Form **990** 

Department of the Treasury

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.

Open to Public Inspection

OMB No. 1545-0047

Inter	nal Revenue	Service	Go to www.irs.gov/Form990 for instructions and the lates	st informatio	on.		mopection						
Α	For the 2	2022 calend	dar year, or tax year beginning , 2022, and e	nding		,	20						
B	Check if app	plicable:	C		D Employ	/er identi	fication number						
	Addres	s change	Kellermann Foundation		34-	2018	044						
	Name	change	PO Box 832809		E Teleph	one numb	ber						
	Initial r	return	Richardson, TX 75083		972	-685	-0279						
	Final ret	urn/terminated											
		led return			G Gross	eceipts	\$ 1,161,180.						
		ation pending	F Name and address of principal officer: Laura Corley	H(a) Is th	is a group retu								
		ation penaing	Same As C Above	H(b) Are ;	all subordinates	s included							
1	Tay-even	npt status:	X 501(c)(3)         501(c)         (insert no.)         4947(a)(1) or         52		lo," attach a lisi	. See ins	tructions.						
J	Websit	· · · · · · · · · · · · · · · · · · ·	llermannfoundation.org		up exemption n	umber							
K		organization:			· · · · · · · · · · · · · · · · · · ·		gal domicile: CA						
	and a state of the	Summar			04 111.								
Гd			y be the organization's mission or most significant activities:To prov	ride res	OUTCAS	for 1	health						
Activities & Governance	Ba	education, spiritual outreach, and ecomonic empowerment for the benefit of the Batwa pygmies and adjacent communities in southwest Uganda.											
nar					<u> </u>								
ver	2 Ch	eck this bo	x if the organization discontinued its operations or disposed of	of more than	25% of its	net as	sets.						
3	3 Nui	mber of vo	ting members of the governing body (Part VI, line 1a)			3	11						
00 (2)			dependent voting members of the governing body (Part VI, line 1b)			4	11						
itie			of individuals employed in calendar year 2022 (Part V, line 2a)			5	3						
XIV			of volunteers (estimate if necessary).			6	64						
Ac			d business revenue from Part VIII, column (C), line 12			7a 7b	0.						
	b Net	t unrelated	business taxable income from Form 990-T, Part I, line 11		Prior Year	10	Current Year						
	8 Coi	ntributions	and grants (Part VIII, line 1h)		1,170,3	227	1,158,966.						
qe			ice revenue (Part VIII, line 2g)			225.	1,309.						
lua/			come (Part VIII, column (A), lines 3, 4, and 7d)			285.	905.						
Revenue			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2								
			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,170,8	337.	1,161,180.						
			milar amounts paid (Part IX, column (A), lines 1-3)		948,0		963,041.						
	1		to or for members (Part IX, column (A), line 4)										
			er compensation, employee benefits (Part IX, column (A), lines 5-10)		162,8	375.	141,805.						
ses			fundraising fees (Part IX, column (A), line 11e)										
Expenses			sing expenses (Part IX, column (D), line 25) 59,49			. Section	and the second						
Ē			es (Part IX, column (A), lines 11a-11d, 11f-24e)		79,5	:20	82,287.						
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,190,4		1,187,133.						
	1		expenses. Subtract line 18 from line 12		-19,6		-25,953.						
. 0		venue less	expenses. Subtract line 18 from line 12	and a state of the	ning of Currer		End of Year						
ta ol	20 Tot	al accote (	Part X, line 16)		596,8		564,786.						
Bala	20 101 21 Tot		s (Part X, line 26)		12,7		6,653.						
Net Assets or Fund Balances	21 100		fund balances. Subtract line 21 from line 20.		584,0		558,133.						
					504,0	100.1							
		Signatur		and to the hest o	f my knowledg	and heli	ief it is true correct and						
Unde	er penalties o plete. Declar	of perjury, I de ation of prepa	clare that I have examined this return, including accompanying schedules and statements, a rer (other than officer) is based on all information of which preparer has any knowledge.	and to the best o	n my knowledg								
		An.A	1 Ana mit		2 4	202							
Sic	nn.	Signature of	officer () (	Date									
Sig He	re	Carol	Doggett	Chair									
110			name and title										
		Print/Type p	reparer's name Preparer's signature Date	1	Check	if	PTIN						
Pa	Ы	Chad N	1. Rosen, CPA 4/a	18/2023	self-employ	red	P01071321						
	eparer	Firm's name											
Us	e Only	Firm's addre			Firm's EIN	27-	-1661785						
	-		Dallas, TX 75287		Phone no.	972-	-818-1400						
May	, the IRS	discuss th	is return with the preparer shown above? See instructions		<u></u>		X Yes No						
			eduction Act Notice, see the separate instructions.	TEEA0101L 0			Form 990 (2022)						
		1.10											

Form	n 990 (	2022) Kellermann Foundation		34-2018044	4 Page <b>2</b>
Par	t III	Statement of Program Service Acco			
		Check if Schedule O contains a response or	note to any line in this Part III		· · · · · · · · · · · · · · · ·
1		y describe the organization's mission:		, , , ,	
		provide resources for health,			
		<u>owerment for the benefit of t</u> thwest Uganda.	ne Batwa pygmies and adjad	ent_communities_ii	<u>1</u>
	<u> 50u</u>				
2	Did th	e organization undertake any significant program	services during the year which were not liste	d on the prior	
				· · · · · · · · · · · · · · · · · · ·	Yes 🗶 No
		s," describe these new services on Schedule O.			🗖
3		e organization cease conducting, or make sign	nficant changes in how it conducts, any p	rogram services?	Yes X No
л		s," describe these changes on Schedule O. ibe the organization's program service accomp	lichmonts for each of its three largest pro	aram corvicos, as moasuro	d by oxponsos
-	Section	on 501(c)(3) and 501(c)(4) organizations are re- evenue, if any, for each program service repor	quired to report the amount of grants and	allocations to others, the to	otal expenses,
4a	(Code	e:) (Expenses \$1,029,17	1. including grants of \$ 963,	041.) (Revenue \$	1,309.)
		tributed resources resulting			
		cational support to 1,255 stu			
		ool expansion and 20 homes; f			
		anded spiritual care outreach lthcare, and school construct			
		urance_for_all_Batwa;_hosted			
		ease Intelligence; expanded d			<u>10us</u>
		advantaged patients; and prov			uding
		ernal health, pediatrics, sur			
	Tub	erculosis.		<b>f</b>	
		<b>A</b>			
4b	(Code	e:) (Expenses \$	including grants of \$	) (Revenue \$	)
		<b>X</b>			
4c	(Code	e: ) (Expenses \$	including grants of \$	) (Revenue \$	)
	0.1				
4d		program services (Describe on Schedule O.)	rante of \$	evenue \$	``
م∆	(Expe		rants of \$ ) (Re 29,171.	venue ș	)
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Form 990 (2022) Kellermann Foundation

Par	t IV Checklist of Required Schedules			
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	Yes X	No
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? <i>If "Yes," complete Schedule C, Part I.</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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>	18		х
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		х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
BAA	TEEA0103L 09/01/22		1 <b>990</b>	(2022)

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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	Yes	No X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		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? <i>If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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? <i>If "Yes," complete Schedule L, Part I</i> .	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
	A 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		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		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? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		 V-	
1~	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	Х	
BAA	TEEA0104L 09/01/22	Form	<b>990</b> (	(2022)

34-2018044

Page 4

		Kellermann		
Part IV	Chec	klist of Requir	ed Schedules	(continued)

-	990 (2022) Kellermann Foundation 34-2018044		P	Page 5								
Par	<b>V</b> Statements Regarding Other IRS Filings and Tax Compliance (continued)	<del></del>		1								
		`	Yes	No								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-											
	ments, filed for the calendar year ending with or within the year covered by this return 2a 3		v									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х								
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		Х								
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?											
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х								
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х								
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b										
7	Organizations that may receive deductible contributions under section 170(c).											
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and											
-	services provided to the payor?	7a		Х								
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	-		Х								
	Form 8282?	7c										
	If "Yes," indicate the number of Forms 8282 filed during the year	7.		X								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X								
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			Л								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g										
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a											
	Form 1098-C?	7h										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring											
	organization have excess business holdings at any time during the year?	8										
	Sponsoring organizations maintaining donor advised funds.											
	Did the sponsoring organization make any taxable distributions under section 4966?	9a										
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b										
	Section 501(c)(7) organizations. Enter:											
	Initiation fees and capital contributions included on Part VIII, line 12 10a											
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b											
	Section 501(c)(12) organizations. Enter:											
	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										
	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.											
а	Is the organization licensed to issue qualified health plans in more than one state?	13a										
	Note: See the instructions for additional information the organization must report on Schedule O.											
b	Enter the amount of reserves the organization is required to maintain by the states in											
	which the organization is licensed to issue qualified health plans											
	Enter the amount of reserves on hand			37								
		14a		Х								
		14b										
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		Х								
	excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	13										
16		16		Х								
10	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 activities that would											
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17										
	If "Yes," complete Form 6069.											
BAA	TEEA0105L 09/01/22	Form	990	(2022)								

Page 6

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

 Check if Schedule O contains a response or note to any line in this Part VI.
 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 <b>1a</b> 11 If there are material differences in voting rights among members See Sch. O of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>									
2	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?									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х						
4	4 Did the organization make any significant changes to its governing documents									
	since the prior Form 990 was filed?									
5	<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	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?	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:									
	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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		Х						
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni		· · ·						
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a		Х						
	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							
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O									
	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
	: Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> SeeSchedule.Q	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
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. See Schedule. 0	15a	Х							
b	Other officers or key employees of the organization	15b		Х						
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure	100								
17	List the states with which a copy of this Form 990 is required to be filed AL AR CA CT IL KY NH NY TN									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50	1(c)(3)								
10	available for public inspection. Indicate how you made these available. Check all that apply.          Own website       Another's website       X       Upon request       Other (explain on Schedule O)		<i>ijs</i> UII	¥)						
19		hle to								
	the public during the tax year. See Schedule O when so and to prove a statements available to prove the provide th	ມເຮ ເປ								

20 State the name, address, and telephone number of the person who possesses the organization's books and records. Laura Corley 1149 Rockingham Dr Ste 115 Richardson TX 75080 972-685-0279

Form 990 (2022) Kellermann Foundation	34-2018044	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Contractors	ompensated Employe	es, and								
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 organization's tax year.	h or within the									
<ul> <li>List all of the organization's current officers, directors, trustees (whether individuals or organization)</li> </ul>	s), regardless of amount of									

rya s), reg 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.

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

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

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

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

(A) Name and title			(C)										
			thar	n one s both	box, an c ector	unles officer /truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other		
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations		
_(1)	Laura Corley	40											
	Executive Dir.	0			Х		$\left  \right $		66,625.	0.	0.		
_(2)_	Peter Huntress	1								0	0		
(2)	Director	0	Х						0.	0.	0.		
(3)	Brendan Kimbrough Director	<u>    1    </u> 0	x			)			0.	0.	0.		
_(4)	Jeed Gan	1											
	Director	0	Х						0.	0.	0.		
_(5)	Cindy Waits	1											
	Director	0	Х						0.	0.	0.		
_(6)	Charles Pinches	1											
	Director	0	Х						0.	0.	0.		
_(7)_	Lillian Butungi Niwagaba	1											
	Director	0	Х						0.	0.	0.		
(8)	Andrew Nyberg	1											
	Director	0	Х						0.	0.	0.		
<u>(9)</u>	John Macaulay	1								_	_		
	Treasurer	0	Х		Х				0.	0.	0.		
(10)	Ann Bradbury	1											
(4.4.)	Secretary	0	Х		Х		$\left  \right $		0.	0.	0.		
(11)	Carol Doggett	1											
(10)	Vice Chairman	0	Х		Х				0.	0.	0.		
(12)	Gayle Porter	1							0	0	0		
(12)	Chairman	0	Х		Х				0.	0.	0.		
(13)													
(14)													
BAA		TEEA0	107L	09/0	1/22	<u> </u>					Form <b>990</b> (2022)		

	990 (2022) Kellermann Foundation VII Section A. Officers, Directors, Tru	stoos	Kov	Fmr		005	200	l Highest Con	34-201804		Page	
ιαι	The Section A. Onicers, Directors, Hu	(B)		<u> </u>	(C)	cc3, i	and			loyees	(continue	:u)
(A) Name and title			box,	not che unless er and	Positio eck mo perso a dire	ore than on is both ctor/trus	h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estima of	(F) ted amour	
		(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	ney employee Officer	Highest compensated	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the or and	Isation from ganization related nizations	
(15)												
(16)												—
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)								DY				
(24)								01				
(25)					Ψ							
	Subtotal						· · ·	66,625. 0.	0.			0.
	Fotal (add lines 1b and 1c)						•••••••••••••••••••••••••••••••••••••••	66,625.	0.			<u>0.</u> 0.
2	Total number of individuals (including but not limited from the organization 0									pensation		<u>.</u>
											Yes	No
3	Did the organization list any <b>former</b> officer, direct on line 1a? <i>If "Yes,"complete Schedule J for such</i>	or, truste <i>individu</i>	ee, ke <i>ial</i>	y em	ploye	e, or	high · · · ·	est compensated	employee	. 3		Х
	For any individual listed on line 1a, is the sum of the organization and related organizations greater such individual	r than \$1	50,00	)0'? If	"Ye	s," con	nple	ete Schedule J for	from	4		X
	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes</i>								individual			X
	on B. Independent Contractors											
1	Complete this table for your five highest compens compensation from the organization. Report compens	sated ind sation for	epend the ca	dent o alenda	contr ar yea	actors ar endii	tha ng w	t received more the treceived more the treceived more the tree to be the tree to	han \$100,000 of ganization's tax year			
	(A) Name and business addr	ess						<b>(B)</b> Description of	of services	<b>(C</b> Comper		
												—
	Total number of independent contractors (including bi \$100,000 of compensation from the organization	ut not lim 0	ited to	thos	e list	ed abo	ve) v	who received more	than			

# Form 990 (2022) Kellermann Foundation Part VIII Statement of Revenue

34-2018044

Page 9

Par	t VI	<b>Statement of Revenue</b> Check if Schedule O contains	a resp	oonse or note to an	y line in this Part V			
					(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
হ য	1a	Federated campaigns	1a					
Le la	b	Membership dues	1b					
Am S	С	Fundraising events	1c					
figi Liar	d	Related organizations	1d					
Sim's	e f	Government grants (contributions) All other contributions, gifts, grants, and	1e					
lition and the second		similar amounts not included above	1f	1,158,966.				
Contributions, Gifts, Grants, and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f.	1g	4,909.				
Cor	h	<b>Total.</b> Add lines 1a-1f			1,158,966.			
_				Business Code	1,150,500.			
Program Service Revenue	2a	<u>Guest_house_admin_fe</u>	es	561000	1,309.	1,309.		
Rev	b							
ice	С							
Serv	d							
Ĩ	е							
ogr		All other program service revenu						
å	g	Total. Add lines 2a-2f			1,309.			
	3	Investment income (including divident other similar amounts)	ends, i	interest, and	905.			905.
	4	Income from investment of tax-e			905.			905.
	5	Royalties	•	•				
	-	(i) R		(ii) Personal				
	6a	Gross rents 6a				OP1		
	b	Less: rental expenses 6b			C C			
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Secu	urities	(ii) Other				
		sales of assets other than inventory <b>7a</b>						
	b	Less: cost or other basis						
	_	and sales expenses <b>7b</b> Gain or (loss) <b>7c</b>						
		Net gain or (loss)						
			· · · · · ·					
Jue	8a	Gross income from fundraising events (not including \$						
Vel		of contributions reported on line 1c).	_					
å		See Part IV, line 18	8	a				
Other Revenue		Less: direct expenses	8					
B	С	Net income or (loss) from fundra	ising	events				
	9a	Gross income from gaming activities.						
		See Part IV, line 19.	9					
		Less: direct expenses Net income or (loss) from gamin	<b>9</b>					
				vilies				
	10a	Gross sales of inventory, less	10	a				
	b	Less: cost of goods sold	10					
		Net income or (loss) from sales	-					
S				Business Code				
ē g	11a							
an	b							
scellaneo Revenue	С							
Miscellaneous Revenue	u	All other revenue						
۷		Total. Add lines 11a-11d			1 1 1 1 1 1 1 1	4 005	-	0.05
	12	Total revenue. See instructions.			1,161,180.	1,309.	0.	905.

	990 (2022) Kellermann Foundati			34-201	8
Par					
Secti	ion 501(c)(3) and 501(c)(4) organizations must c				
	Check if Schedule O contains	a response or note to any		·····	
Do n 6b, 7	ot include amounts reported on lines /b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general 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				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 1	6 963,041.	963,041.		
	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	66,500.	18,827.	21,591.	
U	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described				
	in section 4958(c)(3)(B)	01	0.	0.	
	Other salaries and wages	65,269.	34,180.	20,856.	
U	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,036.	4,055.	3,304.	
	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting			-	
	Lobbying				
	eq:professional fundraising services. See Part IV, line 17				
	Investment management fees			4	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)			12,179.	
12	Advertising and promotion.	575.		470.	
13	Office expenses		572.	7,241.	
14	Information technology	596.		596.	
	Royalties				
	Occupancy	= • / = = • •	8,116.	5,764.	
	Travel.	3,106.		3,106.	
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,647.	380.	5,067.	
20	Interest			·	-
	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,969.		7,331.	_
23	Insurance	2,751.		2,751.	
24	Other expenses. Itemize expenses not				

Other expenses. Itemize expenses not covered above. (List miscellaneous expenses 24 on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).

a <u>Business expenses</u> 8,603 8,210 b с d e All other expenses..... 25 Total functional expenses. Add lines 1 through 24e. ... 1,187,133. 1,029,171. 98,466. 59,496. Joint costs. Complete this line only if the organization reported in column (B) 26 joint costs from a combined educational campaign and fundraising solicitation. if following Check here SOP 98-2 (ASC 958-720).....

. . . . . . . . .

(D) Fundraising expenses

26,082.

2,677.

105. 13,925.

4,243.

200.

1,638.

393.

0. 10,233.

### Form 990 (2022) Kellermann Foundation

Page 11

Part X Balance Sheet

	Check if Schedule O contains a response or note to	o any line	in this Part X			П
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash – non-interest-bearing			265,232.	1	259,694.
2	Savings and temporary cash investments			263,902.	2	129,807.
				37,673.	3	154,205.
4	Accounts receivable, net			,	4	,
5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er officer, contribut	, director, or, or 35%		5	
			-		-	
					6	
					7	
			-		8	
9	Prepaid expenses and deferred charges				9	
		1	1		-	
Tua	Complete Part VI of Schedule D	10a	1,131.			
b	Less: accumulated depreciation	10b			10c	
					11	
12	Investments – other securities. See Part IV, line 11.				12	
13	Investments - program-related. See Part IV, line 11.				13	
14	Intangible assets.			29,278.	14	20,309.
15	Other assets. See Part IV, line 11			771.	15	771.
16	Total assets. Add lines 1 through 15 (must equal line	33)		596,856.	16	564,786.
17	Accounts payable and accrued expenses			12,220.	17	2,663.
					18	ł
					19	
20	Tax-exempt bond liabilities				20	
				550.	21	3,990.
22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	icer, dire itor, or 35 cons	ctor, trustee, %		22	
					24	
	· •	•			25	
26	Total liabilities. Add lines 17 through 25			12,770.	26	6,653.
	and complete lines 27, 28, 32, and 33.					
27	Net assets without donor restrictions			361,802.	27	220,927.
28	Net assets with donor restrictions		· · · · · · · · · · · · · · · · · · ·	222,284.	28	337,206.
	Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here				
29	Capital stock or trust principal, or current funds				29	
					30	
					31	
				584,086.	32	558,133.
	Total liabilities and net assets/fund balances			596,856.	33	564,786.
	2 3 4 5 6 7 8 9 10a b 11 2 13 14 15 6 7 8 9 10a b 11 2 2 2 3 2 4 5 2 6 2 7 2 8 2 9 3 0 3 1 3 2	<ul> <li>2 Savings and temporary cash investments.</li> <li>3 Pledges and grants receivable, net.</li> <li>4 Accounts receivable, net.</li> <li>5 Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per section 4958(f)(1)), and persons described in section</li> <li>7 Notes and loans receivable, net.</li> <li>8 Inventories for sale or use.</li> <li>9 Prepaid expenses and deferred charges.</li> <li>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</li> <li>b Less: accumulated depreciation.</li> <li>11 Investments – publicly traded securities.</li> <li>12 Investments – other securities. See Part IV, line 11.</li> <li>13 Investments – program-related. See Part IV, line 11.</li> <li>14 Intangible assets.</li> <li>15 Other assets. See Part IV, line 11.</li> <li>16 Total assets. Add lines 1 through 15 (must equal line</li> <li>17 Accounts payable and accrued expenses.</li> <li>18 Grants payable.</li> <li>19 Deferred revenue.</li> <li>20 Tax-exempt bond liabilities.</li> <li>21 Escrow or custodial account liability. Complete Part I</li> <li>21 Loans and other payables to any current or former of key employee, creator or founder, substantial control de antity or family member of any of these per and other liabilities not included on lines 17-24). Com</li> <li>23 Secured mortgages and notes payable to unrelated third</li> <li>24 Other liabilities. Add lines 17 through 25.</li> <li>25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</li> <li>27 Net assets with donor restrictions.</li> <li>28 Net assets with donor restrictions.</li> <li>29 Paid-in or capital surplus, or land, building, or equipm</li> <li>31 Retained earnings, endowment, accumulated income, 32 Add and complet lines 29 through 33.</li> <li>29 Capital stock or trust principal, or current funds.</li> <li>30 Paid-in or capital surplus, or land, building, or equipm</li> </ul>	<ul> <li>2 Savings and temporary cash investments.</li> <li>3 Pledges and grants receivable, net.</li> <li>4 Accounts receivable, net.</li> <li>5 Loans and other receivables from any current or former officer trustee, key employee, creator or founder, substantial contribution controlled entity or family member of any of these persons.</li> <li>6 Loans and other receivables from other disqualified persons (a section 4958(f)(1)), and persons described in section 4958(c)(3</li> <li>7 Notes and loans receivable, net.</li> <li>8 Inventories for sale or use.</li> <li>9 Prepaid expenses and deferred charges.</li> <li>10a</li> <li>10b</li> <li>10b</li> <li>10cmplete Part VI of Schedule D.</li> <li>10b</li> <li>11 Investments – publicly traded securities.</li> <li>12 Investments – publicly traded securities.</li> <li>13 Investments – program-related. See Part IV, line 11.</li> <li>14 Intangible assets.</li> <li>15 Other assets. See Part IV, line 11.</li> <li>16 Total assets. Add lines 1 through 15 (must equal line 33).</li> <li>17 Accounts payable and accrued expenses.</li> <li>18 Grants payable.</li> <li>19 Deferred revenue.</li> <li>20 Tax-exempt bond liabilities.</li> <li>21 Escrow or custodial account liability. Complete Part IV of Sched Loans and other payables to any current or former officer, dire key employee, creator or founder, substantial contributor or 3 controlled entity or family member of any of these persons.</li> <li>23 Secured mortgages and notes payable to unrelated third parties.</li> <li>24 Unsecured notes and loans payable to unrelated third parties.</li> <li>25 Other liabilities. (including federal income tax, payables to relat and other liabilities included on lines 17-24). Complete Part Complete Part 24.</li> <li>24 Total liabilities.</li> <li>25 Other liabilities that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</li> <li>27 Net assets with donor restrictions.</li> <li>28 Net assets with donor restrictions.</li> <li>29 Capital stock or trust principal, or current funds.</li></ul>	2       Savings and temporary cash investments.         3       Pledges and grants receivable, net.         4       Accounts receivable, net.         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.         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).         7       Notes and loans receivable, net.         8       Inventories for sale or use.         9       Prepaid expenses and deferred charges.         10a       1,131.         b Less: accumulated depreciation.       10a         11       Investments – publicly traded securities.         12       Investments – program-related. See Part IV, line 11.         13       Investments – program-related. See Part IV, line 11.         14       Intangible assets.         15       Other assets. See Part IV, line 11.         16       Total assets. Add lines 1 through 15 (must equal line 33).         17       Accounts payable and accrued expenses.         18       Grants payable.         19       Deferred revenue.         21       Tax-exempt bond liability. Complete Part IV of Schedule D. <t< td=""><td>1       Cash - non-interest-bearing.       265,232.         2       Savings and temporary cash investments.       263,902.         3       Pledges and grants receivable, net.       37,673.         4       Accounts receivable, net.       37,673.         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.       1         6       Loans and other receivables from other disgualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B).       1         7       Notes and loans receivable, net.       1         8       Inventories for sale or use.       1         9       Prepaid expenses and deferred charges.       10a       1,131.         10       Investments – other securities. See Part IV, line 11.       10b       1,131.         11       Investments – other securities. See Part IV, line 11.       29,278.         13       Investments – other securities. See Part IV, line 11.       29,278.         14       Intangible assets.       21,220.         15       Other assets. See Part IV, line 11.       7711.         16       Total assets. Add lines 1 through 15 (must equal line 33).       596,856.         17       Acc</td><td>I     Cash - non-interest-bearing.     265,232.     1       2     Savings and temporary cash investments.     263,902.     2       3     Pledges and grants receivable, net.     37,673.     3       4     Accounts receivable, net.     37,673.     3       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(r)(1), and persons described in section 4958(r)(3), and persons described in secti</td></t<>	1       Cash - non-interest-bearing.       265,232.         2       Savings and temporary cash investments.       263,902.         3       Pledges and grants receivable, net.       37,673.         4       Accounts receivable, net.       37,673.         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.       1         6       Loans and other receivables from other disgualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B).       1         7       Notes and loans receivable, net.       1         8       Inventories for sale or use.       1         9       Prepaid expenses and deferred charges.       10a       1,131.         10       Investments – other securities. 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Add lines 1 through 15 (must equal line 33).       596,856.         17       Acc	I     Cash - non-interest-bearing.     265,232.     1       2     Savings and temporary cash investments.     263,902.     2       3     Pledges and grants receivable, net.     37,673.     3       4     Accounts receivable, net.     37,673.     3       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(r)(1), and persons described in section 4958(r)(3), and persons described in secti

Form	990 (2022) Kellermann Foundation 34-2	2018044		Pa	ge <b>12</b>
Par	t 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	1,16	51,1	.80.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,18	37,1	.33.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	25,9	953.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	58	34,0	86.
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	55	58,1	.33.
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
		_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	te			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the U 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 aud or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 09/01/22		Form	990 (	(2022)

SCHEDULE A (Form 990)

Total

# 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. 2022 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service			o to www.irs.gov/For	Open to Public Inspection					
Name	of the organization		Employer identific						ation number
Kel	lermann Foun	dation						34-201804	4
Par				organizations must				) See instruc	ctions.
The o	<u> </u>	•	•	For lines 1 through 12,		-			
1				hurches described in sec		(b)(1)(A)	(i).		
2				tach Schedule E (Form					
3				ization described in sec					
4	A medical rese name, city, and	-	tion operated in conju	unction with a hospital (	describe	ed in sec	tion 17	0(b)(1)(A)(iii). E	Inter the hospital's
5	An organization section 170(b)	n operated for <b>(1)(A)(iv).</b> (Co	the benefit of a colle mplete Part II.)	ege or university owned	or oper	ated by	a gover	nmental unit de	escribed in
6 7		e, or local gov	ernment or governme	ental unit described in s	ection 1	1 <b>70(b)(</b> 1)	)(A)(v).		
/	X An organization in section 170(	that normally r b)(1)(A)(vi).(	eceives a substantial p Complete Part II.)	part of its support from a	governm	iental un	it or fron	n the general pu	blic described
8	A community t	rust described	in section 170(b)(1)(	A)(vi). (Complete Part I	1.)				
9	-	-		c <b>tion 170(b)(1)(A)(ix)</b> oper e (see instructions). Enter				-	-
10	from activities investment inc June 30, 1975.	related to its e ome and unre See <b>section !</b>	exempt functions, sub lated business taxabl <b>509(a)(2).</b> (Complete l	•	ns; and 511 tax)	(2) no r ) from b	nore that usiness	an 33-1/3% of i es acquired by	ts support from gross
11	5	5		ely to test for public safe	,			. ,	
12 a	or more public lines 12a throu	ly supported o gh 12d that de rting organization the power to re	rganizations describe escribes the type of s on operated, supervise gularly appoint or elect	ely for the benefit of, to ed in section 509(a)(1) of upporting organization d, or controlled by its sup t a majority of the directo	or section and com	o <b>n 509(a</b> oplete li	<b>)(2).</b> See nes 12e	e <b>section 509(a</b> , 12f, and 12g.	)(3). Check the box on
b		orting organiz the supporting	ation supervised or o organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted orga the sup	nization(s), by ported organizat	having control or ion(s). <b>You</b>
С	Type III function	ally integrated	A supporting organizat	tion operated in connectio plete Part IV, Sections	n with, a	nd functi	onally inf	egrated with, its	supported
d	Type III non-fun	ctionally integ	rated. A supporting org	janization operated in cor / must satisfy a distribu is A and D, and Part V.	nnection	with its :	supporte It and ar	d organization(s n attentiveness	) that is not requirement (see
е	Check this box	if the organiz	ation received a writt	en determination from f supporting organization	the IRS	that it is	з а Туре	I, Type II, Typ	e III functionally
f	•	51	, ,						
g			n about the supported						
	(i) Name of supported org	anization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your o	ls the tion listed joverning ment?		nount of monetary t (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									

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

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

### Section A. Public Support

000	tion A: I ublic Support						
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,279,161.	1,020,295.	958,999.	1,170,327.	1,158,966.	5,587,748.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				, , , , , , ,	, ,	0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,279,161.	1,020,295.	958,999.	1,170,327.	1,158,966.	5,587,748.
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)						1,326,841.
6	Public support. Subtract line 5 from line 4						4,260,907.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
7	Amounts from line 4	1,279,161.	1,020,295.	958,999.	1,170,327.	1,158,966.	5,587,748.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,070.	1,124.	525.	<b>DPY</b> <sub>285.</sub>	905.	3,909.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	6,351.	BL				6,351.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. Add lines 7 through 10						5,598,008.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	97,692.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
	tion C. Computation of Pu						
	Public support percentage for 20						76.11%
	Public support percentage from						76.96%
	<b>33-1/3% support test-2022.</b> If t and <b>stop here.</b> The organization	qualifies as a put	olicly supported o	rganization			X
b	33-1/3% support test-2021. If the and stop here. The organization	e organization dic qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, c	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this I	box and stop here	. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	test, check this l tion qualifies as a	publicly supported	Explain in Part dorganization	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

Schedule A (Form 990) 2022

Page 3

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.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</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 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						
	<b>Total.</b> Add lines 1 through 5 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.)			<b>C</b>	DY'		
Sec	tion B. Total Support			CU			
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	Pl	500				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here			ifth tax year as a		
	tion C. Computation of Pu		-				
	Public support percentage for 20	-					010
	Public support percentage from a				<u></u>	16	010
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	e			
17	Investment income percentage f	or 2022 (line 10c,	column (f), divid	ed by line 13, col	umn (f))	17	010
18	Investment income percentage f	-		-			00
19a	<b>33-1/3% support tests</b> – <b>2022.</b> If t is not more than 33-1/3%, check	the organization d	lid not check the	box on line 14, ar	nd line 15 is more	than 33-1/3%, and	
b	<b>33-1/3% support tests—2021.</b> If the 18 is not more than 33-1/3%	the organization d	id not check a bo	ox on line 14 or lin	ne 19a, and line 1	6 is more than 33-	1/3%, and
20	Private foundation. If the organi			•			
				,			

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Page 4

 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

			V.	NI.
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was	2		
	described in section 509(a)(1) or (2).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
l	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 <b>Part VI</b> when and how the organization made the determination.	3b		
	<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4	a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
l	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	a 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 <b>Part VI</b> , 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	5a		
I	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?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7		
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).	8		
9	a 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 <b>Part VI</b> .	9a		
l	<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI.</b></i>	9b		
	c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
I	<b>b</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		

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Part IV	Supporting Organizations (continued)			
			Yes	No
11 Has	the organization accepted a gift or contribution from any of the following persons?			
<b>a</b> A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c belo	ow.		
the g	overning body of a supported organization?	11a		
<b>b</b> A far	nily member of a person described on line 11a above?	11b		
<b>c</b> 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		

#### Section B. Type I Supporting Organizations

Schedule A (Form 990) 2022

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 had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.* 

Kollarmann Foundation

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* 

#### Section C. Type II Supporting Organizations

 Yes
 No

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

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
  - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
  - c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

#### 2 Activities Test. Answer lines 2a and 2b below.

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

2a

2b

3a

Yes

No

31-2018011

Page 5

Yes

1

2

No

Part V

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on N ns mu	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
k	Average monthly cash balances	1b		
c	: Fair market value of other non-exempt-use assets	1c		
c	<b>I Total</b> (add lines 1a, 1b, and 1c)	1d		
e	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	-3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte	egrated	Type III supporting or	nanization

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

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Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued	d)	<u> </u>
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organizations	ς,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
	Distributions to attentive supported organizations to which the organizati in <b>Part VI</b> ). See instructions.	on is responsive (provide	details	8	
	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in <b>Part VI</b></i> ). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
	• From 2018				
	From 2019				
	From 2020				
e	e From 2021				
1	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
	i Carryover from 2017 not applied (see instructions)				
j	i Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7:				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
	Excess from 2020				
c	Excess from 2021				
e	Excess from 2022				

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Schedule A (Form 990) 2022

Schedule A (Form 990) 2022	Kellermann Foundation	34-2018044	Page 8
III, fine 12; B, lines 1 3a, and 3b	<b>Tental Information.</b> Provide the explanations required by Part Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Pa Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, and 6. Also complete this part for any additional information. (See i	11b, and 11c; Part IV, Section art IV, Section E, lines 1c, 2a, 2b, 6, and 8; and Part V, Section E,	



#### Schedule B (Form 990)

Department of the Treasury

Internal	Revenue	Service	-

#### PUBLIC DISCLOSURE COPY Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990 or For	m 99 <b>0-PF</b> .
Go to www.irs.gov/Form990 for the	latest information



Name of the organization		Employer identification number
Kellermann Foundati	34-2018044	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundati	on
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

#### General Rule

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

#### **Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
  - For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
  - For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year.

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

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

	B (Form 990) (2022)		1 2 Page <b>2</b>
Name of org Keller	<sub>janization</sub> rmann Foundation		r identification number 018044
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1_</u> _		\$25,000.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$25,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	C C	<b>s 3</b> 0,000.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$30,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5_</u> _		\$ <u>33,052.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6_</u> _		\$ <u>80,000.</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)

	B (Form 990) (2022)		2 2 Page <b>2</b>
Name of org Kellei	<sub>aanization</sub> rmann Foundation		r identification number $018044$
Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional s		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>30,000</u> .	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>30,000</u> .	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>301,666.</u>	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u> _		\$25,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>11</u> _		\$60,000.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person        Payroll        Noncash        (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)	1	1	Page <b>3</b>
Name of organization	Employer identif	ication nu	mber
Kellermann Foundation	34-20180	44	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (b) Description of noncash property given (a) No. from Part I (d) Date received (c) FMV (or estimate) (See instructions.) N/A (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) Part I (See instructions.) (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) Part I Ś BAA TEEA0703L 07/22/22 Schedule B (Form 990) (2022)

Name of orga			1 1 Page 4 Employer identification number
	mann Foundation Exclusively religious, charitable, et or (10) that total more than \$1,000 f the following line entry. For organizations co contributions of \$1,000 or less for the year. ( Use duplicate copies of Part III if additional s	or the year from any one co impleting Part III, enter the total of Enter this information once. See in	34-2018044 ations described in section 501(c)(7), (8), ontributor. Complete columns (a) through (e) and <i>exclusively</i> religious, charitable, etc., nstructions.)\$N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from			(d) Description of how gift is held
Part I			
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<u> </u>	(e) Transfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			+
	Transferee's name, address	Relationship of transferor to transferee	
		TEFA07041 07/22/22	Schodulo B (Earm 000) (2022)

	Sup	olomontal Einancial Statomo	ntc		OMB No	. 1545-0047
SCHEDULE D (Form 990) Complete if the organization answered "Yes" on F Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f,		rm 99 <b>0</b> .		2022		
Department of the Treasury Internal Revenue Service	ternal Revenue Service				Open to Public Inspection	
Name of the organization				Employer id	entification	number
Kellermann Fou				34-201		
		nor Advised Funds or Other Simila "Yes" on Form 990, Part IV, line 6.	ar Funds or A	ccounts.		
Complete	e ii uie organization answered	(a) Donor advised funds	(b) F	unds and c	other acco	ounts
1 Total number at	end of year					701103
2 Aggregate value of co	ontributions to (during year)					
<b>3</b> Aggregate value of g	rants from (during year)					
4 Aggregate value	at end of year					
are the organiza	tion's property, subject to the	nor advisors in writing that the assets held i organization's exclusive legal control?			Yes	No
6 Did the organiza for charitable pu impermissible p	tion inform all grantees, dono rposes and not for the benefi rivate benefit?	rs, and donor advisors in writing that grant t of the donor or donor advisor, or for any o	funds can be us ther purpose cor	ed only iferring	Yes	No
	rvation Easements.	"Yes" on Form 990, Part IV, line 7.				
		y the organization (check all that apply).				
	of land for public use (for exam		rvation of a histo	rically impo	ortant lan	d area
Protection o	f natural habitat	Prese	rvation of a certi	fied historic	structure	e
	n of open space					
2 Complete lines 2a last day of the ta	a through 2d if the organization	neld a qualified conservation contribution in the	e form of a conser	vation easer	ment on th	ıe
				leld at the	End of th	e Tax Year
<b>a</b> Total number of	conservation easements		2a			
0	3	ments	<b>2</b> b			
		fied historic structure in <b>clu</b> ded in (a)	2c			
d Number of conse	ervation easements included i e listed in the National Registe	n (c) acquired after July 25, 2006 and not c	on a <b>2 d</b>			
3 Number of conser	rvation easements modified, trai	nsferred, released, extinguished, or terminated		on during the	9	
tax year		UP		-		
		onservation easement is located				
		garding the periodic monitoring, inspection			Yes	No
		inspecting, handling of violations, and enforcin				
-		···· 3, · · 3 · · · · · · · · · · ·	5		5	
7 Amount of expense	ses incurred in monitoring, insp	ecting, handling of violations, and enforcing cor	nservation easeme	ents during f	the year	
and section 170	(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements o		· · · · · · · ·	-	No
9 In Part XIII, desi include, if applic conservation eas	able, the text of the footnote	ports conservation easements in its revenue to the organization's financial statements th	e and expense st nat describes the	atement ar organizatio	nd balanco on's acco	e sheet, and unting for
		Ilections of Art, Historical Treasure "Yes" on Form 990, Part IV, line 8.	es, or Other S	imilar As	ssets.	
historical treasu	res, or other similar assets he	r FASB ASC 958, not to report in its revenu Id for public exhibition, education, or reseau al statements that describes these items.	ie statement and rch in furtheranc	balance sl e of public	heet work service, p	s of art, provide in
<b>b</b> If the organization historical treasure	on elected, as permitted unde es, or other similar assets held f	r FASB ASC 958, to report in its revenue st or public exhibition, education, or research in fi	urtherance of publ	lic service, p	provide the	9
(i) Revenue inc	its relating to these items: cluded on Form 990, Part VIII,	line 1		\$		
		nistorical treasures, or other similar assets for f ASC 958 relating to these items:			owing	
a Revenue include	eu on Form 990, Part VIII, line	. 1		Þ		

<b>b</b> Assets included in Form 990, Part X			\$
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Schedule D (Form 990) 2022

OMB No. 1545-0047

Schedule D (Form 990) 2022 Kellerma				34-201		Page <b>2</b>	
Part III Organizations Maintain	ng Collectio	ns of Art, Hist	orical Treasures,	or Other Similar As	ssets (cont	inued)	
<b>3</b> Using the organization's acquisition, account items (check all that apply):	ession, and other		-	ake significant use of its	collection		
a Public exhibition d Loan or exchange program							
<b>b</b> Scholarly research	_	e Other					
<ul> <li>c Preservation for future generation</li> <li>4 Provide a description of the organization Part XIII.</li> </ul>		d explain how they	further the organization's	s exempt purpose in			
	solicit or receive	e donations of art.	historical treasures, o	r other similar assets	_		
5 During the year, did the organization s to be sold to raise funds rather than to					Yes	No	
Part IV Escrow and Custodial A reported an amount on Form 9	<b>Arrangement</b> 90, Part X, line 2	<b>s.</b> Complete if the 21.	organization answered	"Yes" on Form 990, Par	t IV, line 9, or		
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian or otl	ner intermediary f	or contributions or othe	er assets not included	Yes	XNo	
<b>b</b> If "Yes," explain the arrangement in Part					165	A NO	
					Amount		
c Beginning balance				1c			
<b>d</b> Additions during the year				1d			
e Distributions during the year				1e			
f Ending balance						0.	
<b>2 a</b> Did the organization include an amound						No	
<b>b</b> If "Yes," explain the arrangement in F				ed on Part XIII		Х	
Part V Endowment Funds. Com		ee Part XII		t IV lino 10			
	<b>a)</b> Current year	(b) Prior year	(c) Two years back		(e) Four yea	ars back	
<b>1 a</b> Beginning of year balance	a) Guillenit year			(u) Three years back		IS DOCK	
<b>b</b> Contributions				_	+		
<b>c</b> Net investment earnings, gains,					1		
and losses							
<b>d</b> Grants or scholarships							
e Other expenditures for facilities and programs		10					
f Administrative expenses	- 1	$\rightarrow$			+		
<b>g</b> End of year balance		DV:			-		
2 Provide the estimated percentage of t	he current year	end balance (line	1g, column (a)) held a	as:	<b>.</b>		
a Board designated or quasi-endowmen	t	00					
<b>b</b> Permanent endowment	010						
<b>c</b> Term endowment	010						
The percentages on lines 2a, 2b, and 2c	should equal 10	0%.					
3 a Are there endowment funds not in the po	ssession of the o	organization that ar	e held and administered	for the			
organization by:					Yes	No	
<ul><li>(i) Unrelated organizations</li><li>(ii) Related organizations</li></ul>					3a(i)		
<b>b</b> If "Yes" on line 3a(ii), are the related					3a(ii) 3b	-	
4 Describe in Part XIII the intended use	-				50		
Part VI Land, Buildings, and Ed	-						
Complete if the organization ar		n Form 990, Part IV	I, line 11a. See Form 9	90, Part X, line 10.			
Description of property	(a) Cos	t or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation	<b>(d)</b> Book v	value	
<b>1 a</b> Land		,					
<b>b</b> Buildings							
c Leasehold improvements							
<b>d</b> Equipment			1,131.	1,131.		0.	
e Other							
Total. Add lines 1a through 1e. (Column (d)	must equal Fo	rm 990, Part X, co	olumn (B), line 10c.)			0.	
BAA				Sched	ule D (Form 99	10) 2022	

Part VII	Investments – Other Securities.	From 000 Deat IV line	N/A	
(a) Deserir	Complete if the organization answered "Yes" on otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	voor morket value
	I derivatives	(D) DOOK Value	(C) Method of Valuation: Cost of end-of	-year market value
	held equity interests			
(3) Other				
(A) -				
<u>(B)</u>				
(C)				
(D)				
(E)				
(F)		_		
(G)				
(H)				
( )				
	(b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments – Program Related. Complete if the organization answered "Yes" on		N/A 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)			AP1	
Total. (Column	(b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	N/A		
	Complete if the organization answered "Yes" on	Form 990, Part IV, Tine scription	11d. See Form 990, Part X, line 15.	(b) Book value
(1)	(0,25	Scription		
(2)	DU			
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
(10)				
Total. (Colu	ımn (b) must equal Form 990, Part X, column (i	B) line 15.)		
Part X	Other Liabilities. Complete if the organization answered "Yes" on	Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.
1.	(a) Descr	iption of liability		(b) Book value
	al income taxes			
(2) (3)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
I otal. (Column	(b) must equal Form 990, Part X, column (B) line 25.)			

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

Schedule D (Form 990) 2022 Kellermann Foundation	34-2018044	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1 1	,161,180.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		· · ·
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines <b>2a</b> through <b>2d</b>	2e	
3 Subtract line 2e from line 1	. 3 1	,161,180.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		· · ·
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines <b>4a</b> and <b>4b</b>	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5 1	,161,180.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	. 1 1	,187,133.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · ·
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines <b>2a</b> through <b>2d</b>	2e	
3 Subtract line 2e from line 1	. 3 1	,187,133.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		, , , , , , , , , , , , , , , , , , , ,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	<b>5</b> <u>1</u>	,187,133.
Part XIII Supplemental Information.		

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

#### Part IV, Line 2b - Explanation Of Escrow Account Liability

The Organization processes payments for a guest house in Uganda to facilitate the

flow of payments there by U.S.-based guests.

#### Part X - FASB ASC 740 Footnote

Management has concluded that any tax positions which would not meet the

more-likely-than-not criterion of Financial Accounting Standards Board (FASB)

Accounting Standards Codification (ASC) Topic 740-10, Accounting for Income Taxes,

would be immaterial to the financial statements taken as a whole. Accordingly, the
BAA
Schedule D (Form 990) 2022

## Part X - FASB ASC 740 Footnote (continued)

accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the operating statement or accrued in the statement of financial position. Federal and state tax returns of the Organization are generally open to examination by the relevant taxing authorities for a period of three years from the date on which the returns are filed.

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SCHEDULE F (Form 990)	OMB No. 1545-0047							
Department of the Treasury	2022 Open to Public							
Department of the freasury         Go to www.irs.gov/Form990 for instructions and the latest information.         Inspection           Name of the organization         Employer identification number								
Kellermann Foundat	tion			34-2018				
Part I General Inform		es Outside th	e United States. Complet					
1 For grantmakers. Does	s the organization mai	intain records to stance, and the s	substantiate the amount of its selection criteria used to award	grants and other assi the grants or assista	stance, nce?XYes No			
	be in Part V the organized V	zation's procedure	s for monitoring the use of its gra	ints and other assistant	ce outside the			
3 Activities per Region.	The following Part I, I	line 3 table can b	e duplicated if additional space	e is needed.)Part	V			
(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed (d) is a program service, describe specific type of service(s) in the region	in (f) Total expenditures for and investments in the region Pt V			
(1) Sub-Saharan Africa			Grantmaking	Health & development	963,041.			
(2)								
(3)								
(4)								
(5)								
(6)			CO'					
(7)								
(8)	F							
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17) 3a Subtotal								
<ul> <li>b Total from continuation sheets to Part I</li> </ul>	ייי ו				963,041.			
c Totals (add lines 3a and 3b)		0			963,041.			

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Schedule F (Form 990) 2022

34-2018044

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region Part V	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Sub-Saharan					Household	
			Afr	Dev.	472.688.	Wire Trans	3,009.		FMV
			Sub-Saharan	2011	1,5,0001			90000	
			Afr	Medical	447,992.	Wire Trans	4,262.	Medical tech	FMV
			Sub-Saharan					Amazon	
			Afr	Nursing Ed	23,717.	Wire Trans	11,373.	Kindles	FMV
				-					
						N I			
				BL	; cop				
2	Enter total number of recipient organi organization by the IRS, or for which	zations listed above t the grantee or counse	hat are recognized I has provided a se	as charities by t ction 501(c)(3) (	he foreign country, equivalency letter	recognized as a t	ax exempt 501(c)(	3) ►	3
	Enter total number of other organizati							►	0
BAA								Schedule F	(Form 990) 2022

34-2018044

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book FMV, appraisal other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)			C	OPY			
(9)			BLIC C				
(10)		PU	DF				
(11)		-					
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Sche	edule F (Form 990) 2022 Kellermann Foundation	34-2018044	Page 4
Pa	rt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to C Foreign Corporations (see Instructions for Form 5471).		X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a que electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	_	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	gn Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report ( Instructions for Form 5713; don't file with Form 990)	see	X No

TEEA3505L 08/18/22

Schedule F (Form 990) 2022

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

#### Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

The Organization conducts periodic field investigations and requires as much detailed financial reporting on the use of funds as the local grantees' resources enable them to provide. Funds requested by the grantees are not provided until sufficient accountability on the use of previous grants has been obtained.

#### Part I - Additional Supplemental Information

Part I, Line 1 - The region is severely under-developed. Accordingly, it does not have a multitude of entities from which to select as award recipients, and potential grantees do not often possess the ability to formally apply for grant funds in a manner in which the Organization would demand of an entity based in the United States. This, combined with the fact that the Organization's founder significantly pioneered the development in this area, meet the eligibility and selection criteria BLIC C( of the Organization.

#### Part I, Line 3f - Method of Accounting

The Organization uses the accrual method to report the assistance.

#### Part II, Line 1 - Method of Accounting

The Organization uses the accrual method to report the assistance.

34-2018044

OMB No. 1545-0047
2022
Open to Public Inspection

Kellermann Foundation

#### Form 990, Part VI, Line 1a - Explanation of Delegated Broad Authority to Committee

In accordance with the bylaws, the board of directors did, by a majority vote of directors, designate two (2) or more of its members (who may also be serving as officers of this corporation) to constitute an executive committee of the board and delegate to such committee any of the powers and authority of the board in the management of the business and affairs of the corporation, except with respect to certain critical matters requiring approval of the majority of board members, amending bylaws, filling vacancies on the board, determining compensation of directors, and similar.

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

Prior to filing, the entire Form 990 was provided to our executive director, board of directors, and ex-officio board members via email for review. It was then approved by a majority vote of directors.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Persons covered - Any director, principal officer, or member of a committee, or staff member with governing board delegated powers, who has a direct or indirect financial interest.

Monitoring proposed or ongoing transactions for conflicts - An interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement. Each covered person must annually sign a statement which affirms that such person has received, has read, and understands the Policy and agrees to comply with it.

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization	Employer identification number
Kellermann Foundation	34-2018044

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

Dealing with potential conflicts and the level at which determinations of whether a conflict exists are made - After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

Dealing with actual conflicts, the level at which actual conflicts are reviewed, and restrictions imposed on the interested person - An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving possible conflict of interest. The chairperson of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement. After exercising due diligence, the governing board or committee shall determine whether the Organization can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, it shall make its own decision as to whether to enter into the transaction.

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

In 2021, the Executive Compensation Committee reviewed data from the National Council of Non-Profits, the Foundation Group, The Council on Foundations, Economic Research Institute, and Guidestar to determine the methodology and process for setting fair executive compensation. From there, the Committee reviewed data from all Texas non-profits and foundations based on data received from "Open990." This data was filtered for comparably-sized organizations and analyzed, and the committee submitted its resulting recommendation to the board which ultimately approved it.

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

These documents are available upon request.

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