

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2021** calendar year, or tax year beginning and ending

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization STARLIGHT CHILDREN'S FOUNDATION		D Employer identification number 95-3802159
	Doing business as		E Telephone number 310-479-1212
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	400 CORPORATE POINTE	590	G Gross receipts \$ 12,239,496.
City or town, state or province, country, and ZIP or foreign postal code CULVER CITY, CA 90230		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions H(c) Group exemption number ▶	
F Name and address of principal officer: ADAM GARONE SAME AS C ABOVE			I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527
J Website: ▶ WWW.STARLIGHT.ORG		K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	
		L Year of formation: 1983	M State of legal domicile: CA

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: STARLIGHT DELIVERS HAPPINESS TO SERIOUSLY ILL CHILDREN AND THEIR FAMILIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	30
	6 Total number of volunteers (estimate if necessary)	6	553
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	9,579,837.	11,920,916.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-3,181.	11,253.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	107,054.	307,327.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,683,710.	12,239,496.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,797,952.	2,578,357.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,484,621.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,309,561.	9,107,162.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,107,513.	11,685,519.	
19 Revenue less expenses. Subtract line 18 from line 12	1,576,197.	553,977.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 15,345,310.	End of Year 15,437,142.
	21 Total liabilities (Part X, line 26)	1,142,761.	680,616.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,202,549.	14,756,526.

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	MIKE OLSON, CPA, CFO Type or print name and title	6/16/2022			
Paid Preparer Use Only	Print/Type preparer's name JONATHAN P. SCHUBERT, CPA	Preparer's signature <i>Jonathan Schubert</i>	Date	Check if self-employed <input type="checkbox"/>	PTIN P00032866
	Firm's name ▶ HBLA, CERTIFIED PUBLIC ACCOUNTANTS, INC.	Firm's EIN ▶ 33-0155525	Phone no. 949-833-2815		
	Firm's address ▶ 18400 VON KARMAN AVE, SUITE #110 IRVINE, CA 92612				

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SINCE 1982, STARLIGHT HAS BEEN DELIVERING HAPPINESS TO SERIOUSLY ILL CHILDREN AND THEIR FAMILIES.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 5,121,582. including grants of \$) (Revenue \$) STARLIGHT DELIVERIES: STARLIGHT OFFERS AN EASY-TO-USE ONLINE PLATFORM WHERE HOSPITALS CAN ORDER ITEMS DIRECTLY FROM OUR INVENTORY OF DONATED (GIFT IN-KIND) TOYS, BOOKS, GAMES, CRAFTING MATERIALS, AND OTHER URGENTLY NEEDED PRODUCTS THAT DELIVER HAPPINESS TO HOSPITALIZED KIDS AND THEIR FAMILIES. ALL PRODUCTS ARE SHIPPED FREE-OF-CHARGE TO OUR MORE THAN 800 HOSPITAL AND HEALTH CARE FACILITY PARTNERS IN THE US.

4b (Code:) (Expenses \$ 1,905,634. including grants of \$) (Revenue \$) STARLIGHT HOSPITAL WEAR: STARLIGHT GOWNS ARE HIGH-QUALITY, FUN, SOFT, AND COLORFUL HOSPITAL GOWNS THAT KIDS LOVE TO WEAR. THE GOWNS TIE ON THE SIDE (INSTEAD OF DOWN THE BACK) TO BETTER ACCOMMODATE A CHILD'S NEED FOR PRIVACY AND COMFORT, AND INCLUDE PLASTIC SNAPS ON BOTH SLEEVES TO ALLOW EASY ACCESS FOR MEDICAL PROCEDURES. IN 2021 STARLIGHT ADDED PAJAMA PANTS TO THE HOSPITAL WEAR PROGRAM TO FURTHER ENHANCE THE HOSPITAL EXPERIENCE FOR PATIENTS.

4c (Code:) (Expenses \$ 697,991. including grants of \$) (Revenue \$) STARLIGHT GAMING: STARLIGHT GAMING DELIVERS HAPPINESS TO SERIOUSLY ILL CHILDREN BY PROVIDING THEM A SENSE OF NORMALCY AND DISTRACTION FROM THE STRESS AND ANXIETY THAT OFTEN COMES WITH BEING A CHILD IN A HOSPITAL. EACH STARLIGHT GAMING STATION COMES PRE-LOADED WITH NINTENDO VIDEO GAMES AND STREAMING PLATFORMS FOR HOURS OF ENTERTAINMENT, BUT ALSO GIVES EACH CHILD A WAY TO CONNECT WITH FRIENDS AND SIBLINGS DURING THEIR HOSPITAL STAY.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,875,205. including grants of \$) (Revenue \$)

4e Total program service expenses 9,600,412.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements.

Part 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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

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]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 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?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website Another's website [X] Upon request Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
MIKE OLSON, CPA - (310) 426-0817
400 CORPORATE POINTE, SUITE 590, CULVER CITY, CA 90230

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ADAM GARONE CEO	40.00			X			353,031.	0.	21,253.	
(2) MIKE OLSON, CPA CFO	40.00			X			166,750.	0.	5,693.	
(3) ROSS MILLER CONTROLLER	40.00					X	125,520.	0.	12,095.	
(4) AIMEE FINN (STAFF) SR. DIRECTOR MCE	40.00					X	105,976.	0.	12,473.	
(5) CARA NATTERSON BOARD VICE CHAIR	1.00	X		X			0.	0.	0.	
(6) JOHN ROSENBERG BOARD CHAIR	1.00	X		X			0.	0.	0.	
(7) TROY YOUNG TREASURER (THRU 12/21)	1.00	X		X			0.	0.	0.	
(8) HOWARD COHL SECRETARY	1.00	X		X			0.	0.	0.	
(9) RUSS CASHDAN DIRECTOR (THRU 12/21)	1.00	X					0.	0.	0.	
(10) HENRY FIELDS DIRECTOR	1.00	X					0.	0.	0.	
(11) KIRA GOLDBERG DIRECTOR	1.00	X					0.	0.	0.	
(12) ERIC GRODAN DIRECTOR (THRU 12/21)	1.00	X					0.	0.	0.	
(13) ZAIN HABBOO DIRECTOR (THRU 07/21)	1.00	X					0.	0.	0.	
(14) DAVID HASPEL DIRECTOR (THRU 12/21)	1.00	X					0.	0.	0.	
(15) CHRIS HELFRICH DIRECTOR	1.00	X					0.	0.	0.	
(16) MARVIN LEVY DIRECTOR (THRU 12/21)	1.00	X					0.	0.	0.	
(17) PETER SAMUELSON DIRECTOR / CO-FOUNDER	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ALISA BOWEN DIRECTOR (AS OF 01/21)	1.00	X						0.	0.	0.
(19) RECHELLE PORTER DIRECTOR (AS OF 01/21)	1.00	X						0.	0.	0.
(20) SHAWN HARPEN DIRECTOR (AS OF 03/21)	1.00	X						0.	0.	0.
(21) DEBRA JOHNSON DIRECTOR (AS OF 03/21)	1.00	X						0.	0.	0.
1b Subtotal								751,277.	0.	51,514.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								751,277.	0.	51,514.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 4

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
STANDARD TEXTILE CO., INC ONE KNOLLCREST DRIVE, CINCINNATI, OH 45237 CARGO ZONE	MANUFACTURING OF STARLIGHT HOSPITAL WEAR	1,262,368.
6200 N 16TH ST, OMAHA, NE 68110	HANDLING, STORAGE, AND DISTRIBUTION DIST	1,023,375.
NINTENDO OF AMERICA 4600 150TH AVE NE, REDMOND, WA 98052	DESIGN AND MANUFACTURE OF STARLIGHT GAMI	382,737.
HALO BRANDED SOLUTIONS 3182 MOMENTUM PLACE, CHICAGO, IL 60689	MANUFACTURING OF STARLIGHT CARE PACKAGES	361,800.
SALESFORCE, 415 MISSION STREET, 3RD FLOOR, SAN FRANCISCO, CA 94105	CRM AND INVENTORY MANAGEMENT	126,443.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 7

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	553,340.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,367,576.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 3,300,281.			
	h	Total. Add lines 1a-1f		11,920,916.			
Program Service Revenue	2 a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		11,253.		11,253.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	6 b	Less: rental expenses					
	6 c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	7 b	Less: cost or other basis and sales expenses					
	7 c	Gain or (loss)					
d	Net gain or (loss)						
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
8 b	Less: direct expenses						
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19						
9 b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances		306,000.				
10 b	Less: cost of goods sold		0.				
c	Net income or (loss) from sales of inventory		306,000.	306,000.			
Miscellaneous Revenue	11 a	MISCELLANEOUS REVENUE	Business Code	900099	1,327.	1,327.	
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d			1,327.		
12	Total revenue. See instructions			12,239,496.	306,000.	0.	
						12,580.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	519,782.	250,758.	83,186.	185,838.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,673,260.	790,136.	290,204.	592,920.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	42,601.	20,552.	6,818.	15,231.
9 Other employee benefits	186,273.	88,843.	30,375.	67,055.
10 Payroll taxes	156,441.	75,472.	25,037.	55,932.
11 Fees for services (nonemployees):				
a Management				
b Legal	22,072.		22,072.	
c Accounting	38,350.		38,350.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	300.			300.
12 Advertising and promotion	480,420.	240,210.		240,210.
13 Office expenses	24,620.	4,922.	3,598.	16,100.
14 Information technology	217,016.	143,866.	30,210.	42,940.
15 Royalties				
16 Occupancy	151,187.	72,937.	24,196.	54,054.
17 Travel	7,737.	1,525.	1,584.	4,628.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	54,321.	100.		54,221.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	102,981.	55,314.	19,619.	28,048.
23 Insurance	18,941.		18,941.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DONATED MATERIALS	3,822,089.	3,822,089.		
b PROGRAM UNITS	2,813,578.	2,813,578.		
c PROGRAM DISTRIBUTION	1,027,467.	1,027,467.		
d PROGRAM CONSULTING	127,025.	127,025.		
e All other expenses	199,058.	65,618.	6,296.	127,144.
25 Total functional expenses. Add lines 1 through 24e	11,685,519.	9,600,412.	600,486.	1,484,621.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	8,147,331.	1	6,411,120.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	777,510.	3	1,794,846.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	5,218,846.	8	3,448,201.
	9 Prepaid expenses and deferred charges	775,789.	9	1,439,993.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 592,984.		
	b Less: accumulated depreciation	10b 262,205.	425,834.	10c 330,779.
	11 Investments - publicly traded securities		11	5,980.
	12 Investments - other securities. See Part IV, line 11		12	2,006,223.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)		15,345,310.	16	15,437,142.
Liabilities	17 Accounts payable and accrued expenses	862,102.	17	338,111.
	18 Grants payable		18	
	19 Deferred revenue	6,843.	19	28,600.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	273,816.	25	313,905.
	26 Total liabilities. Add lines 17 through 25	1,142,761.	26	680,616.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	8,489,943.	27	8,514,422.
	28 Net assets with donor restrictions	5,712,606.	28	6,242,104.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	14,202,549.	32	14,756,526.
	33 Total liabilities and net assets/fund balances	15,345,310.	33	15,437,142.

Part 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	12,239,496.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,685,519.
3	Revenue less expenses. Subtract line 2 from line 1	3	553,977.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,202,549.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	249,951.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-249,951.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	14,756,526.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2021)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,015,977.	16,876,173.	11,829,101.	9,579,837.	11,920,916.	61,222,004.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11,015,977.	16,876,173.	11,829,101.	9,579,837.	11,920,916.	61,222,004.
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)						37,308,473.
6 Public support. Subtract line 5 from line 4.						23,913,531.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	11,015,977.	16,876,173.	11,829,101.	9,579,837.	11,920,916.	61,222,004.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	125.	3,311.	46,627.	10,152.	11,253.	71,468.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	70,295.	102,426.	4,633.	254.	1,327.	178,935.
11 Total support. Add lines 7 through 10						61,472,407.
12 Gross receipts from related activities, etc. (see instructions)					12	816,766.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						►

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	38.90 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	38.31 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		►
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		►
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		►
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		►

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18 %

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Rows 11, 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2a, 2b, 3a, 3b.

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

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

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

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

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

Schedule A (Form 990) 2021

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

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

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

Schedule A (Form 990) 2021

Part VI

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

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

GROSS FUNDRAISING REVENUE

2017 AMOUNT: \$ 5,455.

2018 AMOUNT: \$ 92,407.

MISCELLANEOUS

2017 AMOUNT: \$ 64,840.

2018 AMOUNT: \$ 10,019.

2019 AMOUNT: \$ 4,633.

2020 AMOUNT: \$ 254.

2021 AMOUNT: \$ 1,327.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization STARLIGHT CHILDREN'S FOUNDATION
Employer identification number 95-3802159

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		14,708.	12,303.	2,405.
d Equipment		578,276.	249,902.	328,374.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				330,779.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENTS	2,006,223.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	2,006,223.	

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) WARRANTY RESERVE	264,054.
(3) DEFERRED RENT	49,851.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	313,905.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	12,489,447.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	249,951.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	249,951.
3	Subtract line 2e from line 1	3	12,239,496.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	12,239,496.

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

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

1	Total expenses and losses per audited financial statements	1	11,935,470.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	249,951.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	249,951.
3	Subtract line 2e from line 1	3	11,685,519.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	11,685,519.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER CODE SECTION

501(C)(3) PROVISIONS OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED

("IRC" OR "THE CODE") AND SIMILAR PROVISIONS OF THE STATE OF CALIFORNIA

REVENUE AND TAXATION CODES. THE FOUNDATION HAS ALSO BEEN CLASSIFIED AS AN

ENTITY THAT IS NOT A PRIVATE FOUNDATION WITHIN THE MEANING OF CODE SECTION

509(A) AND QUALIFIES FOR DEDUCTIBLE CONTRIBUTIONS AS PROVIDED IN CODE

SECTION 170(B)(1)(A)(VI). THE FOUNDATION EVALUATES ITS TAX PROVISIONS FOR

ANY POTENTIAL UNCERTAIN TAX POSITIONS. THE FOUNDATION BELIEVES ITS TAX

POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED IF CHALLENGED BY TAX

AUTHORITIES.

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) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part 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 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 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 Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified 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)* Yes 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)* Yes 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 (see Instructions for Form 5713; don't file with Form 990)* Yes No

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 3:

STARLIGHT CHILDREN'S FOUNDATION DOES NOT DIRECTLY MAINTAIN OFFICES,
EMPLOYEES OR AGENTS IN FOREIGN COUNTRIES. FOREIGN ACTIVITIES CONSIST OF
SALES OF GAMING STATIONS TO INDEPENDENT FOREIGN AFFILIATE
ORGANIZATIONS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **STARLIGHT CHILDREN'S FOUNDATION**
 Employer identification number: **95-3802159**

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Travel for companions Tax indemnification and gross-up payments Discretionary spending account Housing allowance or residence for personal use Payments for business use of personal residence Health or social club dues or initiation fees Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee Independent compensation consultant Form 990 of other organizations Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ADAM GARONE CEO	(i)	323,801.	28,426.	804.	8,362.	12,891.	374,284.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MIKE OLSON, CPA CFO	(i)	166,750.	0.	0.	5,400.	293.	172,443.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

THE BOARD DETERMINES DISCRETIONARY INCENTIVE PAYMENTS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization: **STARLIGHT CHILDREN'S FOUNDATION**
Employer identification number: **95-3802159**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (GAMES, TOYS,)	X	6	3,300,281.	FAIR MARKET VALUE
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

SCHEDULE M, PART I, COLUMN (B):

THIS NUMBER REFLECTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF ITEMS CONTRIBUTED.

Multiple horizontal lines for data entry.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

STARLIGHT CHILDREN'S FOUNDATION

Employer identification number

95-3802159

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

IN 2021, STARLIGHT LAUNCHED AN EDUCATION PROGRAM TO PROVIDE SCHOOL

SUPPLIES AND RESOURCES TO PATIENTS AND THEIR FAMILIES. FROM UNEXPECTED

INJURIES TO ONGOING TREATMENT FOR SEVERE ILLNESSES, EVEN A BRIEF

HOSPITALIZATION CAN CAUSE A CHILD TO MISS SCHOOL, IMPACTING THEIR

OVERALL MENTAL HEALTH AND EDUCATIONAL DEVELOPMENT. STARLIGHT EDUCATION

PROVIDES SUPPORT TO PEDIATRIC PATIENTS IN MULTIPLE WAYS, SUCH AS ONLINE

SCIENCE, TECHNOLOGY, ENGINEERING, ART, AND MATH (STEAM) COACHING,

OFFERING CHILDREN ONE-TO-ONE AND GROUP LESSONS, AND PROVIDING FREE

STARLIGHT SCHOOL SUPPLIES CONTAINING ESSENTIAL SCHOOL ITEMS, SUCH AS

BACKPACKS, NOTEBOOKS, COLORED PENCILS AND RULERS. ORDERS ARE RECEIVED

FROM HOSPITAL STAFF FOR THEIR PATIENTS IN NEED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

STARLIGHT EDUCATION:

STARLIGHT EDUCATION PROVIDES SCHOOL SUPPLIES AND RESOURCES TO PATIENTS

AND THEIR FAMILIES. FROM UNEXPECTED INJURIES TO ONGOING TREATMENT FOR

SEVERE ILLNESSES, EVEN A BRIEF HOSPITALIZATION CAN CAUSE A CHILD TO

MISS SCHOOL, IMPACTING THEIR OVERALL MENTAL HEALTH AND EDUCATIONAL

DEVELOPMENT. STARLIGHT EDUCATION PROVIDES SUPPORT TO PEDIATRIC PATIENTS

IN MULTIPLE WAYS, SUCH AS ONLINE STEAM COACHING, OFFERING CHILDREN

ONE-TO-ONE AND GROUP LESSONS, AND PROVIDING FREE STARLIGHT SCHOOL

SUPPLIES CONTAINING ESSENTIAL SCHOOL ITEMS, SUCH AS BACKPACKS,

NOTEBOOKS, COLORED PENCILS AND RULERS. ORDERS ARE RECEIVED FROM

HOSPITAL STAFF FOR THEIR PATIENTS IN NEED.

EXPENSES \$ 598,037. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization STARLIGHT CHILDREN'S FOUNDATION	Employer identification number 95-3802159
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STARLIGHT VIRTUAL REALITY:

THE FIRST GENERAL USE VR SOLUTION FOR PEDIATRIC SETTINGS WITH PATIENTS

13 YEARS OLD AND OVER, STARLIGHT VR COMES PRE-LOADED WITH 20+ CURATED

EXPERIENCES TO HELP ENTERTAIN AND DISTRACT CHILDREN DURING DIFFICULT

MEDICAL PROCEDURES.

EXPENSES \$ 254,421. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MISCELLANEOUS OTHER PROGRAM SERVICES:

STARLIGHT MISSION DELIVERY STAFF LABOR AND SOFTWARE COSTS RELATED TO

OPERATING THE STARLIGHT HUB INVENTORY ORDERING SYSTEM.

EXPENSES \$ 1,022,747. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE FOUNDATION'S STAFF WORKS CLOSELY WITH AN INDEPENDENT ACCOUNTING FIRM

ENGAGED TO PREPARE THE RETURN. THE FINAL DRAFT OF FORM 990 IS ALSO REVIEWED

BY THE CFO AND CEO. A COMPLETE COPY OF THE FINAL FORM 990 IS THEN REVIEWED

BY THE AUDIT COMMITTEE PRIOR TO IT BEING PROVIDED TO ALL VOTING BOARD

MEMBERS VIA EMAIL FOR REVIEW AND COMMENT PRIOR TO FILING WITH THE IRS.

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

THE CONFLICT OF INTEREST POLICY IS MONITORED BY THE OPERATIONS DEPARTMENT.

PURSUANT TO THE POLICY, ALL COVERED PERSONS (I.E., BOARD MEMBERS, OFFICERS,

EXECUTIVE LEADERSHIP AND OTHER EMPLOYEES), WHEN THEY BECOME A COVERED

PERSON AND ANNUALLY THEREAFTER, ARE REQUIRED TO SIGN A CONFLICT OF INTEREST

AND ETHICS ASSURANCE STATEMENT AFFIRMING THAT HE/SHE: HAS READ, UNDERSTANDS

AND AGREES TO COMPLY WITH THE CONFLICT OF INTEREST POLICY. ALL COVERED

PERSONS ARE ALSO REQUIRED TO COMPLETE AN ANNUAL QUESTIONNAIRE AIMED AT

Name of the organization STARLIGHT CHILDREN'S FOUNDATION	Employer identification number 95-3802159
---	--

IDENTIFYING ANY RELATED PARTY TRANSACTIONS THAT MAY POSE A POTENTIAL
 CONFLICT OF INTEREST. THE COMPLETED QUESTIONNAIRES ARE REVIEWED BY THE
 OPERATIONS DEPARTMENT. UNDER THE BYLAWS, RELATED PARTY TRANSACTIONS MAY BE
 APPROVED BY THE BOARD IF SPECIFIED STANDARDS ARE MET AND PROCEDURES
 FOLLOWED, INCLUDING FULL DISCLOSURE OF THE MATERIAL FACTS CONCERNING THE
 TRANSACTION, A MAJORITY VOTE WITHOUT COUNTING THE VOTE (AND OUTSIDE THE
 PRESENCE) OF THE INTERESTED PARTY AND A DETERMINATION BY THE BOARD IN GOOD
 FAITH THAT STARLIGHT CHILDREN'S FOUNDATION COULD NOT HAVE OBTAINED A MORE
 ADVANTAGEOUS ARRANGEMENT WITH REASONABLE EFFORT UNDER THE CIRCUMSTANCES.
 IN ADDITION, RELATED PARTY TRANSACTIONS MAY BE RATIFIED BY THE BOARD (OR A
 COMMITTEE OR PERSON AUTHORIZED BY THE BOARD) SUBJECT TO THE SAME STANDARDS
 AND PROCEDURAL PROTECTIONS WHEN IT IS NOT REASONABLY PRACTICABLE TO OBTAIN
 BOARD APPROVAL IN ADVANCE. SUCH APPROVAL IS NOT REQUIRED FOR EMPLOYMENT
 AGREEMENTS OR FOR REIMBURSEMENT OF DIRECTORS OR OFFICERS FOR LEGAL FEES AND
 EXPENSES REASONABLY INCURRED IN THE PERFORMANCE OF THEIR OBLIGATIONS OR FOR
 INDEMNIFICATION PERMITTED UNDER THE BYLAWS.

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

THE COMPENSATION COMMITTEE OF THE BOARD, NO MEMBER OF WHICH HAS A CONFLICT
 OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT, WAS ACCOUNTABLE
 FOR SETTING A REASONABLE COMPENSATION PACKAGE FOR THE CEO AND CFO. THE
 COMPENSATION COMMITTEE DEVELOPED, CONSISTENT WITH THE FOUNDATION'S
 PHILOSOPHY AND PRINCIPLES, THE ANNUAL PERFORMANCE GOALS AND CRITERIA TO BE
 USED IN DETERMINING MERIT INCREASES AND VARIABLE COMPENSATION CRITERIA FOR
 THE CEO AND CFO. FOR 2021, UNDER THE EXISTING CEO CONTRACT, THE
 COMPENSATION COMMITTEE ALSO REVIEWED APPROPRIATE PUBLICLY AVAILABLE
 COMPARABILITY DATA PREPARED BY AN INDEPENDENT ENTITY THAT UTILIZED NATIONAL
 NONPROFIT COMPENSATION SURVEYS IN DETERMINING THE CEO'S COMPENSATION. THE

Name of the organization STARLIGHT CHILDREN'S FOUNDATION	Employer identification number 95-3802159
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COMPENSATION COMMITTEE'S WRITTEN RECORDS INCLUDE THE (1) TERMS OF THE ARRANGEMENT WITH THE CEO; AND (2) A DESCRIPTION OF THE COMPARABLE DATA RELIED ON BY THE COMMITTEE. KEY DELIBERATIONS OF THE COMMITTEE, INCLUDING:

(A) THE TERMS OF THE TRANSACTION THAT WAS APPROVED AND THE DATE IT WAS APPROVED; (B) THE MEMBERS OF THE COMPENSATION COMMITTEE WHO WERE PRESENT DURING DEBATE ON THE TRANSACTION THAT WAS APPROVED AND THOSE WHO VOTED ON IT; (C) THE COMPARABILITY DATA OBTAINED AND RELIED UPON BY THE COMPENSATION COMMITTEE; AND (D) ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE TRANSACTION BY ANYONE WHO IS OTHERWISE A MEMBER OF THE COMPENSATION COMMITTEE BUT WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE TRANSACTION ARE ALSO DOCUMENTED IN WRITING.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
CA, AL, AK, AR, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NV, NY
NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 18:
THE ORGANIZATION'S FORM 990 IS POSTED ON THE ORGANIZATION'S WEBSITE. THE FORM 990 AND FORM 1023 ARE ALSO AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:
THE FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE. THE GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
DONATED PROFESSIONAL SERVICES REVENUE EXCLUDED FROM TAX

RETURN -249,951.

Name of the organization STARLIGHT CHILDREN'S FOUNDATION	Employer identification number 95-3802159
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FORM 990, PART XII, LINE 2C:

AUDIT COMMITTEE - THE BOARD OF DIRECTORS HAS CONSTITUTED AN AUDIT

COMMITTEE WITH THE RESPONSIBILITY FOR RECOMMENDING TO THE BOARD THE

RETENTION OF THE INDEPENDENT AUDITORS AND SUPERVISING THE EXTERNAL

AUDIT.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	1 SWITCH	01/22/13	SL	5.00		16	3,014.				3,014.	3,014.		0.	3,014.
2	4/13 NETWORK SERVICES UPGRADE	05/01/13	SL	3.00		16	4,360.				4,360.	4,360.		0.	4,360.
3	DIRECT SWITCH	07/01/13	SL	3.00		16	3,070.				3,070.	3,070.		0.	3,070.
4	SERVER	11/01/13	SL	3.00		16	7,503.				7,503.	7,503.		0.	7,503.
5	SERVER	01/01/15	SL	3.00		16	7,503.				7,503.	7,503.		0.	7,503.
6	SWITCH, TRANSCEIVER, WIRELESS ACCESS	01/01/15	SL	5.00		16	2,793.				2,793.	2,793.		0.	2,793.
7	NEW PHONE SYSTEM	06/01/15	SL	5.00		16	13,455.				13,455.	13,455.		0.	13,455.
8	DIGITAL CAMERA W/ EQUIPT. & ACCESSORIES	12/07/16	SL	3.00		16	2,664.				2,664.	2,664.		0.	2,664.
9	LENOVO IDEA-CENTRE Y900 COMPUTER FOR VR	03/01/17	SL	5.00		16	2,080.				2,080.	1,595.		416.	2,011.
10	HTC VIVE VR	03/01/17	SL	3.00		16	870.				870.	870.		0.	870.
11	LENOVO THINKPAD LAPTOP - MIKE	05/01/20	SL	3.00		16	1,653.				1,653.	367.		551.	918.
12	CABLING CULVER CITY OFFICE	04/01/17	SL	5.67		16	7,454.				7,454.	4,933.		1,315.	6,248.
13	REFRIGERATOR	04/21/17	SL	5.00		16	1,344.				1,344.	1,008.		269.	1,277.
14	CULVER CITY OFFICE RENOVATION	04/01/17	SL	5.67		16	6,215.				6,215.	4,113.		1,096.	5,209.
15	OFFICE BLINDS FOR CULVER CITY OFFICE	01/01/18	SL	4.92		16	1,038.				1,038.	633.		211.	844.
16	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	12,867.				12,867.	3,523.		1,838.	5,361.
17	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	9,544.				9,544.	2,613.		1,363.	3,976.
18	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	7,348.				7,348.	2,012.		1,050.	3,062.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	2,030.				2,030.	556.		290.	846.
20	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	8,391.				8,391.	2,298.		1,199.	3,497.
21	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	2,438.				2,438.	668.		348.	1,016.
22	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	9,330.				9,330.	2,555.		1,333.	3,888.
23	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	16,514.				16,514.	4,522.		2,359.	6,881.
24	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	4,004.				4,004.	1,096.		572.	1,668.
25	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	2,096.				2,096.	574.		299.	873.
26	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	6,663.				6,663.	1,824.		952.	2,776.
27	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	11,584.				11,584.	3,172.		1,655.	4,827.
28	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	1,881.				1,881.	515.		269.	784.
29	HAWORTH FURNITURE CO 2019	02/28/19	SL	7.00		16	8,424.				8,424.	2,306.		1,203.	3,509.
30	SALESFORCE	03/01/20	SL	5.00		16	39,450.				39,450.	6,575.		7,890.	14,465.
31	SALESFORCE	03/01/20	SL	5.00		16	39,450.				39,450.	6,575.		7,890.	14,465.
32	SALESFORCE	03/01/20	SL	5.00		16	28,288.				28,288.	4,715.		5,658.	10,373.
33	SALESFORCE	03/01/20	SL	5.00		16	68,700.				68,700.	11,450.		13,740.	25,190.
34	MACBOOK PRO	03/01/20	SL	3.00		16	1,873.				1,873.	520.		624.	1,144.
35	SALESFORCE	03/01/20	SL	5.00		16	37,675.				37,675.	6,279.		7,535.	13,814.
36	SALESFORCE	04/01/20	SL	5.00		16	1,663.				1,663.	249.		333.	582.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
37	WEBSITE	01/01/20	SL	5.00		16	163,125.				163,125.	32,625.		32,625.	65,250.
38	WEBSITE	02/01/20	SL	5.00		16	3,263.				3,263.	598.		653.	1,251.
39	WEBSITE	03/01/20	SL	5.00		16	3,825.				3,825.	638.		765.	1,403.
40	WEBSITE	03/01/20	SL	5.00		16	855.				855.	143.		171.	314.
41	WEBSITE	04/01/20	SL	5.00		16	6,863.				6,863.	1,029.		1,373.	2,402.
42	WEBSITE	05/01/20	SL	5.00		16	450.				450.	60.		90.	150.
43	WEBSITE	08/01/20	SL	5.00		16	2,813.				2,813.	234.		563.	797.
44	WEBSITE	08/01/20	SL	5.00		16	4,388.				4,388.	366.		878.	1,244.
45	WEBSITE	11/01/20	SL	5.00		16	1,125.				1,125.	38.		225.	263.
46	WEBSITE	04/01/21	SL	5.00		16	1,823.				1,823.			273.	273.
49	SALESFORCE	08/01/20	SL	5.00		16	13,122.				13,122.	1,015.		2,624.	3,639.
50	LENOVO PC	09/01/21	SL	3.00		16	1,157.				1,157.			129.	129.
51	MACBOOK PRO	10/01/21	SL	3.00		16	1,918.				1,918.			160.	160.
52	LENOVO PC	11/01/21	SL	3.00		16	1,149.				1,149.			64.	64.
53	MACBOOK PRO	12/01/21	SL	3.00		16	1,876.				1,876.			52.	52.
54	TRUE UP	01/01/21	SL	1.00		16	78.				78.			78.	78.
	* TOTAL 990 PAGE 10 DEPR						593,059.				593,059.	159,224.		102,981.	262,205.

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						585,058.			0.	585,058.	159,224.			261,449.
	ACQUISITIONS						8,001.			0.	8,001.	0.			756.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						593,059.			0.	593,059.	159,224.			262,205.
	ENDING ACCUM DEPR											262,205.			
	ENDING BOOK VALUE											330,854.			