

Intuit Electronic Postmark Report for Tax Year 2022

Client: THE ELM FOUNDATION
Client EIN: **_***1239
Preparer: JERRY MERCER, CPA
Type: 990PF Federal
Return Submitted: September 11, 2023, 09:48 A -05:00
Return Acceptance Date: 09/11/2023
First Extension Submitted: May 11, 2023, 02:12 P -05:00
First Extension Acceptance Date: 05/11/2023
Amended Return Submitted:
Amended Return Acceptance Date:

Certification of Electronic Filing Submission

The Intuit Electronic Postmark is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal business income tax return/extension. This information should be kept along with the tax return/extension as an official filing record.

There are two important aspects of the Intuit Electronic Postmark:

1. The Intuit Electronic Postmark.

The electronic postmark shows the date and time Intuit received the federal return/extension, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal business income tax return/extension.

Timely Filing:

A federal business income tax return/extension must be postmarked by midnight, of its due date, for the IRS to consider it timely filed. Intuit issues the electronic postmark in the Pacific Time Zone. In general, the Intuit Electronic Postmark time must be adjusted to the electronic return originator's (ERO) Local Time Zone. For example, if the ERO is located in the Eastern Time Zone, add three (3) hours to the Intuit Electronic Postmark time to determine the actual postmark time.

If the federal tax return/extension is rejected, the IRS will still consider it timely filed if the electronic postmark is on or before its due date, and a corrected return/extension is submitted electronically within 5 business days of the due date, and is then accepted. If the taxpayer requests an automatic extension of time to file, the return must be electronically postmarked by midnight of the extended due date, for the IRS to consider it timely filed.

If the extended federal tax return is rejected, the IRS will still consider it timely filed if the electronic postmark is on or before the first or second extended due date, respectively, and the corrected return is electronically submitted within 5 days of the extended due date, respectively, and then accepted.

2. The Acceptance Date.

Once the IRS accepts the electronically filed return/extension, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return/extension.

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20

2022

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

THE ELM FOUNDATION

EIN or SSN

46-0921239

Name and title of officer or person subject to tax

RYAN LINDOW, PRESIDENT

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here <input checked="" type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b 0.
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize MERCER & ASSOCIATES, PC to enter my PIN

as my signature
Enter five numbers, but do not enter all zeros

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date 05/11/2023

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date 08/04/2023

**ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2022

Open to Public Inspection

For calendar year 2022 or tax year beginning _____, **2022, and ending** _____, **20**

Name of foundation THE ELM FOUNDATION		A Employer identification number 46-0921239
Number and street (or P.O. box number if mail is not delivered to street address) 7501 MEMORIAL PARKWAY SW	Room/suite SUITE 115	B Telephone number (see instructions) 2562177141
City or town, state or province, country, and ZIP or foreign postal code HUNTSVILLE AL 35802		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 939,252.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	363,896.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	265.	265.	265.	
	4 Dividends and interest from securities	6,475.	6,475.	6,475.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	101,311.	L-6a Stmt		
	b Gross sales price for all assets on line 6a 195,000.				
	7 Capital gain net income (from Part IV, line 2)		101,311.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) See Stmt	-25,587.	-25,587.	0.		
12 Total. Add lines 1 through 11	446,360.	82,464.	6,740.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages	147,082.	29,416.	29,416.	0.
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,547.	909.	909.	0.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) See Stmt	13,723.	3,716.	3,716.	0.
	19 Depreciation (attach schedule) and depletion	1,325.	1,036.	1,325.	
	20 Occupancy	30,157.	0.	0.	0.
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Stmt	49,711.	32,150.	31,044.	0.
	24 Total operating and administrative expenses. Add lines 13 through 23	246,545.	67,227.	66,410.	0.
	25 Contributions, gifts, grants paid	87,722.			87,722.
26 Total expenses and disbursements. Add lines 24 and 25	334,267.	67,227.	66,410.	87,722.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	112,093.				
b Net investment income (if negative, enter -0-)		15,237.			
c Adjusted net income (if negative, enter -0-)			0.		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	413,704.	630,901.	630,901.
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	0.	2,231.	2,231.
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) L-10b Stmt	354,152.	306,120.	306,120.
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis			
Less: accumulated depreciation (attach schedule)	63,840.	0.	0.	
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment: basis L-4 Stmt	7,520.			
Less: accumulated depreciation (attach schedule)	7,520.	0.	0.	
15 Other assets (describe)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	831,696.	939,252.	939,252.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)	5,515.	2,475.	
	23 Total liabilities (add lines 17 through 22)	5,515.	2,475.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	826,181.	936,777.	
29 Total net assets or fund balances (see instructions)	826,181.	936,777.		
30 Total liabilities and net assets/fund balances (see instructions)	831,696.	939,252.		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	826,181.
2 Enter amount from Part I, line 27a		2	112,093.
3 Other increases not included in line 2 (itemize)		3	
4 Add lines 1, 2, and 3		4	938,274.
5 Decreases not included in line 2 (itemize) PRIOR PERIOD ADJUSTMENT		5	1,497.
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29		6	936,777.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	VAN BUREN BUILDING	P	04/18/2014	07/15/2022
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a	195,000.	114,037.	101,311.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(j) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			101,311.	
b				
c				
d				
e				
2	Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$		2	101,311.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		3	

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)	1	212.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0.
3	Add lines 1 and 2	3	212.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	212.
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	212.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded	11	

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ _____ (2) On foundation managers. \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	X	
14 The books are in care of <u>AARON BIGGS</u> Telephone no. <u>(256) 348-2514</u> Located at <u>2500 QUAIL RIDGE LANE HUNTSVILLE AL</u> ZIP+4 <u>35803</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15 _____		
16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)	X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(6)	X
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022?	1d	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022?	2a	X
If "Yes," list the years 20 ____ , 20 ____ , 20 ____ , 20 ____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 ____ , 20 ____ , 20 ____ , 20 ____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b	X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	X	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		X
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN ANTHONY NOLAN, III 9629 WALDROP DRIVE SE HUNTSVILLE AL 35803	BOARD CHAIR 2.00	0.	0.	0.
RYAN JOHN LINDOW 7805 WHITTIER ROAD HUNTSVILLE AL 35802	BOARD PRESIDENT 2.00	0.	0.	0.
JENNIE ROBINSON 9412 DONS COURT HUNTSVILLE AL 35803	SECRETARY 2.00	0.	0.	0.
See Statement	8.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MISSY HANKS 6515 WHITESBURG DRIVE HUNTSVILLE AL 35802	EXECUTIVE DIRECTOR 40.00	65,812.	0.	0.

Total number of other employees paid over \$50,000 1

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1	DEVELOPMENT - RECIPIENTS RECEIVED TUITION AND BOOK ASSISTANCE AS WELL AS WORK RELATED TRAINING	22,138.
2	RECOVERY - RECIPIENTS RECEIVED GRANTS FOR HOUSING, MEDICAL BILLS, UTILITIES AND OTHER EXPENSES	2,383.
3	SEE ATTACHED STATEMENT	63,200.
4		

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	0.
2		
3	All other program-related investments. See instructions.	
Total. Add lines 1 through 3		0.

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	316,796.
b	Average of monthly cash balances	1b	702,402.
c	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	1,019,198.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,019,198.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	15,288.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	1,003,910.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	50,196.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2022 from Part V, line 5	2a	
b	Income tax for 2022. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	87,722.
b	Program-related investments—total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	87,722.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2022:				
a From 2017	0.			
b From 2018	146,918.			
c From 2019	117,856.			
d From 2020	78,970.			
e From 2021	91,887.			
f Total of lines 3a through e	435,631.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 87,722.				
a Applied to 2021, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2022 distributable amount				
e Remaining amount distributed out of corpus	87,722.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	523,353.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	523,353.			
10 Analysis of line 9:				
a Excess from 2018	146,918.			
b Excess from 2019	117,856.			
c Excess from 2020	78,970.			
d Excess from 2021	91,887.			
e Excess from 2022	87,722.			

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	0.	0.	0.	0.	0.
b 85% (0.85) of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XI, line 4, for each year listed	87,722.	91,887.	78,970.	117,856.	376,435.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	87,722.	91,887.	78,970.	117,856.	376,435.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets	939,252.	831,697.	619,596.	606,869.	2,997,414.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	939,252.	831,697.	619,596.	606,869.	2,997,414.
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

See Supplementary Information Statement

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
CHRISTOPHER ALLEN 28630 BETHEL ROAD TONEY AL 35773		I	EDUCATION ASSISTANCE	2,250.
ROBIN ALLEN 335 W 5TH SOUTH REXBURG ID 83440		I	EDUCATIONAL ASSISTANCE	3,600.
JENNIFER ALSTON 316 WEST TOMBIGBEE ST #7 FLORENCE AL 35630		I	EDUCATIONAL ASSISTANCE	4,042.
CHRISANDREW LEWIS 243 S 1ST E REXBURG ID 83440		I	EDUCATIONAL ASSISTANCE	4,110.
ANUM SHAHID 55-220 KULANUI ST LAIE HI 96762		I	EDUCATIONAL ASSISTANCE	680.
BELLE BAYALKAGMAA 7501 MEMORIAL PARKWAY SW HUNTSVILLE AL 35802		I	EDUCATIONAL ASSISTANCE	35.
ISAIAH BLUE 110 HAZELCREST ROAD HAZEL GREEN AL 35750		I	EDUCATIONAL ASSISTANCE	5,500.
DIEGO CARDENAS 355 WEST 1330 NORTH LOGAN UT 84314		I	EDUCATIONAL ASSISTANCE	4,895.
JACKEY CHIBATAKA 7501 MEMORIAL PARKWAY SW HUNTSVILLE AL 35802		I	EDUCATIONAL ASSISTANCE	2,050.
See Statement				60,560.
Total				3a 87,722.
b Approved for future payment				
Total				3b

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a _____					
b <u>N/A</u>					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					265.
4 Dividends and interest from securities					6,475.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					100,664.
9 Net income or (loss) from special events					27,631.
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a <u>UNREALIZED GAIN ON INVESTMENT</u>					-58,193.
b <u>REALIZED GAIN ON INVESTMENT</u>					4,975.
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)					81,817.
13 Total. Add line 12, columns (b), (d), and (e)				13	81,817.

(See worksheet in line 13 instructions to verify calculations.)

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

5 SEE STATEMENT

3 SEE STATEMENT

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of:
 - (1) Cash 1a(1) Yes No
 - (2) Other assets 1a(2) Yes No
 - b** Other transactions:
 - (1) Sales of assets to a noncharitable exempt organization 1b(1) Yes No
 - (2) Purchases of assets from a noncharitable exempt organization 1b(2) Yes No
 - (3) Rental of facilities, equipment, or other assets 1b(3) Yes No
 - (4) Reimbursement arrangements 1b(4) Yes No
 - (5) Loans or loan guarantees 1b(5) Yes No
 - (6) Performance of services or membership or fundraising solicitations 1b(6) Yes No
 - c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c Yes No
 - d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: *[Handwritten Signature]* Date: _____ Title: **PRESIDENT**

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

Paid Preparer Use Only

Print/Type preparer's name JERRY MERCER, CPA	Preparer's signature <i>[Handwritten Signature]</i>	Date 08/04/2023	Check <input type="checkbox"/> if self-employed	PTIN P01050742
Firm's name MERCER & ASSOCIATES PC	Firm's EIN 63-0812228	Firm's address 201 WILLIAMS AVENUE SUITE 280 HUNTSVILLE AL 35801	Phone no. (256) 536-4318	

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. Continuation Statement

Name and Address Information	Form Information	Submission Information	Restrictions
MISSY HANKS, CASE MANAGER 6515 WHITESBURG DR. HUNTSVILLE, AL 35802	SEE STATEMENT	SEE STATEMENT	SEE STATEMENT

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TAGRO BOLOU CYRILL 328 W 2ND S #3 REXBURG, ID 83440		I	EDUCATIONAL ASSISTANCE	16,195.
SCOTT DAVIS 6416 S 1650 E SALT LAKE CITY, UT 84121		I	EDUCATIONAL ASSISTANCE	1,763.
JAYLA GRAY PO BOX 361 MADISON, AL 35758		I	EDUCATIONAL ASSISTANCE	4,840.
MOSES GUNGUNYANE 7501 MEMORIAL PARKWAY SW HUNTSVILLE, AL 35802		I	EDUCATIONAL ASSISTANCE	3,189.
ALGERNON HALE 55-220 KULANUI ST LAIE, HI 76762		I	EDUCATIONAL ASSISTANCE	50.
ROBERT HILL 2911 MERIDIAN STREET HUNTSVILLE, AL 35811		I	EDUCATIONAL ASSISTANCE	283.
MORRIS HINNEH 291 E 7TH S #707 REXBURG, ID 83440		I	EDUCATIONAL ASSISTANCE	3,500.
ADAM JOHNSON 1771 S LAURELHURST DR, APT A SALT LAKE CITY, UT 84108		I	EDUCATIONAL ASSISTANCE	7,630.
ASLEY LOPEZ-VARGAS 7414 CADILLAC DRIVE HUNTSVILLE, AL 35802		I	EDUCATIONAL ASSISTANCE	5,060.
GINA MASDEN 7501 MEMORIAL PARKWAY SW HUNTSVILLE, AL 35802		I	EDUCATIONAL ASSISTANCE	4,000.
JORDAN REDD 707 S 5TH W #4100 REXBURG, ID 83440		I	EDUCATIONAL ASSISTANCE	3,034.
JESSICA SPIEWALK 2609 ROCKWELL ROAD NW HUNTSVILLE, AL 35810		I	EDUCATIONAL ASSISTANCE	5,500.
LATREICE WASHINGTON 2609 ACADEMY DRIVE HUNTSVILLE, AL 35811		I	EDUCATIONAL ASSISTANCE	2,100.
CHALK 55-220 KULANUI STREET LAIE, HI 96762		I	EDUCATIONAL ASSISTANCE	1,844.
CHEANG LO WANG 55-220 KULANUI STREET LAIE, HI 96762		I	EDUCATIONAL ASSISTANCE	739.

a. Paid during the year

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a. Paid during the year</i>				
MBULI LINDOKUHLE 55-220 KULANUI STREET LAIE, HI 96762		I	EDUCATIONAL ASSISTANCE	833.
				60,560.

Form 990-PF: Return of Private Foundation

Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors Continuation Statement

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
AARON BIGGS 2500 QUAIL RIDGE LANE HUNTSVILLE, AL 35803	TREASURER 2.00	0.	0.	0.
HELEN CONWAY NOLAN 9629 WALDROP DRIVE SE HUNTSVILLE, AL 35803	VICE PRESIDENT 2.00	0.	0.	0.
DONNA MESSERVY 3046 FLINT MILL RUN OWENS CROSS ROADS, AL 35763	DIRECTOR 2.00	0.	0.	0.
ALEXIS LINDOW 7805 WHITTIER ROAD HUNTSVILLE, AL 35802	DIRECTOR 2.00	0.	0.	0.
		0.	0.	0.

Additional Information From Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
UNREALIZED GAINS ON INVESTMENT	-58,193.	-58,193.	0.
REALIZED LOSS ON INVESTMENT	4,975.	4,975.	0.
FUNDRAISING	27,631.	27,631.	0.
Total	-25,587.	-25,587.	0.

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
PAYROLL TAXES	11,260.	3,716.	3,716.	0.
TAXES AND LICENSES	2,463.	0.	0.	0.
Total	13,723.	3,716.	3,716.	0.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
INSURANCE	1,106.	1,106.	0.	0.
MEMBERSHIP DUES	1,058.	0.	0.	0.
MISCELLANEOUS	1,768.	0.	0.	0.
OFFICE EXPENSE	14,735.	0.	0.	0.
PROFESSIONAL DEVELOPMENT	7,086.	7,086.	7,086.	0.
REPAIRS AND MAINTENANCE	469.	469.	469.	0.
INVESTMENT FEES	1,288.	1,288.	1,288.	0.
FUNDRAISING EXPENSE	9,207.	9,207.	9,207.	0.
BRANDING EXPENSE	12,994.	12,994.	12,994.	0.
Total	49,711.	32,150.	31,044.	0.

Form 990-PF: Return of Private Foundation

Part X, Line 4, Cash Deemed Held For Charitable Activities

Explanation Statement

Cash Deemed Charitable

CASH DEEMED HELD FOR CHARITABLE ACTIVITIES

THE ELM FOUNDATION MAINTAINS AN OPERATING BANK ACCOUNT AT SOUTH STATE BANK BANK TO ORDERLY AND TIMELY PAY FOR THE NORMAL OPERATING EXPENSES OF THE FOUNDATION; BUT, ALSO TO PROVIDE SUFFICIENT CASH RESOURCES TO FUND THE MAINTENANCE AND REPAIR OF AFFORDABLE HOUSING FOR DESERVING INDIVIDUALS.

THE BANK ACCOUNTS, WHICH HAD A RECONCILED BALANCE OF \$413,704 AT DECEMBER 31, 2021, IS NOT MAINTAINED AS AN INVESTMENT VEHICLE, BUT THE ACCOUNT DOES EARN A MINIMAL INVESTMENT RETURN OF .25% TO HELP DEFRAY THE OPERATING COSTS OF MAINTAINING THE ACCOUNT.

Name
THE ELM FOUNDATION

Employer Identification No.
46-0921239

Asset Information:

Description of Property VAN BUREN BUILDING
 Business Code _____ Exclusion Code _____
 Date Acquired 04/18/14 How Acquired Purchased
 Date Sold 07/15/22 Name of Buyer PANDA LEAH SMITH
 Check Box, if Buyer is a Business
 Sales Price 195,000. Cost or other basis (do not reduce by depreciation) 114,037.
 Sales Expense _____ Valuation Method Fair Market Value
 Total Gain (Loss) 101,311. Accumulated Depreciation 20,348.

Description of Property _____
 Business Code _____ Exclusion Code _____
 Date Acquired _____ How Acquired _____
 Date Sold _____ Name of Buyer _____
 Check Box, if Buyer is a Business
 Sales Price _____ Cost or other basis (do not reduce by depreciation) _____
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) _____ Accumulated Depreciation _____

Description of Property _____
 Business Code _____ Exclusion Code _____
 Date Acquired _____ How Acquired _____
 Date Sold _____ Name of Buyer _____
 Check Box, if Buyer is a Business
 Sales Price _____ Cost or other basis (do not reduce by depreciation) _____
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) _____ Accumulated Depreciation _____

Description of Property _____
 Business Code _____ Exclusion Code _____
 Date Acquired _____ How Acquired _____
 Date Sold _____ Name of Buyer _____
 Check Box, if Buyer is a Business
 Sales Price _____ Cost or other basis (do not reduce by depreciation) _____
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) _____ Accumulated Depreciation _____

Description of Property _____
 Business Code _____ Exclusion Code _____
 Date Acquired _____ How Acquired _____
 Date Sold _____ Name of Buyer _____
 Check Box, if Buyer is a Business
 Sales Price _____ Cost or other basis (do not reduce by depreciation) _____
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) _____ Accumulated Depreciation _____

Totals:

Total Gain (Loss) of all assets 101,311.
 Gross Sales Price of all assets 195,000.
 Unrelated Business Income _____ Business Code _____
 Excluded by section 512, 513, 514 _____ Exclusion Code _____
 Related/Exempt Function Income 101,311.

QuickZoom here to Form 990-PF, Page 1 ►
QuickZoom here to Form 990-PF, Page 12 ►

Name THE ELM FOUNDATION	Employer Identification No. 46-0921239
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Line 10a - Investments - US and State Government Obligations:	End of Year		End of Year	
	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a				

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
COMMUNITY FOUNDATION	306,120.	306,120.
Totals to Form 990-PF, Part II, Line 10b	306,120.	306,120.

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 10c		

Line 12 - Investments - Mortgage loans:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 12		

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 13		

Investments'
Land, Buildings, and Equipment

Name THE ELM FOUNDATION	Employer Identification No. 46-0921239
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Line 11b - Description of Investments Land, Buildings and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Totals to Form 990-PF, Part II, Line 11			

Land, Buildings, and Equipment

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAPTOP COMPUTER	673.	673.	0.
12 CHAIRS	777.	777.	0.
LAPTOP COMPUTER	432.	432.	0.
LAPTOP COMPUTER & CASE	398.	398.	0.
COMPUTER SOFTWARE	1,870.	1,870.	0.
8 TABLES	491.	491.	0.
CONFERENCE ROOM FURNITURE	448.	448.	0.
3 LAPTOPS AND CASES	1,243.	1,243.	0.
PROTECTIVE SOFTWARE	249.	249.	0.
FOLDING CHAIRS	564.	564.	0.
TV	375.	375.	0.
Totals to Form 990-PF, Part II, Line 14	7,520.	7,520.	0.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

Employer identification number

THE ELM FOUNDATION

46-0921239

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test...
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor...
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor...

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

Name of organization THE ELM FOUNDATION	Employer identification number 46-0921239
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALISON MOSCA-FIDELITY CHARITABLE 26 PATRIOT PLACE # 301 FOXBORO MA 02035	\$ 14,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	TENNESSEE VALLEY AUTHORITY 4950 CORPORATE DRIVE NW HUNTSVILLE AL 35805	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	JOHN AND HELEN NOLAN 9629 WALDROP DRIVE SE HUNTSVILLE AL 35803	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	MIKE BALL 105 CANTEBURY CIRCLE MADISON AL 35758	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	SIMON SOLUTIONS 623 S SEMINARY STREET FLORENCE AL 35630	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	CINTEL GIVES 4100 MARKET STREET SUITE 115 HUNTSVILLE AL 35808	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE ELM FOUNDATION	Employer identification number 46-0921239
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	REDSTONE FEDERAL CREDIT UNION 200 DAVIS CIRCLE HUNTSVILLE AL 35801	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	JOYCE HILL 103.5 MARINE STREET SAINT AUGUSTINE FL 32084	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE ELM FOUNDATION	Employer identification number 46-0921239
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----
	----- ----- ----- -----	\$ -----	-----

Name of organization THE ELM FOUNDATION	Employer identification number 46-0921239
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Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ _____*
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

Form 990-PF, p7: Part VIIIA, Description 3-1

ELM EDUCATION GRANTS - EDUCATIONAL GRANTS MAY BE USED TO MEET AND FUND GAPS FOR DEGREE PROGRAMS AT TWO AND FOUR YEAR COLLEGES AS WELL AS FOR TRADE CERTIFICATION AND ARE NOT LIMITED TO TUITION ASSISTANCE. EDUCATIONAL GRANTS MAY BE USED TO FUND BOOKS, SUPPLIES, HOUSING AND LIVING EXPENSES ONCE ALL OTHER SCHOLARSHIP, GRANTS, AND AID ARE APPLIED.

Form 990-PF,p10: Part XIV, Line 2b-1

FORM AND CONTENT OF APPLICATIONS

COMPLETION OF THE EDUCATIONAL GRANT INFORMATION SHEET, FAFSA/PELL GRANT APPLICATION, AND 2 LETTERS OF RECOMMENDATION FROM AN EMPLOYER, FACULTY MEMBER OR OTHER UNRELATED PROFESSIONAL PERSON MUST BE SUBMITTED. INFORMATION SHEET INCLUDES PERSONAL INFORMATION SUCH AS NAME, ADDRESS, DATE OF BIRTH, EDUCATION HISTORY, CAREER GOALS, REASONS FOR APPLICATION AND CURRENT EMPLOYMENT STATUS.

Form 990-PF,p10: Part XIV, Line 2c-1

ANY SUBMISSION DEADLINES

REFERRALS ARE ACCEPTED ALL YEAR LONG. GRANTS ARE AWARDED BASED ON AVAILABLE FUNDING.

Form 990-PF,p10: Part XIV, Line 2d-1

RESTRICTIONS AND LIMITATIONS ON AWARDS

ELM EDUCATION GRANTS MAY BE USED TO MEET ANY FUNDING GAPS FOR DEGREE PROGRAMS AT 2 YEAR AND 4 YEAR COLLEGES AS WELL AS FOR TRADE CERTIFICATION AND ARE NOT LIMITED TO TUITION ASSISTANCE. GRANTS MAY BE USED TO FUND HOUSING AND LIVING EXPENSES ONCE ALL OTHER SCHOLARSHIPS, GRANTS AND AID ARE APPLIED.

Form 990-PF,p12: Part XV-B, Description-1

REDUCED RENT ALLOWS THE RECIPIENTS TO MOVE FROM SUBSTANDARD HOUSING. IT ALSO DEVELOPS A SENSE OF INDEPENDENCE AND TEACHES FINANCIAL RESPONSIBILITY THAT WILL ALLOW THE INDIVIDUAL TO MOVE THROUGH THE PROCESS AND LATER HELP OTHER INDIVIDUALS WHO ARE EXPERIENCING SIMILAR HARDSHIPS.

Form 990-PF,p12: Part XV-B, Description-1

REDUCED RENT ALLOWS THE RECIPIENTS TO MOVE FROM SUSTANDARD HOUSING. IT ALSO DEVELOPS A SENSE OF INDEPENDENCE AND TEACHES FINANCIAL RESPONSIBILITY THAT WILL ALLOW THE INDIVIDUAL TO MOVE THROUGH THE PROCESS AND LATER HELP OTHER INDIVIDUALS WHO ARE EXPERIENCING SIMILAR HARDSHIPS.