B	
1 a	If the organization elected, as permitted under F, historical treasures, or other similar assets held it Part XIII the text of the footnote to its financial si			ement and balance sheet works of furtherance of public service, provi	art, de in
b	If the organization elected, as permitted under Fa historical treasures, or other similar assets held for p following amounts relating to these items:	public exhibition, education, or rese	arch in furthera	ince of public service, provide the	
	(i) Revenue included on Form 990, Part VIII, line	e 1			
	(ii) Assets included in Form 990, Part X				
	If the organization received or held works of art, histoamounts required to be reported under FASB AS	C 958 relating to these items:		•	
	Revenue included on Form 990, Part VIII, line 1.				
b	Assets included in Form 990, Part X			▶ \$	

Schedule D (Form 990) 2021 American St Part III Organizations Maintaining Co	ewards of Libert	y, Inc.	74-27 or Other Similar A	726757 Page 2 ssets (continued)
3 Using the organization's acquisition, accession items (check all that apply):				
a Public exhibition	d∏loar	or exchange program		
b Scholarly research	e Othe			
c Preservation for future generations				
Provide a description of the organization's colle Part XIII.	ections and explain how the	ey further the organization	n's exempt purpose in	
5 During the year, did the organization solicit to be sold to raise funds rather than to be r	or receive donations of a	rt, historical treasures,	or other similar assets	Yes No
Part IV Escrow and Custodial Arrange	ements. Complete if	the organization a	nswered 'Yes' on F	orm 990, Part IV.
line 9, or reported an amount of	on Form 990, Part X,	line 21.	<u> </u>	
1 a Is the organization an agent, trustee, custoo on Form 990, Part X?	dian or other intermediary	for contributions or of	her assets not included	Yes No
b If 'Yes,' explain the arrangement in Part XII	I and complete the follow	ing table:	***************************************	
B				Amount
c Beginning balance				
d Additions during the year	**********		1d	
e Distributions during the year f Ending balance				
2a Did the organization include an amount on f				Vee Ne
b If 'Yes,' explain the arrangement in Part XIII				
	Total Total Title Oxpic	nation has been provid	ica on i ait Xiii	
Part V Endowment Funds. Complete	f the organization ar	nswered 'Yes' on F	orm 990, Part IV. I	ine 10.
(a) Curre				
1 a 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 curr	ent year end balance (lin	e 1g, column (a)) held	as:	
a Board designated or quasi-endowment	8			
b Permanent endowment ▶	%			
c Term endowment ► %				
The percentages on lines 2a, 2b, and 2c should	equal 100%.			
3 a Are there endowment funds not in the possessio organization by:	n of the organization that a	re held and administered	d for the	Yes No
(i) Unrelated organizations				. 3a(i)
(ii) Related organizations				
b If 'Yes' on line 3a(ii), are the related organization	ations listed as required o	n Schedule R?		
4 Describe in Part XIII the intended uses of the		nt funds.		
Part VI Land, Buildings, and Equipmer			·	
Complete if the organization ans	swered 'Yes' on Forn	n 990, Part IV, Iine	11a. See Form 99	0, 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
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		1,182.	1,182.	0.
otal. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, c	olumn (B), line 10c.)	· · · · · · · · · · · · · · · · · · ·	0.

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 American Stewards	of Liberty, I	nc.	74-2726757	Page 3
Part VII Investments – Other Securities.		N/A	See Farm 000 Ded V	E 10
Complete if the organization answered (a) Description of security or category (including name of security)	(b) Book value		on: Cost or end-of-year market valu	
(1) Financial derivatives.	(5) 5001 (4140	(C) Motilod of Valuation	on, oost or end-or-year market valu	
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D) (E)		<u> </u>		
(F)			<u> </u>	
(G)				
(H)				
(1)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)				T- 1
Part VIII Investments — Program Related. Complete if the organization answered	'Vec' on Form 99	N/A	on Form 000 Bort V I	ina 12
(a) Description of investment	(b) Book value	(c) Method of valuation	Cost or end-of-year market	value
(1)	(5) 5511 (41.45)	(a) monda or releasion.	Court of Orla of your market	- Value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(9)				
(10)			<u> </u>	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)				
Part IX Other Assets.	N/A) D-+ N/ E 11-1 0	- F 000 B + V +	
Complete if the organization answered (a) Description	res on Form 990	o, Part IV, line 11d. Se	ee Form 990, Part X, II (b) Book va	
(1)	on prom		(b) Book ve	ilue
(2)				
(3)				
(4)				
(6)				
(7)				
(8)				
(9) (10)	·			
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15)			
Part X Other Liabilities.				
Complete if the organization answered 'Yes' on For	m 990, Part IV, line 11	e or 11f. See Form 990, Pai		
7. (a) Descrip (1) Federal income taxes	tion of liability		(b) Book val	ue
(2)				
(3)				
(4)				
(5)				
(6) (7)	<u> </u>			
(8)	<u> </u>			
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.).	ata ta tha			
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footn ax positions under FASB ASC 740. Check here if the text of the footnote has be	ous to the organization's fina sen provided in Part XIII	ancial statements that reports the	organization's liability for uncertain	
BAA	TEEA3303L 08/30/21		Schedule D (Form 990)	2021

Schedule D (Form 990) 2021 American Stewards of Liberty, Inc.	4-2726757	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn. N/A	
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	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	-	
c Recoveries of prior year grants	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1.	3	
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		
b Other (Describe in Part XIII.)	-	
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Peturn N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	retuiii. N/A	
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		

2 b

2 c

4a

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.

b Prior year adjustments.

d Other (Describe in Part XIII.) 2d
e Add lines 2a through 2d.

a Investment expenses not included on Form 990, Part VIII, line 7b......

b Other (Describe in Part XIII.)....

c Add lines 4a and 4b

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).

3 Subtract line 2e from line 1....

4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Part XIII | Supplemental Information.

2 e

3

4 c

5

SCHEDULE O (Form 990)

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.

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

2021

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

American Stewards of Liberty, Inc.

Employer identification number

74-2726757

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

The Executive Director and CEO are married.

Form 990, Part VI, Line 11b - Form 990 Review Process

Reviewed by the CEO and Executive Director of the organization, and outside legal counsel.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Annual budget, which includes proposed annual compensation of all officers, is presented to, and approved by, the Board of Directors.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Annual budget, which includes proposed annual compensation of all officers, is presented to, and approved by, the Board of Directors.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Available upon request

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances