Form	99	0	Return	of Organization Exe	mnt F	rom Inc	omo	Tav		OMB No. 1545-0047
Form	50		Neturn		mpri		UIIIC	Ιαλ		2020
			Under section 501(c),	527, or 4947(a)(1) of the Interna	al Reven	ue Code (ex	cept pri	vate found	lations)	2020
Departr	nent of t	the Treasury	Do not en	er social security numbers or	n this forn	n as it may	be made	e public.		Open to Public
		ue Service	► Go to v	/ww.irs.gov/Form990 for instr	uctions a	and the late	st inforr	mation.		Inspection
A F	or the	2020 calend	ar year, or tax year begin	ning		, 2020, a	nd endi	ng		, 20
B CI	neck if a	pplicable:	C Name of organization RE	SCUE 22 FOUNDATION I	NC				D Emplo	over identification number
Ad	ldress c	hange	Doing business as							82-5072390
Na Na	ame cha	ange	Number and street (or P.	box if mail is not delivered to street add	lress)		Room/sui	ite	E Teleph	none number
Ini	tial retu	rn	7006 229TH ST							(302)272-8029
E Fi	nal retur	n/terminated	City or town, state or prov	vince, country, and ZIP or foreign postal co	ode				G Gross	receipts
Ar	nended	return	Bradenton, FL	34211					\$	227,055
Ap	plicatio	n pending	F Name and address of prin	ncipal officer: ERICK INNIS				H(a) Is this a	group return fe	or subordinates? Yes X No
			Same as C abov	e				H(b) Are all	subordinate	s included? Yes No
I Ta	ax-exem	pt status: X	501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or	5	27		lf "No,"	attach a lis	t. See instructions
JW	ebsite:	► N/A						H(c) Group	exemption r	number 🕨
K Fo	orm of o	rganization: X	Corporation Trust Ass	ociation 🗌 Other 🕨	L	. Year of formati	on: 201	8 м з	State of lega	al domicile: FL
Par	tl	Summar	у							
	1	Briefly descr	ibe the organization's missi	on or most significant activities:	RESC	UE 22 FC	UNDAT	ION PAI	RS RES	SCUED WORKING
		BREED CA	NINES WITH MILITA	RY VETERANS PROVIDIN	GANE	TWORK OF	SOCI	AL SUPP	ORT, F	RETRAINING AND
Ce		PLACEMEN	T OF RESCUE ANIMA	LS					-	
nar										
Governance	2	Check this bo	$bx \triangleright \square$ if the organization	discontinued its operations or d	isposed o	of more than	25% of i	ts net asse	ts.	
	3								. 3	7
აბ (ი	4			s of the governing body (Part VI	, line 1b)				. 4	7
tie	5			calendar year 2020 (Part V, line					. 5	0
Activities &	6	Total numbe	<u> </u>							
¥	7a		(necessary)						0
				from Form 990-T, Part I, line 11					. 7b	0
								Prior Year		Current Year
	8	Contributions	s and grants (Part VIII. line	1h)					3,918	227,055
Ð	9	Program ser	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0						
Revenue	10	-), lines 3, 4, and 7d)						0
Sev	11			es 5, 6d, 8c, 9c, 10c, and 11e)						0
	12			must equal Part VIII, column (A),				218	3,918	227,055
	13		imilar amounts paid (Part I		••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0			
	14		to or for members (Part I)							0
	15			benefits (Part IX, column (A), li						0
es				column (A), line 11e)						0
Expenses			sing expenses (Part IX, col				•			U
ğ	17			ues 11a-11d, 11f-24e)			-	184	1,848	171,261
ш	18			equal Part IX, column (A), line 2					4,848	171,201
	19			18 from line 12					1,070	55,794
. 0								nning of Curr	-	End of Year
Net Assets or Fund Balances	20	Total assets	(Part X line 16)						5,062	91,856
Bala	21							50	,002	0
und ⊿	22			line 21 from line 20				36	5,062	91,856
Par			re Block			<u></u>	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	517050
		U U		n, including accompanying schedules and	d statements	, and to the best	of my know	vledge and be	lief, it is	
true, c	orrect, a	and complete. Dec	claration of preparer (other than offi	cer) is based on all information of which p	reparer has a	any knowledge.				
		ANGE	LA CONNOR							
Sign	1	D	e of officer						Dat	e
Here		ANGE	LA CONNOR, VICE P	RESIDENT						
			print name and title							
		Print/Type pre	•	Preparer's signature		Date		Check	if	PTIN
Paid				DARRELL D HINCH		06-09-20	22	self-em	└ "	P00965449
Prep				S HINCH INC		20 03-20		irm's EIN ►	10,00	100203112
Use								Phone no.		
000	2		De Soto					none no.	636-5	586-5258
May t	he IR 9	S discuss this		own above? (see instructions)						Yes X No
			on Act Notice, see the se							Form 990 (2020)

Form	n 990 (2020) RESCUE 22 FOUNDATION INC	82-5072390	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	RESCUE 22 FOUNDATION PAIRS RESCUED WORKING BREED CANINES WITH MILITARY VETER	ANS PROVIDIN	IG A
	NETWORK OF SOCIAL SUPPORT, RETRAINING AND PLACEMENT OF RESCUE ANIMALS		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	🗌 Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	🗌 Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	d by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c	thers,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 159,361 including grants of \$) (Revenue	\$)
	RESCUE 22 FOUNDATION PAIRS RESCUED WORKING BREED CANINES WITH MILITARY VETER	ANS PROVIDIN	IG A
	NETWORK OF SOCIAL SUPPORT, RETRAINING AND PLACEMENT OF RESCUE ANIMALS		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 159,361		
			000 (2020)

	990 (2020) RESCUE 22 FOUNDATION INC 82-5072	90	P	age 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
-	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		x
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,	-		
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		x
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	, ·		
U	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
0	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		x
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	4 41-		
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		x
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		x
20 a	· · · · · · · · · · · · · · · · · · ·	20a		x
	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		x

Form	990 (2020) RESCUE 22 FOUNDATION INC 82-50	723	90	Р	age 4
Pa	rt 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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J	••	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a	••	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	•••	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
	to defease any tax-exempt bonds?		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	•••	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		05-		
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	•••	25a		х
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?		25h		
26	If "Yes," complete Schedule L, Part I	•••	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		26		v
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	•••	20		х
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	•••			<u></u>
20	IV instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
u	"Yes," complete Schedule L, Part IV.		28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		x
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	• •			
•	"Yes," complete Schedule L, Part IV.		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.		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		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,				
	or IV, and Part V, line 1		34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a				
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable				
	related organization? If "Yes," complete Schedule R, Part V, line 2	••	36		х
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 in Schedule O for Part VI, lines 11b and				
	19? Note: All Form 990 filers are required to complete Schedule O.		38	х	
Par					
	Check if Schedule O contains a response or note to any line in this Part V	••			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	-		
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?	<u>··</u>	1c	Х	

		2-5072390	Page 5
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		
			Yes No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	x
b	If "Yes," enter the name of the foreign country		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		x
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		
ua	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	v
h			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ch	
-	gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_	
	and services provided to the payor?		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
	required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	? 7g	х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	x
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		
	sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources		
	against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
	Is the organization licensed to issue qualified health plans in more than one state?	13a	
а	Note: See the instructions for additional information the organization must report on Schedule O.		
ь			
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		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		
	excess parachute payment(s) during the year?	15	x
	If "Yes," see instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
	If "Yes," complete Form 4720, Schedule O.		

Form	1 990 (2020) RESCUE 22 FOUNDATION INC 82-50723	90	P	2age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	a "No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruction	s.		
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
Ū	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
_	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
5		6		X
6 7-	Did the organization have members or stockholders?	0		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
	one or more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		x
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		x
14	Did the organization have a written document retention and destruction policy?	14		x
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		x
N N	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	155		~
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Tua		160		v
h	with a taxable entity during the year?	16a		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	404		
800	organization's exempt status with respect to such arrangements?	16b		х
	List the states with which a copy of this Form 990 is required to be filed Florida			
17 10	List the states with which a copy of this Form 990 is required to be filed Florida Section 6104 requires an ergonization to make its Forma 1002 (1024 or 1024 A if applicable). 000 and 000 T (Section 501(c))			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
~~	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

ANGELA CONNOR (302)272-8029, 7006 229TH ST, Bradenton, FL 34211

Form 990 (202	0) RESCUE 22 FOUNDATION INC	82-5072390	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highe Independent Contractors	st Compensated Employed	es, and
	Check if Schedule O contains a response or note to any line in this Part VII	<u></u>	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete t organization's t	his table for all persons required to be listed. Report compensation for the calendar year ending ax year.	g with or within the	

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

				(C)				
(A)	(B)			sition		(D)	(E)	(F)
Name and title	Average			nore than one rson is both ar		Reportable	Reportable	Estimated amount
	hours			irector/trustee)		compensation	compensation	of other
	per week					from the	from related	compensation
	(list any	or	Ins	Hig em Ke	Fo	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for related	direc	Instituti	ploy y em	Former			related organizations
	organizations	tor	onal	Highest compe employee Key employee				
	below	Individual trustee or director	Institutional trustee	ee				
	dotted line)		ee	Highest compensated employee Key employee				
				<u>م</u>				
(1) BRETT HURT	1.00							
BOARD MEMBER		x				0	0	0
(2) BRANDYN HURT	1.00							
BOARD MEMBER		x				0	0	0
(3) RANDY SWALLOWS	1.00							
BOARD MEMBER		x				0	0	0
(4) JOHN DEVINE	1.00							
BOARD MEMBER		x				0	0	0
(5) ERICK INNIS	5.00							
PRESIDENT			x			0	0	0
(6) ANGELA CONNOR	2.00							
VICE PRESIDENT			x			0	0	0
(7) YSELLA CARRILLO	2.00							
SECRETARY/TREASURER			x			0	0	0
<u>(8)</u>								
(0)								
(9)								
(10)								
<u>(</u> 10)								
(11)								
<u>.</u>								
(12)								
(13)	L							
<u>(14)</u>								
								Earner 000 (0000)

	990 (2020) RESCUE 22 FOUNDAT										072390	P	age 8
Part	VII Section A. Officers, Directors, Trustee	es, Key Emp	loyee	s, ar		_	est Co	omp	ensated Employe	es (continued)			
	(A) Name and title		box, offic	o not check mon ox, unless perso ficer and a dire		osition more than one erson is both an director/trustee)		in :)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	co	(F) mated am of other ompensat from the anization	ion
			Individual trustee or director	nstitutional trustee	Officer	Key employee	Hignest compensated employee	Former			-	ed organiz	
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)				2									
1b c	Subtotal	 ion A	•••			• •	•••	• •					
d 2	Total (add lines 1b and 1c)								0 ore than \$100.000		0		0
	reportable compensation from the organization											Yes	0 No
3	Did the organization list any former officer, direct employee on line 1a? <i>If</i> "Yes," <i>complete Schedul</i>						-				. 3	103	
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater th	eportable cor	mpensa	ation	and	l oth	er con	npen	sation from the		. 3		x
-	individual					•••				••••	4		x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes</i>			-			-				. 5		x
Secti 1	on B. Independent Contractors Complete this table for your five highest compensat	ted independ	dent co	ntra	ctors	s tha	t recei	ived	more than \$100.00	00 of			
	compensation from the organization. Report comp								or within the orga				
	(A) Name and business addres	S							(B) Description of servio	es	(C) Comper		
2	Total number of independent contractors (including	g but not lim	ited to	thos	se lis	ted	above	 e) wh	0				

received more than \$100,000 of compensation from the organization

Form 9	· ·	220) RESCUE 22 FOUNDA	TIO	I INC			82-50723	90 Page 9
Part	VIII	Statement of Revenue						
		Check if Schedule O contains a respons	e or n	ote to any line in thi	s Part VIII			<u> [</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns	1a					
<i>s</i>	b	Membership dues	1b					
ants	c	Fundraising events	1c					
ษัยี	d	Related organizations	1d					
ar A	е	Government grants (contributions)	1e					
s, mils	f	All other contributions, gifts, grants,						
tion sr Si		and similar amounts not included above	1f	227,055				
Sthe	g	Noncash contributions included in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f	1g	\$				
a C	h	Total. Add lines 1a-1f		<u></u> ▶	227,055			
				Business Code				
a	2a							
, ci	b							
Ser	С							
eve	d							
Program Service Revenue	е							
Ţ		All other program service revenue						
	g	Total. Add lines 2a-2f		•••••				
	3	Investment income (including dividends, inte						
		other similar amounts)						
	4	Income from investment of tax-exempt bond	•					
	5	Royalties						
		(i) Real		(ii) Personal				
		Less: rental expenses 6b						
		Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securiti	es	(ii) Other				
		sales of assets						
		other than inventory 7a						
	a	Less: cost or other basis						
nue		and sales expenses 7b						
Other Revenue	С л	Gain or (loss) 7c Net gain or (loss)	\rightarrow					
R.		Gross income from fundraising						
Othe	Jua	events (not including \$						
0		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	Ь	Less: direct expenses	8b					
		Net income or (loss) from fundraising event						
		Gross income from gaming						
		activities, See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
		Net income or (loss) from gaming activities		▶				
		Gross sales of inventory, less						
	loa	returns and allowances	10a					
	b	Less: cost of goods sold	10b					
		Net income or (loss) from sales of inventory	/	•••••				
		· · ·		Business Code				
S	11a							
nor	b							
ella ven	c							
Miscellanous Revenue	d	All other revenue						
Σ	е	Total. Add lines 11a-11d	<u></u> .	<u>.</u> . >				
_		Total revenue. See instructions			227,055	0	0	0

Sect	ion $501(c)(3)$ and $501(c)(4)$ organizations must complete all c	ů.	•		
	Check if Schedule O contains a response or note to	*		· · · · · · · · · · · · · · · · · · ·	
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>80, s</u> 1	Ob, and 10b of Part VIII. Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
-	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
Ũ	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees				
6	Compensation not included above, to disgualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	4,522		4,522	
17	Travel	•			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	61,350	61,350		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23					
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.)				
-		10 550	10 550		
a ⊾	K9 CARE	19,772	19,772	F 250	
b	ADMINISTRATIVE COSTS	7,378	70 000	7,378	
c d	TRAINING EXPENSES	78,239	78,239		
a e	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e.	171 061	160 361	11 000	0
25 26	Joint costs. Complete this line only if the	171,261	159,361	11,900	0
-•	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here b if following SOP 98-2 (ASC 958-720)				

	990 (20		82	2-50723	90 Page 11
Part		Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X		••••	
			(A)		(B)
	4	Cook non interact bearing	Beginning of year	4	End of year
	1	Cash - non-interest-bearing	36,062	1	91,856
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4			4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		-	
	~	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	_	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14			14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	36,062	16	91,856
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
liat		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow FASB ASC 958, check here			
S		and complete lines 27, 28, 32, and 33.			
ů.	27	Net assets without donor restrictions		27	
3ala	28	Net assets with donor restrictions		28	
l br		Organizations that do not follow FASB ASC 958, check here			
Fur		and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	36,062		91,856
let.	32	Total net assets or fund balances	36,062		91,856
	33	Total liabilities and net assets/fund balances	36,062	33	91,856

EEA

Form 990 (2020)

Form	1 990 (2020) RESCUE 22 FOUNDATION INC 82	2-507239	0	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	1		227,	,055
2	Total expenses (must equal Part IX, column (A), line 25)	2		171,	,261
3	Revenue less expenses. Subtract line 2 from line 1	3		55,	,794
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		36,	,062
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		91,	,856
Pa	rt 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 Carual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•••••	2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	•••••	2b		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				
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?	•••••	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
-	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		-		
	Single Audit Act and OMB Circular A-133?	••••	3a		<u> </u>
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		3b		
EEA			Form	990 (2	2020)

SCH	EDU	ILE	Α
(Form	990	or 99	0-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

7)	rusio charty clatac and rusio cupport	2020
-,	Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.	2020

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	of th	e organization					Employer identification	on number	
RES	CUE	22 FOUNDATION INC					82-507239	0	
Pa	rt I	Reason for Public Charity	y Status. (All o	rganizations must c	complete	this par	t.) See instructions	3.	
The	orga	nization is not a private foundation bec	ause it is: (For line	s 1 through 12, check onl	y one box.)			
1		A church, convention of churches, or	association of chu	urches described in sect	ion 170(b)	(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 c	or 990-EZ).	.)			
3		A hospital or a cooperative hospital s	service organization	n described in section 1	70(b)(1)(A	.)(iii).			
4		A medical research organization ope	rated in conjunctio	n with a hospital describ	ed in sect	ion 170(b)	(1)(A)(iii). Enter the		
		hospital's name, city, and state:							
5		An organization operated for the bene	efit of a college or ι	university owned or opera	ated by a g	jovernmen	tal unit described in		
		section 170(b)(1)(A)(iv). (Complete	Part II.)						
6		A federal, state, or local government	or governmental u	init described in section	170(b)(1)	(A)(v).			
7	\Box	An organization that normally receive	s a substantial part	of its support from a gov	vernmental	unit or froi	m the general public		
		described in section 170(b)(1)(A)(vi). (Complete Part I	I.)			- ·		
8		A community trust described in secti	on 170(b)(1)(A)(v	i). (Complete Part II.)					
9		An agricultural research organization	described in sect	ion 170(b)(1)(A)(ix) ope	rated in co	njunction	with a land-grant colleg	je	
		or university or a non-land-grant colle	ge of agriculture (s	see instructions). Enter the	e name, cit	ty, and stat	e of the college or		
		university:							
10	Х	An organization that normally receive	s: (1) more than 33	3 1/3% of its support from	n contributi	ons, memb	ership fees, and gross		
		receipts from activities related to its e	exempt functions - s	subject to certain excepti	ons; and (2	2) no more	than 33 1/3% of its		
		support from gross investment income	e and unrelated bu	siness taxable income (le	ess section	n 511 tax) f	rom businesses		
		acquired by the organization after Ju	ne 30, 1975. See s	section 509(a)(2). (Com	plete Part	III.)			
11		An organization organized and operation	ated exclusively to	test for public safety. Se	e section	509(a)(4).			
12		An organization organized and operation	ted exclusively for t	the benefit of, to perform	the functio	ns of, or to	carry out the purposes	6	
		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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.					2g.		
	а	Type I. A supporting organization				•		ng	
					elect a majority of the directors or trustees of the				
		supporting organization. You mu							
	b	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having							
		control or management of the sup			rsons that o	control or r	manage the supported		
	organization(s). You must complete Part IV, Sections A and C.								
	С	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) 								
	d							n(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 							
	C	e 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.							
	f	Enter the number of supported organ							
	g	Provide the following information abo						••••	
	-) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of	
		,	(.,	(described on lines 1-10	listed in you	r governing	support (see	other support (see	
				above (see instructions))	docum	ent?	instructions)	instructions)	
					Yes	No			
(
(A)									
(B)									
(C)									

(D)

(E) Total

Sche		FOUNDATION				82-50723	
Pa	rt II Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(′	1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you checked th	e box on line	5, 7, or 8 of	Part I or if the	e organizatior	n failed to qua	lify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, pl	ease comple	te Part III.)	
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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)						
	Public support. Subtract line 5 from line 4						
	ction B. Total Support	1					
	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. Add lines 7 through 10		-				
	Gross receipts from related activities, etc. (se		,			12	
13	First five years. If the Form 990 is for the or	-			-		
	organization, check this box and stop here						· · · · · ►
_	ction C. Computation of Public Support						
	Public support percentage for 2020 (line 6, c		•			14	%
	Public support percentage from 2019 Sched					15	<u>%</u>
16a	33 1/3% support test - 2020. If the organiza						
L	box and stop here. The organization qualifier 33 1/3% support test - 2019. If the organization						
K							
170	this box and stop here. The organization qu			-			
178	10%-facts-and-circumstances test - 2020.	-					
	10% or more, and if the organization meets the facts				-		
	Part VI how the organization meets the facts			-			_
L	organization						
k	10%-facts-and-circumstances test - 2019.	-					
	15 is 10% or more, and if the organization m						
	in Part VI how the organization meets the fac			-	-		_
10	organization						
10	C C						_
	instructions						••••

Sche		FOUNDATION				82-5072390	Page 3
Pa	rt III Support Schedule for Organiz	zations Desc	ribed in Sec	tion 509(a)(2)			
	(Complete only if you checked t	he box on line	e 10 of Part I	or if the orgar	nization failed	to qualify unde	er Part II.
	If the organization fails to qualify	y under the te	sts listed belo	ow, please co	mplete Part II	.)	
Sec	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")			53,269	218,918	227,055	499,242
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5			53,269	218,918	227,055	499,242
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						499,242
Sec	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6			53,269	218,918	227,055	499,242
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0		53,269	218,918	227,055	499,242
14	First 5 years. If the Form 990 is for the orga				-		_
_	organization, check this box and stop here				•••••	• • • • • • • • •	ト 🗋
	ction C. Computation of Public Suppo						
	Public support percentage for 2020 (line 8, c					15	100.00 %
	Public support percentage from 2019 Sched					16	100.00 %
	ction D. Computation of Investment In		-				
	Investment income percentage for 2020 (line					17	0.00%
18	Investment income percentage from 2019 S						0.00 %
19a	33 1/3% support tests - 2020. If the organiz						
	17 is not more than 33 1/3%, check this box						
a	33 1/3% support tests - 2019. If the organiz						
20	line 18 is not more than 33 1/3%, check this Private foundation. If the organization did r	-	-			• • •	
20	rivate iounuation. Il the organization did f	IUL UNEUK A DOX	V 011 III 12 14, 19	a, ur rau, unec	r ille nox alla		••• 🕨 🗋

	le A (Form 990 or 990-EZ) 2020 RESCUE 22 FOUNDATION INC 82-5 t IV Supporting Organizations	072390	P	age 4
uit	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, co	mplete Sec	tions	А
	and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c			
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and com		•	
ect	ion A. All Supporting Organizations		,	
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the support	ed		
	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," answ	ver		
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) a	nd		
	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		
С	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 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		
С	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 use			
	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 act	ion		
	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		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) t			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefite	d 🛛		
	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		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribut			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entit	/		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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 in 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		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	t 📃		
	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 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.)	10b		

Sched	ule A (Form 990 or 990-EZ) 2020 RESCUE 22 FOUNDATION INC 82-507239	0	F	Page 5
Pa	rt IV Supporting Organizations (continued)		1	
44	Here the experimentation eccentral 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 person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11k		
	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		-	
	detail in Part VI.	110	;	
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	-		
2	organization of the supported of any supported of an any supported of an and any support of an and and and and and and and and and			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		1.4	
	Did the experimetion manyide to each of its summarized experimetions, but the last day of the fifth month of the		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).			
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	2	_	
	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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions).
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	/		()
C 2	The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	/ (see l		tions). No
2	Activities Test. Answer lines 2a and 2b below.		res	NO
а	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? <i>If "Yes," then in Part VI identify</i>			
	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 in 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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
		(F 00		-7) 0000

1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 Add lines 1 through 3. 4 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 1 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtra	(A) Prior Year	(B) Current Year (optional)
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) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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 gr	(A) Prior Year	
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) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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 v	(A) Prior Year	
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) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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	(A) Prior Year	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 7 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a b Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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 8 Minimum Asse	(A) Prior Year	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 7 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a b Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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 8 Minimum Asse	(A) Prior Year	
of gross income or for management, conservation, or maintenance of 6 property held for production of income (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 8 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a b Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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 8 Minimum Asset Amount (add line 7 to line 6) 8 <td>(A) Prior Year</td> <td></td>	(A) Prior Year	
property held for production of income (see instructions)67Other expenses (see instructions)78Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)8Section B - Minimum Asset Amount1Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):aAverage monthly value of securities1abAverage monthly cash balances1bcFair market value of other non-exempt-use assets1cdTotal (add lines 1a, 1b, and 1c)1deDiscount claimed for blockage or other factors (explain in detail in Part VI):12Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.678Minimum Asset Amount (add line 7 to line 6)8	(A) Prior Year	
7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a b Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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	(A) Prior Year	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 1 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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	(A) Prior Year	
Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 1 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 Minimum Asset Amount (add line 7 to line 6) 8	(A) Prior Year	
instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 1d 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		
a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 1d 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		
bAverage monthly cash balances1bcFair market value of other non-exempt-use assets1cdTotal (add lines 1a, 1b, and 1c)1deDiscount claimed for blockage or other factors (explain in detail in Part VI):1d2Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 1d 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		
cFair market value of other non-exempt-use assets1cdTotal (add lines 1a, 1b, and 1c)1deDiscount claimed for blockage or other factors (explain in detail in Part VI):1d2Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
dTotal (add lines 1a, 1b, and 1c)1deDiscount claimed for blockage or other factors (explain in detail in Part VI):12Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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		
(explain in detail in Part VI):2Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
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		
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		
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		
see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
5Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
6Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
7Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8		
8 Minimum Asset Amount (add line 7 to line 6) 8		
		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).		

RESCUE 22 FOUNDATION INC

EEA

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

82-5072390

Page 6

	ILE A (Form 990 or 990-EZ) 2020 RESCUE 22 FOUNDATION INC		82-507	2390 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organia	zations (continued)	1
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exem	not purposes	1	
2	Amounts paid to perform activity that directly furthers exempt	• • •		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizati		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required) - pr	rovide 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 respons	sive	
	(provide details in Part VI). See instructions.	-	8	
9	Distributable amount for 2020 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)
Sec	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions	Distributable
		Excess Distributions	Pre-2020	Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
С	From 2017			
d	From 2018			
	From 2019			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2020 distributable amount			
_ <u>i</u>	Carryover from 2015 not applied (see instructions)			
_j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2020 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result			
6	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
7	and 4c.			
0	Breakdown of line 7:			
	Evenes from 2010			
	Evenes from 2017			
	Evenes from 2018			
	Evenes from 2010			
	Evenes from 2020			
	Excess from 2020		Cab	odulo A (Eorm 990 or 990 E7) 2020
EEA			Sche	edule A (Form 990 or 990-EZ) 2020

Schedule A (Fo	m 990 or 990-EZ) 2020 Page 8
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 O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047
2020
Open to Public

Employer identification number

RESCUE 22 FOUNDATION INC

82-5072390

01. Governing body decisions (Part VI, line 7b)

THE BOARD MEMBERS MEET ON A QUARTERLY BASIS TO DISCUSS DECISIONS THAT ARE REQUIRED FOR THE

OPERATION OF THE ORGANIZATION.

02. Form 990 governing body review (Part VI, line 11)

THE BOARD MEMBERS MEET AT LEAST ONCE ANNUALLY TO REVIEW THE FORM 990 AND SUPPORTING

FINANCIAL STATEMENTS.

03. Governing documents, etc, available to public (Part VI, line 19)

GOVERNING DOCUMENTS SUCH AS FORM 990 AND SUPPORTING FINANCIAL DOCUMENTS ARE MADE AVAILABLE

TO THE PUBLIC UPON THEIR REQUEST.

Form	8868	
(Rev. Jar	uary 2020)	

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (*e-file*). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instructions.	Taxpayer identification number (TIN)			
print	RESCUE 22 FOUNDATION INC	82-5072390			
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.				
due date for	7006 229тн ST				
filing your return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
instructions.	Bradenton FL 34211				

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application		Application	Return
Is For	Code	Is For	Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of > ANGELA CONNOR, 7006 229TH ST Bradenton FL 34211

Tele	ephone No.► 302-272-8029 FAX No. ►		
 If th 	e organization does not have an office or place of business in the United States, check this box		ト
 If th 	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is	
for the	whole group, check this box	า	
a list w	ith the names and TINs of all members the extension is for.		
t I	I request an automatic 6-month extension of time until11-15, 20, to file the exempt organization refute organization named above. The extension is for the organization's return for: ▶ I calendar year 20 20 or ▶ I tax year beginning, 20, and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period	tum fo	
3a	f this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less		
á	any nonrefundable credits. See instructions.	3a	\$
bl	f this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
6	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
C I	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by		
	using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$
Cautio	on: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Fo	orm 88	379-EO for payment
instruct	tions.		
For Pr	ivacy Act and Paperwork Reduction Act Notice, see instructions.	For	m 8868 (Rev. 1-2020)

EEA