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.

DLN: 93493046028512 OMB No. 1545-0047

> Open to Public Inspection

Department of the Internal Revenue Service For the 2020 calendar year, or tax year beginning 01-01-2020 , and ending 12-31-2020 D Employer identification number B Check if applicable: NAOMI'S VILLAGE INC ☐ Address change 45-5242323 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 270057 ☑ Amended return □ Application pending (214) 886-1371 City or town, state or province, country, and ZIP or foreign postal code FLOWER MOUND, TX $\,$ 750270057 $\,$ G Gross receipts \$ 2,723,876 F Name and address of principal officer: H(a) Is this a group return for □Yes ☑No subordinates? PO BOX 270057 H(b) Are all subordinates FLOWER MOUND, TX 750270057 ✓ Yes □No included? Tax-exempt status: 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.NAOMISVILLAGE.ORG L Year of formation: 2012 M State of legal domicile: TX K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► Summary 1 Briefly describe the organization's mission or most significant activities: TO RAISE OPHANS TO ADULTHOOD WITH MAXIMUM EDUCATIONAL, LEADERSHIP AND SPIRITUAL TRAINING IN ORDER THAT THEY BECOME EQUIPPED TO DO SIMILAR CHARITABLE WORK FOR THE POOR IN THEIR COMMUNITY. Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 6 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 39 7b **Current Year** 2,411,658 2,161,151 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 93,466 21,467 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 89,504 61,376 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,494,501 2,344,121 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 1,211,811 1,896,909 **14** Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 280,830 416,186 Expenses 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 422,735 324,645 1,915,376 2,637,740 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 . 428,745 -143,239 Net Assets or Fund Balances Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . 877,951 739,736 46,918 21 Total liabilities (Part X, line 26) . 12,864 22 Net assets or fund balances. Subtract line 21 from line 20 . 692,818 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 2022-02-09 Signature of officer Sign Here TODD LIDDELL TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | if 2022-02-09 P00643849 Paid self-employed Firm's name ► KHA ACCOUNTANTS PLLC Firm's EIN ▶ 81-4277254 Preparer Use Only Firm's address ► 4880 LONG PRAIRIE ROAD SUITE 100 Phone no. (972) 221-2500

FLOWER MOUND, TX 75028

May the IRS discuss this return with the preparer shown above? (see instructions) .

☑ Yes ☐ No

Form	990 (2	020)					Page 2
Pa	irt III	Statement of	Program Service	e Accomplis	hments		
		Check if Schedule	e O contains a respo	nse or note to a	any line in this Part III .		🗆
1	Briefly	describe the orga	nization's mission:				
			FROM POVERTY AN OUNSELING, TEACHI			SAFE, LOVING NUTURING HOME	THAT IS CHRIST
2	Did th	e organization und	dertake any significa	nt program ser	vices during the year w	hich were not listed on	
	the pr	ior Form 990 or 99	90-EZ?				🗌 Yes 🗹 No
	If "Yes	s," describe these	new services on Sch	edule O.			
3	Did th	e organization cea	se conducting, or ma	ake significant	changes in how it condu	ıcts, any program	
	servic	es?					🗌 Yes 🗹 No
	If "Yes	s," describe these	changes on Schedule	● O.			
4	Sectio	n 501(c)(3) and 5		ns are required	to report the amount of	largest program services, as mea: of grants and allocations to others,	
	(Code:) (Expenses \$	1,896,909	including grants of \$	1,896,909) (Revenue \$)
	•	lditional Data) (=\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_,,	meraning granita in 4	_,,, (,
4b	(Code:) (Expenses \$	422,193	including grants of \$) (Revenue \$	21,467)
	See Ad	lditional Data					
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services	(Describe in Schedu	le O.)			
		nses \$	•	ıding grants of	\$) (Revenue \$)
4e	Total	program service	e expenses 🕨	2,319,1	02		
							Form 990 (2020)

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Par	tiV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
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>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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,</i> Part 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	12a	Yes	
b	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	103	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	INO
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No

 \mathbf{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? If "Yes," complete Schedule I, Parts I and II

20b

21

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()	Checklist of Required Schedules (continued)			
			Yes	No
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
а	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
2	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M			
		30	ļ	No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	30 31 32		No No No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections	31		No No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	31 32 33		No No No
a	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	31 32 33 34		No No
a	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31 32 33 34 35a		No No No
a	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	31 32 33 34 35a 35b		No No No No

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

Yes

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9

0

1c

1a

1b

No

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority of financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:			No
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA	AR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	tion 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	were 6b		
7	, , , , , , , , , , , , , , , , , , , ,			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s provided to the payor?	services 7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Form 8282?	to file 7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?	s 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a f 1098-C?	orm 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
12a	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	. 13a		
	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in	134		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		140
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or e			
	parachute payment(s) during the year?	. 15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.	16		No

	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to i	lines
Se	ection A. Governing Body and Management	• •	• •	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8 b		No
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 in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	List the states with which a come of this Form 000 is required to be filed.			
17 10	List the states with which a copy of this Form 990 is required to be filed. Section 6104 requires an examination to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)).			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in 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: • GAYLA SELLERS 1332 WATERSEDGE DRIVE PLANO, TX 75093 (469) 693-4036			

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 instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

See instructions for the order in which to list the \Box Check this box if neither the organization no	•		ion c	omr	ens	ated a	nv c	ourrent officer dire	ctor or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related	Position than of is b	on (do one bo oth a direct	(C o no ox, u in of tor/t) t cha unle: ficer rust	eck moss pers and a ee)	ore son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	ey employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) JULIE MENDONSA SECRETARY	2.00	х						0	0	0
(2) ROBERT MENDONSA PRESIDENT	2.00	х						182,347	0	0
(3) TODD LIDDELL TREASURER	2.00	x						0	0	0
(4) RYAN ROSS MEMBER	1.00	Х						0	0	0
(5) RON HAMILTON MEMBER	1.00	Х						0	0	0
(6) LEE MCCLUSKEY MEMBER	1.00	Х						0	0	0
(7) TOM BARRY MEMBER	1.00	Х						0	0	0

(A)

Part VII

Page 8

	Name and title	Average hours per week (list any hours	than c	one b	ox, u in off	t che unles ficer	eck moss pers and a ee)	son	Reportable compensation from the organization	Reportable compensation from related organizations		Estimated amount of othe compensation from the organization ar	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		organizati relate organiza	ed
				<u> </u>									
		!											
		!											
	Sub-Total						▶						
_							•		182,347	0			0
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived more than \$10	00,000			
												Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule</i> 3				•		oyee, d		ghest compensated	employee on	3		NI -
4	For any individual listed on line 1a, is organization and related organization	the sum of repo	ortable (the	3		No
	individual			•	•	٠					4	Yes	
5	Did any person listed on line 1a receiverservices rendered to the organization										5		No
	ection B. Independent Contract									_			
1	Complete this table for your five high										pens	sation	

(C)

(D)

(E)

(B)

from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

compensation from the organization ▶ 0

(A) Name and business address

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

(B)
Description of services

(C) Compensation

Form **990** (2020)

Par		(2020)	of -	Payar						Page 9
Pan	VII				resno	nse or note to any	line in this Part VIII			П
		CHECK II SCHOOL	aure	o contains a	CSPO	inse of flote to diff	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<u> </u>	1a	Federated campaig	gns	1	а					
s, Grants Amounts	b	Membership dues		<u> </u>	b					
A G	C .	Fundraising events			с					
	a	Related organization Government grants (d					
ons, Gifts Similar					e					
Contributions, and Other Sim	ľ	and similar amounts above	not ir	actudad	.f	2,411,658				
tributic Other	g	Noncash contribution lines 1a - 1f:\$	s incl	uded in 1	_					
Cont	h	Total. Add lines 1a	a-1f		9	•	2 444 650			
<u> </u>						Business Code	2,411,658			
	28	MISSION AND INTER	NSH]	[P		611710	21,467	21,467		
RI e										
Program Service Revenue	b	•								
Ce F	۱,									
žer vi		_								
E S	C	1								
ußo.	•	•								
Φ	 f	All other program	serv	rice revenue.						
		Total. Add lines 2			•	21,467				
		Investment income				nterest, and other	1,85	.7		1,857
	1	similar amounts). Income from invest			· ipt bo	ond proceeds		<u></u>		1,007
	1						•			
				(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income					+			
	١,	or (loss) d Net rental income	6c				_			
	`	- Net rental meome		(i) Securiti		(ii) Other				
	7 a	Gross amount from sales of	7a	26	8,894					
		assets other than inventory	′"	20	10,054					
	ь	Less: cost or	7b	22	10 275					
		other basis and sales expenses		22	9,375					
	c	Gain or (loss)	7с	5	9,519					
	، ا	d Net gain or (loss)	•				59,51	9		59,519
<u>ə</u>	88	Gross income from fu (not including \$		of						
Other Revenue		contributions reporte See Part IV, line 18	d on	line 1c).	_					
Re	,	b Less: direct expen			8a 8b					
her		c Net income or (los			ig eve	ents				
ŏ	93	Gross income from	aam	ing activities						
	Ja	See Part IV, line 19	. •	· ·	9a					
	1	b Less: direct expen			9b					
	ľ	c Net income or (los	ss) fr	om gaming a	ctiviti	es >	_			
	10	aGross sales of inve	ento	ry, less						
	١,	returns and allowa Less: cost of good			10a 10b		4			
		C Net income or (los				orv ►				
		Miscellaneo				Business Code				
	11	La								
	١.									
	'	b								
	(1	+		
	(d All other revenue			\dashv			+		
	•	e Total. Add lines 1	1a-:	11d		•				
	12	2 Total revenue. S	ee ir	nstructions .			2,494,50	1 21,46	7	0 61,376
	_						2,434,30	-1 21,40	<u>' I </u>	0 01,376

	m 990 (2020)				Page 10
F	art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co	amplete all columns	All other erganization	ne must complete colu	ımn (A)
	Check if Schedule O contains a response or note to any		=		🗹
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·	<u> </u>	<u> </u>
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.	1,896,909	1,896,909		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	182,347	109,408	72,939	
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	206,748	127,986	78,762	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	27,091	16,563	10,528	
11	Fees for services (non-employees):				
	a Management				
	Legal				
1	Accounting	37,998		37,998	
1	d Lobbying				
	e Professional fundraising services. See Part IV, line 17				
1	Investment management fees				
1	GOther (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	14,745		14,745	
12	Advertising and promotion	46,232		46,232	
13	Office expenses	17,328		17,328	
14	Information technology				
15	Royalties				
	Occupancy	2,442		2,442	_
	Travel	573		573	
	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	220		220	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a VOLUNTEER PROGRAM EXPEN	168,236	168,236		
	b BANK FEES & CREDIT CARD	32,118		32,118	
	c PRINTING/POSTAGE	4,753		4,753	
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,637,740	2,319,102	318,638	0
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).				F 000 (2020)

1

2

31

32

33

685.901

53,835

Page **11**

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

	Beginning of year		End of year
Cash-non-interest-bearing	611,734	1	
Savings and temporary cash investments	266,217	2	
		_	

3 Pledges and grants receivable, net . . 4 Accounts receivable, net . Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5 entity or family member of any of these persons

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 . . Assets 8 Inventories for sale or use . Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment: cost or other 10a 4,769 basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 4,769 0 10c 11 Investments—publicly traded securities . 11 12 12 Investments—other securities. See Part IV, line 11 . . . 13 13 Investments—program-related. See Part IV, line 11 .

14 14 Intangible assets . 15 15 Other assets. See Part IV, line 11 . . . 877,951 16 739,736 16 **Total assets.** Add lines 1 through 15 (must equal line 33) . 17 Accounts payable and accrued expenses 17 18 18 Grants payable . 19 19 Deferred revenue . . 20 Tax-exempt bond liabilities . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 22

23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties . 12.864 46,918 25 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 12.864 46.918 26 Total liabilities. Add lines 17 through 25 . . 26

Organizations that follow FASB ASC 958, check here ▶

complete lines 27, 28, 32, and 33. 27 865,087 27 Net assets without donor restrictions 28 28 Net assets with donor restrictions

Fund Balances 503,249 189,569 Organizations that do not follow FASB ASC 958, check here ightharpoonup and complete lines 29 through 33.

5 29 29 Capital stock or trust principal, or current funds Assets 30 Paid-in or capital surplus, or land, building or equipment fund . . . 30

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

31

32

33

692,818

739.736

Form 990 (2020)

865,087

877,951

3h

Form 990 (2020)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID:

Software Version:

EIN: 45-5242323

Name: NAOMI'S VILLAGE INC

Form 990 (2020)

(2020)

Form 990, Part III, Line 4a:

CHILDREN'S PROGRAMS: TO RESCUE KENYAN ORPHANS FROM POVERTY AND DISEASE. TO PROVIDE FOR THEM A SAFE, LOVING NURTURING HOME THAT IS CHRIST CENTERED IN ITS VALUES. COUNSELING, TEACHING AND DISCIPLINARY APPROACH.

Form 990, Part III, Line 4b:

FUNDS PROVIDED FOR THE ROOM, BOARD AND TRAVEL OF THE MISSIONARIES WHO SUPPORTED NAOMI'S VILLAGE OUTREACH PROGRAMS AND UNDERTAKINGS. THE

VOLUNTEERS PROGRAM LASTS FOR ONE TO TWO WEEKS AND THE INTERNSHIP PROGRAM LASTS SIX TO EIGHT WEEKS.

VOLUNTEER PROGRAM: NAOMI'S VILLAGE SUPPORTED INTERNATIONAL MISSIONARIES SERVING AT NAOMI'S VILLAGE IN MAAI MAHIU, KENYA, THE VOLUNTEER PROGRAM

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 934930460							3493046028512						
SCI		ULE A	- Dublic (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047					
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	· a section	2020					
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection					
Nam	e of th	nie Service ne organiza LAGE INC	tion				Employer identific	ation number					
		LAGE INC					45-5242323						
	rt I		for Public Charity State				See instructions.						
1 ne c	rganiz		a private foundation because	•	•		(A)(:)						
		·	onvention of churches, or as										
2			scribed in section 170(b)(,	, ,							
3		·	or a cooperative hospital serv	_			-						
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170 (b)(1)(A)(iv). (Complete Part II.)											
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).						
7			ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in					
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)							
9			ural research organization de ant college of agriculture. Se					ege or university or a					
10	✓	from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to ceres taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross					
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	ee section 509	(a)(4).						
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a						
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by						
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar									
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its					
d		Type III n functionally	on-functionally integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	zation operated fy a distribution	in connection wi requirement and	th its supported orgar						
e		Check this	box if the organization receiv or Type III non-functionally	ved a written determir	ation from the I		pe I, Type II, Type II	I functionally					
f	Enter			· · · · · · · · · · · ·	-		<u> </u>						
g	Provi	de the follow	ing information about the su	pported organization(s).								
	(i) Name of supported (i			IN (iii) Type of organization (described on lines 1-10 above (see instructions) (iv) Is the organization listed in your governing document? (see instructions) (oth									
					Yes	No							
Tota		l. B. '	tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9						

Sch	nedule A (Form 990 or 990-EZ) 2020						Page 2
P	Part II Support Schedule for	Organizations	Described in S	ections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	Section A. Public Support Calendar vear		I		I		
	(or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
_	organization's benefit and either paid						
_	to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
	line 4.						
S	Section B. Total Support	T	ı			1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7							
8							
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
9							
_	activities, whether or not the						
	business is regularly carried on				1		
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						_
11							
12	10 Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First 5 years. If the Form 990 is for t						zation check
	this box and stop here	=			•		zation, check
	Section C. Computation of Publi				<u> </u>		
	Public support percentage for 2020 (li			column (f))		14	
	Public support percentage for 2019 Sc					15	
	a 33 1/3% support test—2020. If the						hox
100	and stop here. The organization qual						
b	33 1/3% support test—2019. If th	ne organization did	not check a box of	n line 13 or 16a,	and line 15 is 33 i		k this
_	box and stop here. The organization						
17 a	a 10%-facts-and-circumstances tes	t—2020. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization	n meets the "facts	-and-circumstanc	es" test, check thi	s box and stop h e	e re. Explain	
	in Part VI how the organization meets			-			. 🗆
_	organization						▶□
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organis						
	Explain in Part VI how the organization						
	supported organization						▶□
18		on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	17b, check this box	k and see	
	instructions						▶□
					Schodu	le A (Form 990 o	r 990-F7\ 2020

20

Р	Support Schedule for	Organization	s Described in	Section 509(a	1)(2)		
	(Complete only if you o					to qualify under	Part II. If
	the organization fails to	qualify under t	the tests listed b	elow, please co	mplete Part II.)		
Se	ction A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1,831,194	2,119,991	1,863,783	2,254,617	2,413,552	10,483,13
_	include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that						
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
_	the organization without charge	1 001 101	2 442 204	4.052.702	2.254.647	2.442.552	10 100 10
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and	1,831,194	2,119,991	1,863,783	2,254,617	2,413,552	10,483,13
/a	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line						
	13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						10,483,13
Se	from line 6.)						,,
	Calendar year	1					
	(or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	1,831,194	2,119,991	1,863,783	2,254,617	2,413,552	10,483,13
L0a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties	18,096	78,746	49,863	89,505	61,376	297,58
	and income from similar sources	10,030	70,740	45,003	05,505	01,570	257,50
b	Unrelated business taxable income (less section 511 taxes) from						
	businesses acquired after June 30,						
	1975.						
C	Add lines 10a and 10b.	18,096	78,746	49,863	89,505	61,376	297,58
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on.						
12							
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	11, and 12.).	1,849,290	2,198,737	1,913,646	2,344,122	2,474,928	10,780,72
14	First 5 years. If the Form 990 is for t	he organization's i	first, second, third	, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organ	ization,
	check this box and stop here						▶ □
Se	ction C. Computation of Public						
15	Public support percentage for 2020 (lin		•			15	97.240 9
16	Public support percentage from 2019 S					16	97.810 9
Se	ction D. Computation of Invest						
17	Investment income percentage for 20		. ,	, , ,	•	17	2.760 %
18	Investment income percentage from 2					18	2.190 9
	331/3% support tests—2020. If the	organization did n	at chack the box	on line 14 and line	o 15 ic more than	22 1/20/- and line	17 ic not

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization \blacktriangleright b 33 1/3% support tests—2019. 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 \blacktriangleright

Page 4

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Vec No

				'''	
L	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1			
,	Did the organization have any supported organization that does not have an IRS determination of status under section 509	_	-		
2	(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described				
	in section 509(a)(1) or (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and				
	3c below.				
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the				
	determination.				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.				
ŧa	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

acternment.	3b				
Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
If tes, explain in Part VI what controls the organization put in place to ensure such use.	3с				
Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
cnecked box 12a or 12b in Part 1, answer lines 4b and 4c below.					
Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b				
Did the organization support any foreign supported organization that does not have an IRS determination under sections					
			 		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		

	To War II and a finite Book 1/7 what are trade the appropriation must be also be a properly used.			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		

	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported				

organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

	Supporting Outpointing (actions)					
ŀē	Supporting Organizations (continued)		l			
			Yes	No		
11	, , , , , , , , , , , , , , , , , , , ,					
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, governing body of a supported organization?					
		11a				
	A family member of a person described in 11a above?	11b				
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in P VI.	Part 11c				
S	Section B. Type I Supporting Organizations					
			Yes	No		
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if a applied to such powers during the tax year.	ny,				
_		. 1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization.	2				
	Section C. Type II Supporting Organizations					
_	action of Type 12 supporting organizations		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).					
S	Section D. All Type III Supporting Organizations					
			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing					
	documents in effect on the date of notification, to the extent not previously provided?					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significan	. 2				
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.					
S	Section E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructions):				
	a The organization satisfied the Activities Test. Complete line 2 below.					
	b The organization is the parent of each of its supported organizations. Complete line 3 below.					
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instru	ctions)			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those support organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	ed 2a				
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization involvement.					
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	25				
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? If "Yes" or "No" provide details in Part VI. 	h of 3a				
	 b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard. 	21-				

	Recoveries of prior-year distributions			
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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		

tax year or assets held for part of year):	1		
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A)	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) I Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 I and Average monthly value of securities 1b Average monthly value of securities 1c 1c 1d 1d 1d 1d 1d 1d 1d 1d	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 1 1 1 1 1 1 1 1 1 1 1 1

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 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 or 990-F7) 2020

5

5

Income tax imposed in prior 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 (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

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				
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions if any for years prior to 2020				

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions					
9 Distributable amount for 2020 from Section C, line 6				9	
10 Line 8 amount divided by Line 9 amount				10	
Section E - Distribution (see instruction		(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from	om Section C, line 6				
2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions.					
3 Excess distributions carryover, if	any, to 2020:				
a From 2015			·		
b From 2016					

(see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see			

See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
b From 2016		
c From 2017		
d From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
 a Applied to underdistributions of prior years 		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to		

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. **b** Excess from 2017. c Excess from 2018.

e Excess from 2020.

3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2020 Page 8								
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								

efile GRAPHIC print - DO NOT PROCESS
SCHEDULE D Suppl

As Filed Data -

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.

► Attack to Form 990.

2020

DLN: 93493046028512

Quen to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public Inspection

	me of the organization DMI'S VILLAGE INC				Employe	er identification	number
NAC	JMI 5 VILLAGE INC				45-5242	323	
Pā	art I Organizations Maintaining Donor Advi				Accour	nts.	
	Complete if the organization answered "Ye						
		(a) Donor	advised fund	ls	(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 advisor organization's property, subject to the organization's ex						Yes 🗌 No
6	Did the organization inform all grantees, donors, and donoritable purposes and not for the benefit of the donor private benefit?	r or donor advisor, or	for any other	er purpose co		impermissible	Yes 🗌 No
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	es" on Form 990 P	art IV line	7			
1	Purpose(s) of conservation easements held by the orga			71			
_		•	_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			. :	
	☐ Preservation of land for public use (e.g., recreatio	on or education)				y important land a	area
	Protection of natural habitat		☐ Preser\	vation of a ce	rtified his	storic structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation	n contributio	on in the form		servation	of the Vear
а	Total number of conservation easements			. 1	2a '''	ield at the Lift t	i the real
b	Total acreage restricted by conservation easements			_	2b		
c	Number of conservation easements on a certified histor			—	2c		
d	Number of conservation easements included in (c) acqu		` '	⊢	2d		
u	structure listed in the National Register	med ditel 7,23,00, d	ia not on a i	L	zu		
3	Number of conservation easements modified, transferred tax year ▶	ed, released, extingui	shed, or terr	minated by th	ne organiz	zation during the	
4	Number of states where property subject to conservation	on easement is locate	d ►				
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold	the periodic monitorin	g, inspection	n, handling of	violation	ıs,	□ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of vio	ations, and	enforcing cor	servation		ng the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$, handling of violation	s, and enfor	cing conserva	ation ease	ements during the	e year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$?	,	•		O(h)(4)(B	i)(i)	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	e footnote to the orga					
Par	t III Organizations Maintaining Collections Complete if the organization answered "Ye				r Simila	ar Assets.	
1a	If the organization elected, as permitted under FASB Ashistorical treasures, or other similar assets held for pub Part XIII, the text of the footnote to its financial statem	SC 958, not to report plic exhibition, educat	in its revenu on, or resea	ue statement			
b	If the organization elected, as permitted under FASB As historical treasures, or other similar assets held for pub following amounts relating to these items:	SC 958, to report in i	s revenue st				
((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, histori following amounts required to be reported under FASB			sets for financ	cial gain,	provide the	
а	Revenue included on Form 990, Part VIII, line ${f 1}$				•	· \$	
b	Assets included in Form 990, Part X					\$	
	D						

Part	1111	Organizations Ma	aintaining Col	ections of	Art, H	istori	cal Tı	reası	ıres, o	r Other	Similar A	ssets (c	ontinued)	
3		the organization's acq (check all that apply):		, and other re	ecords,	check a	any of	the fo	llowing	that are a	significant	use of its	collection	
a		Public exhibition				d		Loan	or exch	ange prog	ırams			
b		Scholarly research				е	Ш	Othe	r					
С	Ш	Preservation for future	e generations											
4	Provid Part X	e a description of the o	organization's coll	ections and e	xplain h	ow the	y furth	ner the	e organi:	zation's ex	kempt purpo	ose in		
5		the year, did the orga to be sold to raise fur										☐ Yes	s 🗆 ı	No
Par	t IV	Escrow and Cust Complete if the ord X, line 21.			on Forr	n 990,	, Part	IV, li	ne 9, o	r reporte	ed an amo	unt on F	orm 990	, Part
1a		organization an agent ed on Form 990, Part)										☐ Ye	s 🗆 ı	No
b	If "Yes	s," explain the arrange	ement in Part XIII	and complete	the fol	lowina	table:				Δ.	mount		
c		ning balance				_				1c				_
d	_	ons during the year .								1d				_
e		outions during the year								1e				_
f		p balance								1f				
	-										1.111. 2			
2a		e organization include		·	•	•					•	_	s 📙 I	No
		s," explain the arrange		Check here if	f the ex	planati	on has	been	provide	d in Part	XIII			
Par	tν	Endowment Fund Complete if the ord		ered "Ves" (on Form	n 990	Part	TV/ li	ne 10					
		Complete if the org	garnzacion answ	(a) Current y			rior yea			ears back	(d) Three ye	ears back	(e) Four ye	ars back
1a 8	Beginni	ng of year balance .												
b	Contrib	utions												
c i	Net inve	estment earnings, gair	ns, and losses											
d (Grants (or scholarships	•											
		xpenditures for facilitie	es											
f /	Adminis	strative expenses .												
g E	End of y	/ear balance												
2	Provid	e the estimated percei	ntage of the curre	nt year end b	alance	(line 1c	ı, colu	mn (a)) held a	as:				
а		designated or quasi-e	ndowment >			` -								
b	Perma	nent endowment ►												
c		endowment >												
Č		ercentages on lines 2a	 . 2b. and 2c shou	d equal 100%	Ď.									
3а	Are th	ere endowment funds zation by:		•		on that	are h	eld an	d admin	istered fo	r the		Yes	No
	(i) Un	related organizations										3a	(i)	
b		elated organizations .s" on 3a(ii), are the rel				n Sche	 dule R	? .					(ii)	
4	Descri	be in Part XIII the inte	ended uses of the	organization's	s endow	ment f	unds.						•	
Par	: VI	Land, Buildings,								_			_	
	Descrip	Complete if the ord	ganization answ (a) Cost or oth (investme	er basis (on Forr b) Cost (rm 990, Pa lepreciation		e 10. d) Book val	ue
1a	and .													
		ıs												
	_	old improvements												
		ent						4,769			4,769			0
								.,. 05			1,700			
_		ines 1a through 1e. (C	l Column (d) must e	qual Form 990	0, Part	X, colui	mn (B), line	l		>			0

chedule D (Form 990) 2020					Page :
Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, I	Part IV li	ne 111	b.See Form 990 F	art Y	
	(a) Description of security or category (including name of security)	(b) Book value	ne III	(c) Method Cost or end-of-	d of va	luation:
	l derivatives					
2) Closely-l 3) Other	neld equity interests					
5)						
)						
))						
						
")						
5)						
1)						
)						
	n (b) must equal Form 990, Part X, col. (B) line 12.)	•				
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV, li	ne 110	c. See Form 990, I	Part X	, line 13.
	(a) Description of investment			(b) Book value		Method of valuation: or end-of-year market value
.)						
)						
)						
)						
)						
)						
)						
1						
1						
))						
tal. (Columi art IX	n (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		<u> </u>	•		
	Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, lir	e 11d	. See Form 990, Par	t X, lin T	e 15. (b) Book value
)	(a) a configuration					(2) 20011 10111
)						
)						
)						
)						
)						
() ()						
)						
)						
0)						
	mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.				Þ	
	Complete if the organization answered 'Yes' on Form 990, P	art IV, lir	e 11e	or 11f.See Form		Part X, line 25.
	(a) Description of liability				(b) Book	
L) Federal i	ncome taxes				value	<u>:</u>
•	CARD PAYABLE				1,91	
B) ACCRUEI B) PPP LOAI	D PAYROLL N				2,21 42,79	┥
i)						_
5)						_
5)						_
7)						_
3)						_
9)						_
	n (b) must equal Form 990, Part X, col.(B) line 25.)			L	46,91	<u> </u>
Liability fo	or uncertain tax positions. In Part XIII, provide the text of the footnot			tion's financial stater	nents	
certain tax	positions under FIN 48 (ASC 740). Check here if the text of the foot	note has b	een pr	ovided in Part XIII	Ш	

2a

Page 4

2,460,515

2,494,501

-10,121

2,637,740

Schedule D (Form 990) 2020

1

3

-29,030

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a b 4b

Add lines **4a** and **4b** C 40 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 2,494,501 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. 2,627,619

Total expenses and losses per audited financial statements . . . 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . 2a 2b Prior year adjustments 2c c

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.

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . .

Schedule D (Form 990) 2020

1

2

3

Other (Describe in Part XIII.) . 2d -10,121

d Add lines 2a through 2d . 2e e 3

Subtract line 2e from line 1 .

3 Amounts included on Form 990, Part IX, line 25, but not on line 1:

4 Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a

4b b Add lines **4a** and **4b** 4c C

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 5 2.637.740 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.

Return Reference Explanation

See Additional Data Table

Page 5		chedule D (Form 990) 2020		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2020

Additional Data

Software ID: Software Version:

EIN: 45-5242323

Name: NAOMI'S VILLAGE INC

Supplemental Information

Explanation

ACCOUNTS RECEIVABLE CASH BASIS ADJUSTMENT -4,953. ROUNDING -3.

Return Reference PART XI, LINE 2D - OTHER

ADJUSTMENTS:

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	ACCOUNTS PAYABLE CASH BASIS ADJUSTMENT -10,121.

Supplemental Information	
Return Reference	Explanation
FORM 990 PAGE 3 PART IV LINE 11F	MANAGEMENT HAS CONCLUDED THAT ANY TAX POSITIONS THAT WOULD NOT MEET THE MORE-LIKELY- THAN-N OT CRITERION OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICAT
	ION (ASC) TOPIC 740-10, ACCOUNTING FOR INCOME TAXES, WOULD BE IMMATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHOLE. ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT INC LUDE ANY PROVISION FOR UNCERTAIN TAX POSITIONS, AND NO RELATED INTEREST OR PENALTIES HAVE BEEN RECORDED IN THE STATEMENT OF ACTIVITIES OR ACCRUED IN THE STATEMENT OF FINANCIAL POSI TION. FEDERAL TAX RETURNS OF THE ORGANIZATION ARE GENERALLY OPEN TO EXAMINATION BY THE REL
	EVANT TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE DATE THE RETURNS ARE FILED

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493046028512 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2020 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization NAOMI'S VILLAGE INC 45-5242323 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments and independent fundraising, program specific type of in the region region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) **KENYA** 1 PROGRAM SERVICES ORPHAN LIVING & 1,896,909 TEACHING 1,896,909 3a Sub-total . **b** Total from continuation sheets to Part I . . . 1,896,909 c Totals (add lines 3a and 3b) Cat. No. 50082W

Schedule F (Form 990) 2020

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

Schedule F (Form 990) 2020

Page **3** Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		+					
+							

Schedule F (Form 990) 2020							

Sche	dule F (Form 990) 2020		Page 4
Par	t 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

Schedule F (Form 990) 2020 Page 5	
Part V 990 Sched	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.
Return Reference	Explanation
PART I,	THE ORGANIZATION USES THE CASH BASIS OF ACCOUNTING. THE CASH BASIS IS THE METHOD OF ACCOUNTING WHEREBY REVENUE IS

Reference

PART I,
LINE 3:

THE ORGANIZATION USES THE CASH BASIS OF ACCOUNTING. THE CASH BASIS IS THE METHOD OF ACCOUNTING WHEREBY REVENUE IS RECOGNIZED WHEN CASH IS PAID. THE ORGANIZATION TRANSFERS OPERATING FUNDS TO KENYA ON A MONTHLY BASIS SUBSEQUENT TO THE MONTHLY CLOSE PROCESS AND REVIEW. THE ORGANIZATION HAS A MONTHLY REVIEW OF THE OPERATING RESULTS AND FUNDS TO BE TRANSFERRED. THE ORGANIZATION HAS CONTROLS IN PLACE OVER WIRE TRANSFERS TO ENSURE PROPER AUTHORIZATION OF OUTGOING WIRES, DETERMINING THE ACCURACY OF THE WIRES, AND RETENTION OF DOCUMENTATION AND RECORDS.

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

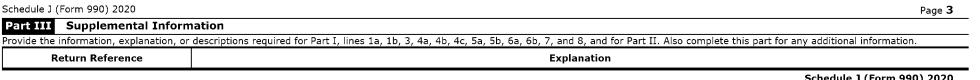
efil	le GRAPHIC pi	int - DO NOT PROCESS As Filed Data -	DLN: 93	349304	6028	512
Schedule J (Form 990)		Compensation Information	(DMB No.	1545-(0047
		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.			2020 Open to Public	
-	al Revenue Service			Insp	ectio	n
	me of the organiza DMI'S VILLAGE INC	ation	Employer identific	ation nu	ımber	
IVAC	JAI 5 VILLAGE INC		45-5242323			
Pa	rt I Questi	ons Regarding Compensation				
1a	Check the appro	opiate box(es) if the organization provided any of the following to or for a person listed	l on Form		Yes	No
	990, Part VII, S	ection A, line 1a. Complete Part III to provide any relevant information regarding thes	e items.			
	First-class	s or charter travel Housing allowance or residence for p	ersonal use			
	Travel for	companions Payments for business use of person				
		nification and gross-up payments \square Health or social club dues or initiatio				
	☐ Discretion	nary spending account Lagrange Personal services (e.g., maid, chauff	eur, chef)			
b		xes on Line 1a are checked, did the organization follow a written policy regarding payn or provision of all of the expenses described above? If "No," complete Part III to expla		1b		
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/Executive Director, regarding the items checked on Line	e la?			
3	organization's C	if any, of the following the filing organization used to establish the compensation of the EO/Executive Director. Check all that apply. Do not check any boxes for methods and organization to establish compensation of the CEO/Executive Director, but explain in				
	☐ Compose	ation committee				
		ent compensation consultant Written employment contract Compensation survey or study				
		of other organizations Graph of the period by the board or compensation of the period by the period	ion committee			
4	During the year related organiza	, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the fil stion:	ing organization or a	1		
а	Receive a sever	ance payment or change-of-control payment?		4a		No
b		r receive payment from, a supplemental nonqualified retirement plan?		4b		No
С		r receive payment from, an equity-based compensation arrangement? of lines 4a-c, list the persons and provide the applicable amounts for each item in Part		4c		No
	Only E01(a)(2), $501(c)(4)$, and $501(c)(29)$ organizations must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any onlying on the revenues of:				
а	·	1?		5a		No
a b		anization?		5b		No
_		5a or 5b, describe in Part III.				
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any ontingent on the net earnings of:				
а	The organization	1?		6a		No
b		anization?		6b		No
	If "Yes," on line	6a or 6b, describe in Part III.				
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed in lines 5 and 6? If "Yes," describe in Part III		7		No
8	subject to the ir	nts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," de		8		No
9		8, did the organization also follow the rebuttable presumption procedure described in F		9		INU
For F	Panerwork Redu	iction Act Notice, see the Instructions for Form 990. Cat. No. 50	0053T Schedule	J (Form	9901	2020

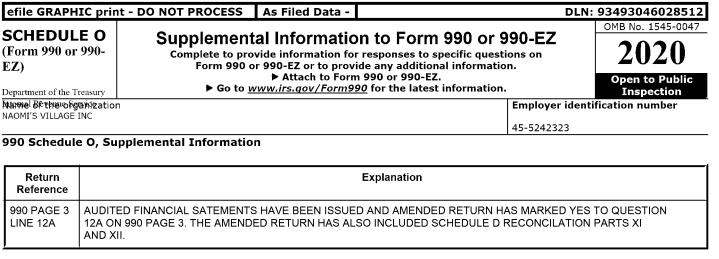
Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

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 are not 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 compensation (D) Nontaxable (E) Total of columns (C) Retirement and (F) Compensation in (B)(i)-(D) column (B) reported other deferred benefits (i) Base (ii) Bonus & incentive (iii) Other as deferred on prior compensation compensation compensation reportable Form 990 compensation 1 ROBERT MENDONSA 182,347 (i) 0 0 0 0 182,347 0 PRESIDENT 0 0 0 0 0 0 0 (ii)

Schedule J (Form 990) 2020





Return Explanation
Reference

LINE 8B

FORM 990, PART VI, SECTION A.

Return Explanation
Reference

FORM 990,	LINE 11A EXPLANATION - PRIOR TO FILING, FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS AND PRESIDENT
PART VI,	FOR REVIEW
SECTION B,	
LINE 11B	

Return Explanation
Reference

FORM 990,	THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATIONS DIRECTOR INCLUDED A REVIEW A
PART VI,	ND APPROVAL BY THE BOARD OF DIRECTORS BASED ON COMPARABLE EXTERNAL AND INDEPENDENT COMPENS
SECTION B,	ATION STUDIES. THE COMPENSATION WAS ALIGNED TO THE MEDIAN SALARY FOR AN ORGANIZATION OF CO
LINE 15A	MPARABLE SIZE IN THE SERVICE CATEGORY.

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990, AVLIABLE UPON REQUEST PART VI, SECTION C.

LINE 18

Return Explanation

FORM 990,	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND FORM 990 AVAILABLE TO
PART VI,	THE PUBLIC UPON REQUEST
SECTION C,	
LINE 19	

Return Reference	Explanation
FORM 990, PART IX LINE 7 OTHER SALARIES AND WAGES	THE RETURN IS BEING AMENDED TO REFLECT THE AUDITED FINANCIAL STATEMENTS ISSUED AFTER THE R ETURN WAS FILED. THIS RESULTED IN THE FOLLOWING CHANGES IN PRESENTATION. COLUMN C MANAGEME NT AND GENERAL EXPENSES INCREASED BY \$158

Return Explanation
Reference

FORM 990, COLUMN C MANAGEMENT AND GENERAL EXPENSES DECREASED BY \$158

LINE 13

OFFICE

EXPENSES

Return Explanation
Reference

LINE 27

FORM 990, PART X NET ASSETS WITHOUT DONOR RESTRICTIONS DECREASED BY \$189,569

Return Explanation
Reference

FORM 990, PART X LINE 28