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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning $OC'I' = 1$, 2022 and endir	ng Si	±P 30, 202.	3				
B c	heck if pplicable	C Name of organization		D Employer identi	fication number				
	Addres	ACCOKEEK FOUNDATION, INC.							
	Name change	Doing business as		52-6037288					
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 3400 BRYAN POINT ROAD	n/suite	E Telephone numb					
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,456,250.				
	Ameno			H(a) Is this a group					
	Application			for subordinate					
	pendin	SAME AS C ABOVE		H(b) Are all subordinates					
ΙŢ	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	` '	a list. See instructions				
	Vebsit			H(c) Group exempt					
K F	orm of	organization: X Corporation Trust Association Other L	L Year o	f formation: 1957	M State of legal domicile; MD				
	art I	Summary							
4	1	Briefly describe the organization's mission or most significant activities: ${ m { t TO} \ \ CULT}$	'IVA'I	TE PASSION	FOR THE				
Governance	;	NATURAL AND CULTURAL HERITAGE OF PISCATAWAY	PAR	K.					
rna	2	Check this box if the organization discontinued its operations or disposed of	f more t	han 25% of its net a	ssets.				
ove	3	Number of voting members of the governing body (Part VI, line 1a)							
	4	Number of independent voting members of the governing body (Part VI, line 1b)							
es &	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5					
Ϋ́È		Total number of volunteers (estimate if necessary)							
Activities		Total unrelated business revenue from Part VIII, column (C), line 12							
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		=				
				Prior Year	Current Year				
Revenue	l .	Contributions and grants (Part VIII, line 1h)		1,050,562					
	l	Program service revenue (Part VIII, line 2g)		63,649					
Rev		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		142,547					
_	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,801					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,259,559					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0					
		Benefits paid to or for members (Part IX, column (A), line 4)							
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,035,748 0					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		U	• 0 •				
х	_b	Total fundraising expenses (Part IX, column (D), line 25) 128,992.		500,745	543,591.				
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,536,493					
	l .	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		-276,934					
_ v		nevertue less expenses. Subtract line To Itoff line T2	Ben	inning of Current Year	<u> </u>				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	209	2,932,817					
Asse Bal	21	Total liabilities (Part X, line 26)		158,531					
Net,	22	Net assets or fund balances. Subtract line 21 from line 20	•	2,774,286					
	art II	Signature Block	•						
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedules and s	statemer	nts, and to the best of r	ny knowledge and belief, it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pr							
Sigi	n	Signature of officer	7)	Date 6/6	5/2024				
Her		ANJELA BARNES, EXECUTIVE DIRECTOR	$\sqrt{2}$	0/3	0/2024				
		Type or print name and title							
		Print/Type preparer's name Preparer's signature	Da	ate Check	PTIN				
Paid	ı	JILL M. BOYLE, CPA JILL M. BOYLE, CPA	. 0	5/28/24 if self-emp					
Prep	arer	Firm's name SIKICH LLC		Firm's EIN	36-3168081				
Use Only Firm's address 333 JOHN CARLYLE STREET, SUITE 500									
		ALEXANDRIA, VA 22314		Phone no. (<u>703) 836-1350 </u>				
Мау	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No				

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including grants of \$

1,419,611.

Total program service expenses

Other program services (Describe on Schedule O.)

Form 990 (2022) ACCOKEEK FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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 Rev. Proc. 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	<u> </u>		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7		-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		37	
	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 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		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	- 1.2		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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			
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
		1 IE		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? 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? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	·	19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	• •	20a		- ^ `
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا ہے ا		_V
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Form 990 (2022) ACCOKEEK FOUNDATION, 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		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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		_ <u>X</u> _
	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		
	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			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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	051		Х
00	Schedule L, Part I	25b		
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%	26		Х
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 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		X
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		_X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? 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		_ <u>X</u> _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_ <u>X</u> _
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		_v	
Par	Note: All Form 990 filers are required to complete Schedule O	38	X	
ı aı	Check if Schedule O contains a response or note to any line in this Part V			
	Oneon it Solieuule O contains a response of flote to any line in this Fart V		v	NI-
1.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 1b	_		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c		
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Form 990 (2022) ACCOKEEK FOUNDATION, INC.

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

				Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 31							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х					
За	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 a	uthority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	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 Ad	ccounts (FBAR).							
			<u>5a</u>		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.		5b		X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	•		<u>6a</u>		X				
D	If "Yes," did the organization include with every solicitation an express statement that such contributions and the distribution of the state of the		Ch.						
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		6b						
7		vices provided to the payor?	70		Х				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a 7b						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	ne roquirod	7.5						
·	to file Form 8282?		7c		x				
ч	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e		х				
f									
g									
•									
8									
	sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.								
а	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?		9b						
10	Section 501(c)(7) organizations. Enter:	1 1							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4						
11	Section 501(c)(12) organizations. Enter:	I I							
	Gross income from members or shareholders	11a	4						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l I	12a						
	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. Is the organization licensed to issue qualified health plans in more than one state?		120						
а	Note: See the instructions for additional information the organization must report on Schedule O.		13a						
h	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans	13b							
c	Enter the amount of reserves on hand	13c	1						
			14a		х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner								
	excess parachute payment(s) during the year?		15		х				
	If "Yes," see the 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		Х				
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								

232005 12-13-22

Form **990** (2022)

ACCOKEEK FOUNDATION, INC. 52-6037288 Form 990 (2022) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 13 **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. 13 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х 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? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 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 Х taxable entity during the year? 16a 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MD 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. Another's website X Upon request __ Other (explain on Schedule O) Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

Form **990** (2022)

20607

MD

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

statements available to the public during the tax year.

THE ORGANIZATION - 301-283-2113 3400 BRYAN POINT ROAD, ACCOKEEK,

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box	not c	Posi heck i ss per	ition	l than s boti	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) LAURA FORD	40.00			7.7				00.463	0	10 720
PRESIDENT/CEO/STRATEGIC ADVISOR	40.00			Х				90,463.	0.	10,730.
(2) ANJELA BARNES VICE PRESIDENT/COO/INTERIM ED/EXECUT	40.00	1		х				82,670.	0.	4,483.
(3) VIRGINIA BUSBY	10.00			Δ				02,070.	0.	4,403.
TRUSTEE, CHAIR	10.00	Х		х				0.	0.	0.
(4) JOSEPH HARLEY	3.00	77						0.	0.	<u>_ </u>
TRUSTEE, VICE CHAIR	3.00	х		х				0.	0.	0.
(5) RANDI KORN	10.00							•	•	
TRUSTEE SECRETARY		Х		х				0.	0.	0.
(6) REGINA FADEN	10.00									
TRUSTEE, TREASURER		Х		х				0.	0.	0.
(7) MATTHEW HALLETT	3.00									
TRUSTEE, ASST TREASURER		Х						0.	0.	0.
(8) ANDREW FELLOWS	10.00									
TRUSTEE		Х						0.	0.	0.
(9) DAVID PROCTOR	5.00									
TRUSTEE		Х						0.	0.	0.
(10) RICO NEWMAN	5.00									
TRUSTEE		Х						0.	0.	0.
(11) DAVID SLOAN (END 9/30/23)	3.00								_	_
TRUSTEE		Х						0.	0.	0.
(12) BONNETTA ADEEB	3.00	l								
TRUSTEE	2 22	Х						0.	0.	0.
(13) THOMASINA COATES	3.00									•
TRUSTEE	2 00	Х						0.	0.	0.
(14) JUDY GELI ROBINSON	3.00	3,7							_	0
TRUSTEE (15) GUGAN PROGRESS	2 00	Х						0.	0.	0.
(15) SUSAN PROCTOR TRUSTEE	3.00	Х						0.	0.	0.
(16) STEVEN TUCKER (END 6/27/23)	3.00	Δ						0.	0.	<u> </u>
TRUSTEE, VICE CHAIR	3.00	Х		х				0.	0.	0.
(17) ALESSANDRO RUSSO (END 12/31/22)	3.00	21		22				1		<u>_ </u>
TRUSTEE	3.00	х						0.	0.	0.
232007 12 13 22	ı		_				-		<u> </u>	Form 990 (2022)

232007 12-13-22

Form **990** (2022)

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

Form 990 (2022)

Form 990 (2022) ACCOKEE
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
							Tunction revenue	business revenue	sections 512 - 514
ပ္ ပ	1	a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
<u>क</u> ही			Fundraising events	1c					
ifts ır A			Related organizations	1d					
nik G			Government grants (contributions)	1e	946,804.				
Sis			All other contributions, gifts, grants, and						
outi ther			similar amounts not included above	1f	92,988.				
텵			Noncash contributions included in lines 1a-1f	1g \$					
Col		h	Total. Add lines 1a-1f			1,039,792.			
					Business Code				
ø.	2	а	CONTRACTS		611600	55,144.	55,144.		
Š		b	FARM AND MUSEUM SALES		110000	20,842.	20,842.		
Program Service Revenue		С	FACILITIES USE		532000	17,850.	17,850.		
am		d	ADMISSIONS/WORKSHOPS		611600	10,602.	10,602.		
ogr B		е							
P		f	All other program service revenue						
		g	Total. Add lines 2a-2f			104,438.			
	3		Investment income (including divide	nds, intere	st, and				
			other similar amounts)			37,157.			37,157.
	4		Income from investment of tax-exem						
	5		Royalties						
			(1) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) S	ecurities	(ii) Other				
			assets other than inventory 7a 1,	233,827.					
		b	Less: cost or other basis						
ıne				345,089.					
her Revenue			G.G G. (1000)	111,262.					
8			Net gain or (loss)			-111,262.			-111,262.
her	8	а	Gross income from fundraising events (r	not					
ᅙ			including \$	-					
			contributions reported on line 1c). S						
			Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraising						
	9	а	Gross income from gaming activities						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming ac						
	10	а	Gross sales of inventory, less returns						
			and allowances						
			Less: cost of goods sold						
\rightarrow		С	Net income or (loss) from sales of in	ventory	Business Code				
sn	44	_	OTHER REVENUE		900099	41,036.			41,036.
eo Teo	11				,,,,,,	=1,030.			=1,030.
Miscellaneous Revenue		b							
Sce		ч С	All other revenue						
Ξ			Total. Add lines 11a-11d			41,036.			
	12		Total revenue. See instructions			1,111,161.	104,438.	0.	-33,069.

Pai	Part IX Statement of Functional Expenses									
Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).						
	Check if Schedule O contains a respon	7.5								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
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,	000 000	115 050	F.4. 600	25 512					
	trustees, and key employees	207,077.	115,850.	54,609.	36,618.					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	000 131	002 005	20 522	F4 002					
7	Other salaries and wages	908,131.	823,805.	29,523.	54,803.					
8	Pension plan accruals and contributions (include	11 000	0 405	000	011					
	section 401(k) and 403(b) employer contributions)	11,226.	9,487.	828.	911.					
9	Other employee benefits	39,320.	35,985.	1,068.	2,267.					
10	Payroll taxes	93,347.	78,883.	6,889.	7,575.					
11	Fees for services (nonemployees):									
a	Management	1 771		1 771						
b	Legal	1,771.		1,771.						
	Accounting	94,550.		94,550.						
	, , , , , , , , , , , , , , , , , , , ,									
	Professional fundraising services. See Part IV, line 17	7,325.		7,325.						
f	Investment management fees	1,343.		1,323.						
g	` -	60,791.	60,670.		121.					
40	column (A), amount, list line 11g expenses on Sch 0.)	39,581.	00,070.	36,607.	2,974.					
12	Advertising and promotion	11,809.	3,750.	1,889.	6,170.					
13 14	Office expenses	42,726.	35,474.	3,846.	3,406.					
15	Information technology Royalties	42,720.	33, 111	3,040.	3,400.					
16	Occupancy									
17										
18	Payments of travel or entertainment expenses									
.0	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	25,619.	25,436.	93.	90.					
20	Interest	-,	-,							
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	53,615.	44,515.	4,825.	4,275.					
23	Insurance	74,933.	62,215.	6,744.	5,974.					
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.)									
а	SUPPLIES AND EQUIPMENT	55,630.	54,641.	160.	829.					
b	BUILDING MAINTENANCE	37,883.	37,883.	-						
c	FEES AND DUES	37,358.	31,017.	3,362.	2,979.					
d					<u> </u>					
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	1,802,692.	1,419,611.	254,089.	128,992.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									

Form **990** (2022)

Check here

if following SOP 98-2 (ASC 958-720)

<u>Part</u>	ŧΧ	Balance Sheet					
		Check if Schedule O contains a response or note to	any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	80,548.	1	119,610		
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net	9,413.	3	87,994		
	4	Accounts receivable, net	35,450.	4	8,649		
	5	Loans and other receivables from any current or form					
		trustee, key employee, creator or founder, substantia					
		controlled entity or family member of any of these pe		5			
	6	Loans and other receivables from other disqualified p	person	s (as defined			
		under section 4958(f)(1)), and persons described in s	section	4958(c)(3)(B)		6	
ပ္	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			12,833.	8	16,005
¥	9	B			14,287.	9	31,361
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D10)a	1,805,395.			
	b	Less: accumulated depreciation 10)b	1,197,826.	657,549.	10c	607,569
	11	Investments - publicly traded securities		2,122,737.	11	1,580,680	
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal lines			2,932,817.	16	2,451,868
	17	Accounts payable and accrued expenses		158,483.	17	99,741	
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
:	21	Escrow or custodial account liability. Complete Part	IV of S	chedule D		21	
တ္က 🗆	22	Loans and other payables to any current or former of	fficer, o	director,			
≝		trustee, key employee, creator or founder, substantia	al contr	ributor, or 35%			
Liabilities		controlled entity or family member of any of these pe	ersons			22	
- :	23	Secured mortgages and notes payable to unrelated to	third pa	arties		23	
:	24	Unsecured notes and loans payable to unrelated thir	rd parti	es		24	
:	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-2	24). Co	mplete Part X	4.0		•
		of Schedule D			48.		0 741
-	26	Total liabilities. Add lines 17 through 25			158,531.	26	99,741
ړ		Organizations that follow FASB ASC 958, check h	iere	X			
<u>ا</u> ۋ		and complete lines 27, 28, 32, and 33.			1 700 400		1 202 427
<u>a</u> a.	27	Net assets without donor restrictions			1,788,489.	27	1,382,427
ž ž	28	Net assets with donor restrictions			985,797.	28	969,700
<u> </u>		Organizations that do not follow FASB ASC 958, or	check I	here L			
누		and complete lines 29 through 33.					
) ts	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or equipn				30	
ا ب	31	Retained earnings, endowment, accumulated income			2 774 206	31	2 25 2 1 2 7
	32	Total net assets or fund balances			2,774,286.	32	2,352,127
:	33	Total liabilities and net assets/fund balances			2,932,817.	33	2,451,868 Form 990 (202

Pa	rt XI Reconciliation of Net Assets			•			
	Check if Schedule O contains a response or note to any line in this Part XI						
1 2 3	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1	1 2 3	1,11 1,80 -69	2,6	92.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,77				
5	Net unrealized gains (losses) on investments	5		9,3'			
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	2,35	2,1	27.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.		Yes	No		
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
h	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? 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: X 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 review, or compilation of its financial statements and selection of an independent accountant?	•	. 2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits	ed audit	. 3b	х			
	, , , , , , , , , , , , , , , , , , , ,		Form	990	(2022)		

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022 Open to Public

Inspection
Employer identification number

				ATION, INC.				5	2-6037288	
Pa	art I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.			
The	organ	ization is not a private found	lation because it is: (I	For lines 1 through 12, cl	heck only	one box.)				
1		A church, convention of ch	urches, or associatio	on of churches described	in sectio	n 170(b)(1)(A)(i).			
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	า 990).)					
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).			
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental unit	describe	ed in	
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X		-					general r	oublic described in	
		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.)								
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)					
9	同	An agricultural research org				ed in coniu	unction with a lan	d-grant	college	
_		or university or a non-land-g								
		university:	y			··-··-, -·- ,	,	9-		
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns. membership f	ees. and	d aross receipts from	
		activities related to its exem	•				•		-	
		income and unrelated busin								
		See section 509(a)(2). (Con		(,,,,					,	
11		An organization organized a	•	ively to test for public sat	fetv. See	section 50	09(a)(4).			
12	同	An organization organized a	=	•	•			out the	purposes of one or	
-		more publicly supported or	•	•	•				• •	
		lines 12a through 12d that								
а		Type I. A supporting orga	• •			-		-	aivina	
·		the supported organization	· · · · · · · · · · · · · · · · · · ·	·	•	-				
		organization. You must o			majority c	n the direc	tors or tradeces t	51 1110 50	ipporting	
b		Type II. A supporting org	-		ion with it	s sunnorte	ed organization(s)) by hav	vina	
~		control or management o								
		organization(s). You mus			arric perso	110 11101 00	The of or manage	ine supp	Jortou	
c		☐ Type III functionally inte			in connect	tion with a	and functionally i	ntegrate	d with	
	, L	its supported organization					•	mograte	or with it,	
c		Type III non-functionally		•				l organiz	zation(s)	
	• —	that is not functionally int					* *	-		
		requirement (see instructi	-		•		•	atteritiv	7011033	
e		Check this box if the orga						Type III		
	, L	functionally integrated, or					Type i, Type ii, i	уре ш		
	Ente	er the number of supported o								
		vide the following information	•	ad organization(s)						
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of mo	onetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instr	uctions)	support (see instructions)	
				above (see instructions))						
_										
							1			
Tota	al									
	- I								1	

Schedule A (Form 990) 2022 ACCOKEEK FOUNDATION, INC. 52-6037288 Page 2

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

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

Sec	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	1000402.	1048729.	1182564.	1050562.	1039792.	5322049.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
_	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	1000402.	1048729.	1182564.	1050562.	1039792.	5322049.			
	The portion of total contributions									
Ŭ	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,									
							13,901.			
6	Column (f) Public support. Subtract line 5 from line 4.						5308148.			
	etion B. Total Support						3300140.			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
	Amounts from line 4	1000402.	1048729.	1182564.	1050562.	1039792.	5322049.			
	Gross income from interest,	10001011	10107230	11023011	10303021	10007020	33220131			
Ü	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	38,476.	38,470.	34,330.	35,053.	37 157.	183,486.			
0	Net income from unrelated business	30,4701	30,470.	34,330.	33,033.	31,131	103,400.			
9	activities, whether or not the									
40	business is regularly carried on									
IU	Other income. Do not include gain									
	or loss from the sale of capital	3,861.	405.	1,335.	2,801.	41,036.	49,438.			
44	assets (Explain in Part VI.)	3,001.	±03•	Ι, 333.	2,001.	ŦI,030•	5554973.			
	Gross receipts from related activities,	ata (aaa inatuustia	.no)			12	291,526.			
		•	,	iourth or fifth town			291,320.			
ıs	First 5 years. If the Form 990 is for the									
Sec	organization, check this box and stop ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •						
	Public support percentage for 2022 (li			volumn (f))		14	95.56 %			
	Public support percentage from 2021					15	96.41 %			
	33 1/3% support test - 2022. If the co									
IUa	stop here. The organization qualifies						77			
h	33 1/3% support test - 2021. If the co		-		lino 15 is 33 1/30/					
D	and stop here. The organization quali									
170	10% -facts-and-circumstances test									
11 a		•					•			
	and if the organization meets the facts			-		_				
L	meets the facts-and-circumstances te	_		• • •	-	70 and line 15 is 1				
a	10% -facts-and-circumstances test	_					1U70 UI			
	more, and if the organization meets the				· ·					
10	organization meets the facts-and-circu				•		H			
ıŏ	Private foundation. If the organization	n did not check a l	oox on line 13, 168	ı, 100, 17a, 0r 17b	, check this box ar		(Form 990) 2022			

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	T	T	T	T	T	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	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 on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				-		
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	04(-)(0) - : ::	
14	First 5 years. If the Form 990 is for the	•		•	•	. , . , .	· —
Se	check this box and stop here ction C. Computation of Publi					<u></u>	
	Public support percentage for 2022 (I			column (fl)		15	%
	Public support percentage from 2021	, , , , , , , , , , , , , , , , , , , ,	,			16	<u>%</u>
	ction D. Computation of Inves					<u>, 10 j</u>	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3c		
4a		
44		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
- Ou		
9b		
9c		
40-		
10a		
10b		
100		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	-	elow, the governing body of a supported organization?	11a		
b		illy member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail	in Part VI.	11c		
Sect	ion E	3. Type I Supporting Organizations			
				Yes	No
1		ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	ne organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	now providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supen	vised, or controlled the supporting organization.	2		
Sect	ion C	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 trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
C1	the su	pported organization(s).	1		
Seci	ion L	D. All Type III Supporting Organizations			1
				Yes	No
		ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	-	ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
	-	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
_	,	rganization maintained a close and continuous working relationship with the supported organization(s).	2		
	•	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	•	icant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	2		
Sect	<i>suppo</i>	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
1					
' a		k 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. <i>Complete</i> line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
c		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	etruction	ic)	
2		ties Test. Answer lines 2a and 2b below.	struction	Yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		e supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined			
		hese activities constituted substantially all of its activities.	2a		
b		ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.			
а	Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	truste	es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each			

232025 12-09-22

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

1

2

3

<u>4</u> 5

6

Schedule	Δ	(Form	990)	2022

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

2 Enter 0.85 of line 1.

5

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions)

1 Adjusted net income for prior year (from Section A, line 8, column A)

3 Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990) 2022

e Excess from 2022

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;

Part VI

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

ACCOKEEK FOUNDATION, INC.

Employer identification number 52-6037288

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts			
4	Total number at and of year	(a) Donor advised funds	(b) Funds and other accounts			
1 2	Total number at end of year					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	ised funds			
Ū	are the organization's property, subject to the organization's	-				
6	Did the organization inform all grantees, donors, and donor a					
_	for charitable purposes and not for the benefit of the donor of					
Par						
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).				
	Preservation of land for public use (for example, recrea	ation or education) Preservation	of a historically important land area			
	Protection of natural habitat	Preservation of	of a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
	Total number of conservation easements		2a			
			I I			
	Number of conservation easements on a certified historic str		2c			
d	Number of conservation easements included in (c) acquired a	•				
_	historic structure listed in the National Register					
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	ie organization during the tax			
	year					
4	Number of states where property subject to conservation eas		-			
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in					
6	Staff and volunteer hours devoted to monitoring, inspecting,					
Ū	ctan and relations made develop to memoring, inspecting,	Thankshing or violations, and officially con	icorvation outcomente during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year			
	3, 1, 3,	, ,	3 ,			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	O(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservati					
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that describes the			
	organization's accounting for conservation easements.					
Par	t III Organizations Maintaining Collections of		other Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in	furtherance of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	If the organization elected, as permitted under FASB ASC 95	•				
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,					
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
			· · · · · · · · · · · · · · · · · · ·			
2	If the organization received or held works of art, historical tre		al gain, provide			
	the following amounts required to be reported under FASB A	·	•			
	Revenue included on Form 990, Part VIII, line 1					
	Assets included in Form 990, Part X					
LHA	For Paperwork Reduction Act Notice, see the Instructions	5 IUI FUIIII 99U.	Schedule D (Form 990) 2022			

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		958,436.	682,303.	276,133.
c Leasehold improvements		405,439.	184,888.	220,551.
d Equipment		375,492.	330,635.	44,857.
e Other		66,028.		66,028.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				

Schedule D (Form 990) 2022

	UNDATION, INC	. 52	-6037288 Page
Part VII Investments - Other Securities.			V
Complete if the organization answered "Yes" o			d - f
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
) Financial derivatives			
2) Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	1 (1) 5
(a) L	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	15 \		
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			1

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

(8) (9)

Part XI Reconciliation of Revenue per Audited Financial State	ements With I	Revenue per Re	turn.			
Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	-				
A T. I.			1	1,374,208.		
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
a Net unrealized gains (losses) on investments	2a	269,372.				
b Donated services and use of facilities		1,000.				
c Recoveries of prior year grants						
d Other (Describe in Part XIII.)						
e Add lines 2a through 2d			2e	270,372.		
3 Subtract line 2e from line 1			3	1,103,836.		
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		7,325.				
b Other (Describe in Part XIII.)	4b					
c Add lines 4a and 4b			4c	7,325.		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	1,111,161.		
Part XII Reconciliation of Expenses per Audited Financial Sta		Expenses per i	Returi	1.		
Complete if the organization answered "Yes" on Form 990, Part IV, line				1 706 267		
1 Total expenses and losses per audited financial statements			1	1,796,367.		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	اما	1 000				
a Donated services and use of facilities		1,000.	-			
b Prior year adjustments			-			
c Other losses	1 1		-			
d Other (Describe in Part XIII.)			2e	1,000.		
e Add lines 2a through 2d 3 Subtract line 2e from line 1			3	1,795,367.		
3 Subtract line 2e from line 14 Amounts included on Form 990, Part IX, line 25, but not on line 1:			3			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,325.				
b Other (Describe in Part XIII.)		7,0201				
c Add lines 4a and 4b			4c	7,325.		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18			5	1,802,692.		
Part XIII Supplemental Information.						
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b	and 2b; Part V, line 4	; Part)	X, line 2; Part XI,		
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional inform	nation.				
_						
PART III, LINE 4:						
THE ACCOKEEK FOUNDATION MAINTAINS AN 18TH	CENTURY E	IERITAGE FA	RM I	EXHIBIT		
THE URING A HIGHERTS HORICES DARW HARMON		GOT T EGET ON				
INCLUDING A HISTORIC TOBACCO BARN, FARMHOU	ISE, RARE	COLLECTION	I OF.	HERITAGE		
DDEEDG OF LIVEGMOOK HELDLOOM AND NAMINE D	דרו אות או או	TEMPE AND	\ 7\ T			
BREEDS OF LIVESTOCK, HEIRLOOM AND NATIVE P	LANT VARI	ETIES, AND) A 1	RESEARCH		
I TODADY FOR MUE DIDDOCEC OF DIDITO FOICAMI	ON CCTEN	MTDTC DDC6	יאםמי	ם אאט שמה		
LIBRARY FOR THE PURPOSES OF PUBLIC EDUCATI	ON, SCIEN	ILLIC KESE	ARCI	a, AND IRE		
PRESERVATION FOR FUTURE GENERATIONS.						
FRESERVATION FOR FOTORE GENERALIONS.						
PART V, LINE 4:						
THE FOUNDATION HAS ADOPTED INVESTMENT AND	SPENDING	POLICIES.	APPI	ROVED BY		
	<u> </u>					
THE BOARD OF TRUSTEES, FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A						
,,			• •			
PREDICTABLE STREAM OF FUNDING TO PROGRAMS	SUPPORTED	BY ITS EN	IDOWI	MENT FUNDS		
WHILE ALSO MAINTAINING THE PURCHASING POWER OF THOSE ENDOWMENT ASSETS.						

Schedule D (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

ACCOKEEK FOUNDATION, INC.

Employer identification number 52-6037288

FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 WAS PROVIDED TO BOARD OF TRUSTEES IN ADVANCE OF A REGULARLY SCHEDULED MEETING . THE BOARD WAS PROVIDED WITH THE OPPORTUNITY TO ASK QUESTIONS AND REVIEW THE FORM AND TO PROVIDE CORRECTIONS AS APPROPRIATE. FORM 990, PART VI, SECTION B, LINE 12C: THE ACCOKEEK FOUNDATION ANNUALLY DISCUSSES THE CONFLICT OF INTEREST POLICY AND ALL BOARD MEMBERS AND EMPLOYEES COMPLETE AN AFFIRMATION OF COMPLIANCE AND DISCLOSURE FORM. FORM 990, PART VI, SECTION B, LINE 15A: THE ACCOKEEK FOUNDATION USES COMPARABILITY DATA FOR DETERMINING SALARIES, AND THE INDEPENDENT MEMBERS OF THE BOARD OF TRUSTEES GO INTO EXECUTIVE SESSION TO DISCUSS THE PERFORMANCE OF UPPER LEVEL EMPLOYEES, AND TO SET SALARY LEVELS. FORM 990, PART VI, SECTION C, LINE 18: FORM 990 IS AVAILABLE ON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ACCOKEEK FOUNDATION PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT INTEREST POLICY, AND FINANCIAL STATEMENTS TO ANY MEMBER OF THE PUBLIC UPON AND PROVIDE FINANCIAL INFORMATION ON ITS WEBSITE.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S PROCESSES FOR SELECTING AN INDEPENDENT ACCOUNT AND

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

Schedule O (Form 990) 2022

232211 10-28-22

chedule O (Form 990) 2022	Page 2
lame of the organization ACCOKEEK FOUNDATION, INC.	Employer identification number 52-6037288
FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS HAV	E NOT CHANGED
DURING THE TAX YEAR.	