

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type o	r Name of exempt organization or other filer, see in	nstructions.		Taxpaye	ridentificatio	n number (1	TIN)
print	ECMC FOUNDATION		41-199	0628			
File by the due date filing you	for Number, street, and room or suite no. If a P.O. bo	ox, see instruct	tions.				
return. Se instructio	e	r a foreign add	ress, see instructions.				
Enter t	ne Return Code for the return that this application is fo	or (file a separa	te application for each return)			0	1
Applic	ation	Return	Application			R	eturn
ls For		Code	Is For			c	Code
Form 9	90 or Form 990-EZ	01	Form 1041-A				08
Form 4	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	90-PF	04	Form 5227				10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	90-T (trust other than above)	06	Form 8870				12
Form 9	90-T (corporation) MARTIN A. SCANLON	07					
 If th If th box 1 t t t 	phone No. ► <u>651-221-0566</u> e organization does not have an office or place of busi is is for a Group Return, enter the organization's four d □ If it is for part of the group, check this box ► request an automatic 6-month extension of time until he organization named above. The extension is for the ► X calendar year <u>2022</u> or ►tax year beginning The tax year entered in line 1 is for less than 12 month Change in accounting period	ligit Group Exe	mption Number (GEN) ich a list with the names and TINs IR 15, 2023 , to return for: id ending	. If this is fo of all memb	r the whole of ers the externation of the externati	group, chec nsion is for.	
	this application is for Forms 990-PF, 990-T, 4720, or 6 ny nonrefundable credits. See instructions.	6069, enter the	tentative tax, less	3a	\$		٥.
	this application is for Forms 990-PF, 990-T, 4720, or 6 stimated tax payments made. Include any prior year o			3b	\$		٥.
_	Balance due. Subtract line 3b from line 3a. Include you						
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$		0.
	n: If you are going to make an electronic funds withdra				т	-TE for payr	ment
LHA	For Privacy Act and Paperwork Reduction Act Not	tice, see instru	ictions.		Form 8	3868 (Rev. 1	1-2022)

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Form

** PUBLIC DISCLOSURE COPY ** 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.

Department of the Treasury Internal Revenue Service

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



Α	For the	e 2022 calendar year, or tax year beginning and	ending		
B	Check if applicabl	e: C Name of organization		D Employer identifica	tion number
	Addre: chang				
	Name chang			41-1990628	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/		1400	651-221-0566	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	501,784,291.
	Ameno return	MINNEAPOLIS, MN 55401		H(a) Is this a group retu	im
	Applic tion pendir	F Name and address of principal officer: TRCOD TRATKE		for subordinates?	Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates inclu	ded? Yes No
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a lis	
	Websit			H(c) Group exemption r	
		organization: X Corporation Trust Association Other	L Year	of formation: 2000 M S	State of legal domicile: DE
Pa	art I	Summary			
é	1	Briefly describe the organization's mission or most significant activities: SEE SC	HEDULE O		
anc					
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose		1.1	s. 11
200	3				9
જ	4	Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2022 (Part V, line 2a)			20
ties	5				0
Ĭ	72	Total number of volunteers (estimate if necessary)			0.
Ac	'a h			78 7b	0.
	<u> </u>			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		46,843,000.	501,572,000.
nue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		13,884.	109,687.
Ê	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,350.	2,604.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		46,859,234.	501,684,291.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		41,805,573.	38,654,823.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,084,482.	4,859,559.
use.	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,253,037.	3,457,529.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		48,143,092.	46,971,911.
		Revenue less expenses. Subtract line 18 from line 12		-1,283,858.	454,712,380.
S OF			Be	ginning of Current Year	End of Year
Assets	20	Total assets (Part X, line 16)		1,089,464,777.	1,575,921,479.
et A	1	Total liabilities (Part X, line 26)		27,344,950.	29,183,730.
	art II	Net assets or fund balances. Subtract line 21 from line 20		1,062,119,827.	1,546,737,749.

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. Т

Sign	Signature of officer		Date						
Here	MARTIN A. SCANLON, CFO & TREASURER								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN				
Paid	JASON DIVINE	11/15/2023	it self-employed	₽01076050					
Preparer	Firm's name KPMG LLP		Firr	n's EIN 13-	5565207				
Use Only	Firm's address 90 S. 7TH ST., STE 4200								
	MINNEAPOLIS, MN 55402 Phone no.612-305-5000								
Paid Print/Type preparer's name Preparer's signature Date Check PTIN JASON DIVINE JASON DIVINE Prim's name KPMG LLP P11/15/2023 P1076050 Preparer Firm's name KPMG LLP Firm's EIN 13-5565207 Use Only Firm's address 90 S. 7TH ST., STE 4200 Phone no.612-305-5000						No			

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	1990 (2022) ECMC FOUNDATION rt III Statement of Program Service Accomplishments	41-1990628	Page 2
га			X
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission: ECMC FOUNDATION'S MISSION IS TO IMPROVE HIGHER EDUCATION AND CAREER		
	SUCCESS AMONG UNDERSERVED POPULATIONS THROUGH EVIDENCE-BASED		
	INNOVATION.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.	·····	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes X No
-	If "Yes," describe these changes on Schedule O.	······	
4	Describe the organization's program service accomplishments for each of its three largest program services, as m	easured by expe	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported.	,	
4a	(Code:) (Expenses \$16,585,549. including grants of \$15,559,750.) (Revenue		0.
	COLLEGE SUCCESS.		
	THE COLLEGE SUCCESS FOCUS AREA SEEKS TO INCREASE PERSISTENCE AND		
	GRADUATION RATES OF STUDENTS WHO FACE SYSTEMIC CHALLENGES IN EARNING A		
	BACHELOR'S DEGREE. THESE STUDENTS INCLUDE, BUT ARE NOT LIMITED TO,		
	FIRST-GENERATION COLLEGE STUDENTS, STUDENTS FROM LOW-INCOME BACKGROUNDS		
	AND STUDENTS OF COLOR. THE PROGRAM FUNDS POSTSECONDARY PROGRAMS AND		
	INITIATIVES THAT IMPROVE AND SCALE SYSTEMIC REFORMS AND SUPPORTS TO		
	INCREASE STUDENT SUCCESS AT POSTSECONDARY INSTITUTIONS; INCREASE		
	CURRENTLY ENROLLED STUDENTS' PERSISTENCE TOWARD A DEGREE; SUPPORT ON		
	TIME TRANSFER FROM TWO-YEAR TO FOUR-YEAR INSTITUTIONS; ENHANCE		
	STUDENTS' PATHWAYS TO GRADUATION WITH CAREER-READY SKILLS; AND EVALUATE		
	NEW RESEARCH FINDINGS AND PUBLICATIONS THAT PROMOTE STUDENT SUCCESS		
4b	(Code:) (Expenses \$14,403,612. including grants of \$13,454,620.) (Revenue	- \$	0.
	CAREER READINESS.		
	THE CAREER READINESS FOCUS AREA SUPPORTS INNOVATIVE APPROACHES AND		
	PROMISING PRACTICES TO IMPROVE THE SUCCESS OF STUDENTS FROM UNDERSERVED		
	BACKGROUNDS SEEKING ACADEMIC CREDENTIALS IN POSTSECONDARY CAREER AND		
	TECHNICAL EDUCATION (CTE) PROGRAMS. GRANTS MADE AS PART OF THE CAREER		
	READINESS FOCUS AREA FUND PROJECTS, PROGRAMS AND INITIATIVES THAT AIM		
	TO ENABLE INSTITUTIONS AND ORGANIZATIONS TO IMPLEMENT INNOVATIVE		
	APPROACHES TO IMPROVING POSTSECONDARY CTE (E.G., INITIATIVES FOR SINGLE		
	MOTHER STUDENT SUCCESS, IMPROVING ONLINE CTE AND CTE LEADERSHIP		
	COLLABORATIVE) AND GENERATE LEARNINGS THAT WILL BE BENEFICIAL TO THE		
	FIELD TO UTILIZE INTERMEDIARIES TO BUILD THE CAPACITY OF INSTITUTIONS		
	AND ORGANIZATIONS TO SUSTAIN AND SCALE PROMISING PRACTICES AND TO		
4c	(Code:) (Expenses \$ 452,480. including grants of \$ 20,000.) (Revenue	\$	0.
10	EDUCATION INNOVATION VENTURES.	φ	
	ECMC FOUNDATION'S EDUCATION INNOVATION VENTURES (EIV) PROGRAM MAKES		
	BELOW-MARKET-RATE INVESTMENTS INTO NONPROFIT AND FOR-PROFIT VENTURES		
	THAT SEEK TO GENERATE BOTH SOCIAL IMPACT AND FINANCIAL RETURNS.		
	COMPLEMENTING ECMC FOUNDATION'S STRATEGIC GRANTMAKING THE EIV PROGRAM		
	USES A FULL SPECTRUM OF PROGRAM-RELATED INVESTMENTS, INCLUDING DEBT AND		
	EQUITY INSTRUMENTS, TO PROVIDE CATALYTIC, RISK CAPITAL TO EARLY-STAGE		
	VENTURES WORKING TO INCREASE POSTSECONDARY EDUCATIONAL OUTCOMES AND		
	ECONOMIC MOBILITY AMONG LEARNERS AND JOBSEEKERS FROM SYSTEMICALLY		
	DISADVANTAGED BACKGROUNDS. FINANCIAL RETURNS ARE REINVESTED INTO		
	ADDITIONAL PROGRAM-RELATED INVESTMENTS, ALLOWING ECMC FOUNDATION TO		
	RECYCLE INVESTMENT DOLLARS TO FUND FURTHER IMPACT INITIATIVES AND DRIVE		
4-1			
40	Other program services (Describe on Schedule O.)	0.)	
4-	(Expenses \$ 11,415,560. including grants of \$ 9,620,453.) (Revenue \$ Total program service expenses 42,857,201.		
чe	Total program service expenses 42,857,201.		orm 990 (2022
		F	orm 330 (2022
3200	2 12-13-22 SEE SCHEDULE O FOR CONTINUATION(S)		

³ 2022.05000 ECMC FOUNDATION

Pa	t IV Checklist of Required Schedules			<u></u>
		_	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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
11	or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X QQA	(2022)
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2022.05000 ECMC FOUNDATION

Form 990 (2022)

ECMC FOUNDATION

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Form	990 (2022) ECMC FOUNDATION	41-1990628	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," comple	te		
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000	as of the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and comp	lete		
	Schedule K. If "No," go to line 25a	24a	1	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24t)	
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to de	fease		
	any tax-exempt bonds?	240	;	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240	1	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	1	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior yea			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes." con			
	Schedule L, Part I	25t	,	x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key em			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35%	-		
	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i>			x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part			
20	instructions for applicable filing thresholds, conditions, and exceptions):	,		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u		28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			x
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If		,	<u> </u>
C		280		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			<u> </u>
29 30				<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conserva			x
24	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part	<u>30</u>		x
31		31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		x
00	Schedule N, Part II			<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,		x	
05	Part V, line 1		_	x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		·	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		<u> </u>	──
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related or			
<u>-</u>	If "Yes," complete Schedule R, Part V, line 2			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
<i></i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 197			
Do	Note: All Form 990 filers are required to complete Schedule O Tt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	<u> </u>
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		4 -	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	15		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable ga			
	(gambling) winnings to prize winners?		0000	<u> </u>
232004	4 12-13-22	For	n 990	(2022)

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	1 990 (2022) ECMC FOUNDATION rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)	41-199062	8	P	age 5
Fai	Statements Regarding Other IRS Fillings and Tax Compliance (continued)			No.	
0-		1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	20			
	, , , , ,	24	01	х	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	^	x
3a			3a		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		├──
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	•			
	financial account in a foreign country (such as a bank account, securities account, or other financial acc	ount)?	4a		X
b	If "Yes," enter the name of the foreign country				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc		_		v
-			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the o	-			
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	0			
	were not tax deductible?		6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	es provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con	tract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	:?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b	y the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а			9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	1			
а		0a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	0b			
11	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	1a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
		1b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		
b		2b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1			
		3b			
с		3c			
14a			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	0	14b	\vdash	<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerat				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment in	come?	16		x
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activ	ities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				
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Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a			°ac
	For each res response to lines 2 through 70 below, and for a	"No" r	respon	nse
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Sect	ion A. Governing Body and Management			_
			Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year 1a1			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		╀
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		╞
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		╞
	Did the organization have members or stockholders?	6	Х	\downarrow
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			_
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			L
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	L
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			Ι
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Х	Γ
	Other officers or key employees of the organization	15b	Х	T
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			T
	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		Γ
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			t
	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		E
	ion C. Disclosure	1.0%		
	List the states with which a copy of this Form 990 is required to be filedCA			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3))	s only)	availal	þ
	for public inspection. Indicate how you made these available. Check all that apply.	S Siny)	avandi	
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	leir	
	statements available to the public during the tax year.	u 1111di 10		
	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	MARTIN A SCANLON – 651–221–0566			
20	MARTIN A. SCANLON - 651-221-0566			_
20	111 WASHINGTON AVE SO, STE 1400, MINNEAPOLIS, MN 55401	[auro	000	
20		Form	990	(2

Form 990 (2		41-1990628	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		X
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending with	or within the organizatior	ı's tax year.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

Name and title Average hours per wind with the most performance and any other and a factor building in the most performance and any other and a factor building in the most performance and any other and a factor building in the most performance and the most performance and a factor building in themost performance and a factor building in the most pe	(A)	(B)			(0	C)			(D)	(E)	(F)
hours per veek box. unsexpression is bein an veek compensation from the organizations (W-2/1099-MISC/ 1099-MISC/ 1092-MISC/ 1092-M	Name and title	Average	(do					ne	Reportable	Reportable	Estimated
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(9) JESSICA E. HASELTON 40.00 X 168,714. 0. 49,701. (10) SARAH BELNICK 40.00 X 168,714. 0. 49,701. (10) SARAH BELNICK 40.00 X 169,273. 0. 43,618. (11) JAMES V. MCKEON 3.00 X 0. 196,250. 0. BOARD CHAIR NOT PD BY FDN 15.00 X 0. 196,250. 0. (12) LORAINE PARK 40.00 X 128,775. 0. 42,309. (13) MAURICE M. SALTER 2.00 X 0. 157,500. 0. DIRECTOR NOT PD BY FDN 9.00 X 0. 156,250. 0. (14) DIANA J. INGRAM 2.00 X 0. 156,250. 0. DIRECTOR NOT PD BY FDN 10.00 X 0. 155,000. 0. (15) JULIA S. GOUW 2.00 X 0. 155,000. 0. DIRECTOR NOT PD BY FDN 7.00 X 0. 155,000. 0. (16) K. PAUL SINGH 2.00 X 0. 152,500. 0. DIRECTOR	(8) JENNIFER E. ZEISLER	40.00									
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(17) STEPHEN HANDEL 40.00			I								
			х						0.	152,500.	0.
PROGRAM OFFICER SENTOR I 0.00 I I I X I I 131.287 I 0.1 15.655										_	4
232007 12-13-22 Form 990 (2022)	PROGRAM OFFICER SENIOR	0.00				I	X		131,287.	0.	15,655.

8

232007 12-13-22

Form 990 (2022)

Form 990 (2022) ECMC FOUNDATI									41-199	90628	B Page 8
Part VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	st C		s (continued)		
(A)	(B)				C) ition			(D)	(E)		(F)
Name and title	Average hours per		not c	heck	more	than o		Reportable	Reportable		Estimated
	week					s both pr/trus		compensation from	compensatior from related	ן י	amount of other
	(list any	tor						the	organizations		compensation
	hours for	direc				Ð		organization	(W-2/1099-MIS		from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)		organization
	organizations	trust	nal tru		oyee	ompe		1099-NEC)			and related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	ner				organizations
(10)	line)	lndi	Inst	Officer	Key	High	Former				
(18) JACK O'CONNELL	3.00	77							140.0		0
DIRECTOR NOT PD BY FDN (19) DEREK LANGHAUSER	8.00	Х						0.	140,0		0.
DIRECTOR NOT PD BY FDN	8.00	х						0.	137,5		0.
(20) JENNIFER ANDERSON	2.00							°.			
DIRECTOR NOT PD BY FDN	9.00	х						0.	132,5	.00	0.
(21) JAMES RUNCIE	2.00								,		
DIRECTOR NOT PD BY FDN	10.00	х						0.	127,5	00.	Ο.
(22) JOHN F. DEPODESTA	0.00										
FORMER BD CHAIR NOT PD BY FDN	0.00						х	0.	75,0	00.	0.
(23) ROBERTA COOPER RAMO	0.00										
FORMER DIRECTOR NOT PD BY FDN	0.00						Х	٥.	60,0	00.	0.
(24) I. KING JORDAN	0.00										
FORMER DIRECTOR NOT PD BY FDN	0.00						Х	0.	30,0	00.	0.
1b Subtotal						I		1,817,129.	6,382,7	07.	858,362.
c Total from continuation sheets to Part VI	. Section A						•	0.	, ,	0.	0.
d Total (add lines 1b and 1c)								1,817,129.	6,382,7	07.	858,362.
2 Total number of individuals (including but no								eceived more than \$100,	000 of reportable		
compensation from the organization											8
											Yes No
3 Did the organization list any former officer,	director, truste	ee, k	key e	empl	oye	e, or	hig	phest compensated empl	oyee on		
line 1a? If "Yes," complete Schedule J for su	uch individual										3 X
4 For any individual listed on line 1a, is the su	-							-	-		
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a											
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	<u>ə J f</u> o	or sı	ich i	oers	on .					5 X
1 Complete this table for your five highest con	monsated ind	ono	ndor	at co	ontra	acto	re th	hat received more than \$	100 000 of comp	oneat	ion from
the organization. Report compensation for t									, 1	crisat	
(A)	ine calendar ye		- Turi	<u>ig 11</u>				(B)			(C)
Name and business	address							Description of s	ervices	С	ompensation
INDIGO EVENTS LLC											
48 YALE ST, MAPLEWOOD, NJ 07040								CONSULTING SERVICE	S		442,747.
SOVA SOLUTIONS, LLC									_		
1092 PIPESTEM PL, POTOMAC, MD 20854								CONSULTING SERVICE	S		217,152.
HCM STRATEGISTS LLC, 501 CONGRESS AVE 257-258, AUSTIN, TX 78701	s, ste							CONSULTING SERVICE	q		128 085
OPTIM COMMUNICATIONS LLC							-	CONSOLITING SERVICE	5		128,085.
5 HARDWOOD CT, WARREN, NJ 07059								CONSULTING SERVICE	s		110,061.
COHEN TAYLOR, 13033 RIDGEDALE DR #139),										,
MINNETONKA, MN 55305								RECRUITING SERVICE	S		110,000.
2 Total number of independent contractors (ir	ncluding but no	ot lin	nitec	d to			ted	above) who received mo	ore than		
\$100,000 of compensation from the organiz	ation					7					

232008 12-13-22

		C (2022) ECMC FOUNDATION			41-199062	8 Page
Par	t VI	III Statement of Revenue				
		Check if Schedule O contains a response or note to a				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 51
s v	1 a	a Federated campaigns 1a				
and Other Similar Amounts		b Membership dues 1b				
o mo	c	c Fundraising events 1c				
ar /	c	d Related organizations 1d 501,572,	000.			
mil	e	e Government grants (contributions) 1e				
S	f	f All other contributions, gifts, grants, and				
the		similar amounts not included above 1f				
p	•	g Noncash contributions included in lines 1a-1f 1g \$ 450,000,				
a	ł	h Total. Add lines 1a-1f	501,572,000.			
	•	Business	Code			
	2 a					
anı		b				
Řevenue		c				
Ře		e				
		f All other program service revenue				
		g Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and				
		other similar amounts)	209,687.			209,68
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real (ii) Perso	onal			
	6 a					
		b Less: rental expenses 6b				
		c Rental income or (loss) 6c				
		d Net rental income or (loss) a Gross amount from sales of (i) Securities (ii) Oth	er			
	10	assets other than inventory 7a				
	ł	b Less: cost or other basis				
e		and sales expenses	000.			
evenue	c	c Gain or (loss)	000.			
í C		d Net gain or (loss)	100,000.			-100,000
	8 a	a Gross income from fundraising events (not including \$ of				
		contributions reported on line 1c). See				
		Part IV, line 18				
	k	b Less: direct expenses 8b				
		c Net income or (loss) from fundraising events				
	9 a	a Gross income from gaming activities. See				
		Part IV, line 19 9a				
		b Less: direct expenses 9b				
		c Net income or (loss) from gaming activities a Gross sales of inventory, less returns				
	10 2	and allowances				
	ł	b Less: cost of goods sold 10b				
		c Net income or (loss) from sales of inventory				
		Business	Code			
Revenue	11 a	a INTERCOMPANY SERVICING 900099	2,604.			2,604
nue		b				
eve	c	c				
щ	c	d All other revenue				
•		e Total. Add lines 11a-11d				
	12	Total revenue. See instructions	501,684,291.	0.	0.	112,291

Form 990 (2022) ECMC FOUNDATION
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must complete all column	ns All other organizations must a	complete column (A)
	organizations must complete an column	ns. All other organizations must d	

	Check if Schedule O contains a respons not include amounts reported on lines 6b, 3b, 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	38,654,823.	38,654,823.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
6	trustees, and key employees	1,264,537.		1,264,537.	
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	3,032,263.	2,853,535.	178,728.	
U	section 401(k) and 403(b) employer contributions)	134,287.	126,372.	7,915.	
9	Other employee benefits	227,020.	213,639.	13,381.	
10 11 a	Payroll taxes Fees for services (nonemployees): Management	201,452.	189,578.	11,874.	
	Legal	77,411.		77,411.	
	Accounting	52,216.		52,216.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	6.024		6.024	
f	Investment management fees	6,234.		6,234.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)	2,022,381.	70,698.	1,951,683.	
12	Advertising and promotion	256 957	207 880	49 077	
13	Office expenses	256,957. 169,913.	207,980. 137,527.	48,977. 32,386.	
14 15	Information technology Royalties	105,513.	137,327.	52,500.	
16	Occupancy	348,415.	282,006.	66,409.	
17	Travel	288,877.	,	288,877.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	83,960.	54,812.	29,148.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	81,828.	66,231.	15,597.	
23 24	Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	61,415.		61,415.	
a b					
С					
d		7 000		7 000	
	All other expenses	7,922. 46,971,911.	42 857 201	7,922.	
25 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	±0,2/1,211.	42,857,201.	4,114,/10.	
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

ECMC FOUNDATION

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		Check if Schedule O contains a response or not	e to an	line in this Part X			X
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			9,324,068.	1	12,169,887.
	2	Savings and temporary cash investments			Ο.	2	0.
	3	Pledges and grants receivable, net			Ο.	3	0.
	4	Accounts receivable, net			5,329.	4	630.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e pers	ns	0.	5	0.
	6	Loans and other receivables from other disqualif	fied per	sons (as defined			
		under section 4958(f)(1)), and persons described			Ο.	6	0
s	7	Notes and loans receivable, net		F	٥.	7	0
Assets	8	Inventories for sale or use			0.	8	0
As	9	Prepaid expenses and deferred charges			202,880.	9	0.
		Land, buildings, and equipment: cost or other			· · · · · ·		
		basis. Complete Part VI of Schedule D	10a	236,540.			
	b	Less: accumulated depreciation		102,086.	167,321.	10c	134,454,
	11	Investments - publicly traded securities			0.	11	0,
	12	Investments - other securities. See Part IV, line 1			1,072,454,019.	12	1,552,643,281.
	13	Investments - program-related. See Part IV, line -		F	7,311,160.	13	9,944,019
	14	Intangible assets			0.	14	0
	15	Other assets. See Part IV, line 11			0.	15	1,029,208
	16	Total assets. Add lines 1 through 15 (must equa			1,089,464,777.	16	1,575,921,479
	17	Accounts payable and accrued expenses			522,533.	17	1,114,812
	18	Grants payable and accrued expenses			26,246,740.	18	26,949,951.
	19	Deferred revenue			0.	19	0
	20	Tax-exempt bond liabilities			0.	20	0
	20 21	Escrow or custodial account liability. Complete F			0.	20	0
	22	Loans and other payables to any current or form				21	•
ies	~~	trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes			0.	22	0
, Lial	0 2		-	F	0.	22	0.
	23 24	Secured mortgages and notes payable to unrela		Г	0.	23 24	0.
		Unsecured notes and loans payable to unrelated		Г	••	24	, , , , , , , , , , , , , , , , , , ,
1	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24	Complete Part X	575,677.	05	1,118,967
	06	of Schedule D			27,344,950.	25 26	29,183,730
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che		X	27,311,550.	20	25,105,750,
ŝ		.	ck ner				
Net Assets or Fund Balances	07	and complete lines 27, 28, 32, and 33.			1,062,119,827.	07	1,546,737,749
ala	27				0.	27 28	1,540,757,745
8 4	28	Net assets with donor restrictions			••	20	
E		Organizations that do not follow FASB ASC 99 and complete lines 29 through 33.	56, Che				
5.	~~						
sts ;	29 20	Capital stock or trust principal, or current funds				29	
SS(30	Paid-in or capital surplus, or land, building, or eq				30	
at ⊿	31	Retained earnings, endowment, accumulated inc		Г	1,062,119,827.	31	1,546,737,749.
_	32	Total net assets or fund balances				32	
	33	Total liabilities and net assets/fund balances			1,089,464,777.	33	1,575,921,479. Form 990 (2022

Form	990 (2022) ECMC FOUNDATION	41-19906	28	Pad	_{ge} 12
	rt XI Reconciliation of Net Assets				<u></u>
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	501,	684,	291.
2	Total expenses (must equal Part IX, column (A), line 25)	2	46,	971,	911.
3	Revenue less expenses. Subtract line 2 from line 1	3	454,	712,	380.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,062,	119,	827.
5	Net unrealized gains (losses) on investments	5	29,	645,	709.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		259,	833.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	1,546,	,737	749.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	-			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				v
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	<u> </u>

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047	
2022	

Open to Public Inspection

Name	of the	organization

Nam	e of t	the organization							identification number
Do	~+ I		OUNDATION	(All					41-1990628
Pa		Reason for Public C					ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of chu	-			n 170(b)(1	1)(A)(i).		
2		A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiza	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	d or operat	ed by a go	overnmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that normal	lly receives a substar	ntial part of its support f	rom a gove	ernmental	unit or from th	ne general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)((ix) operate	ed in conju	unction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
		university:							
10		An organization that normal	Ily receives (1) more	than 33 1/3% of its supp	port from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	fter June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12	X	An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	or section	509(a)(2).	See section	509(a)(3). 🤇	Check the box on
		_lines 12a through 12d that o	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and	12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	a majority c	of the direc	ctors or truste	es of the su	ipporting
		organization. You must c	omplete Part IV, Se	ections A and B.					
b	X	Type II. A supporting orga	anization supervised	or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ring
		control or management o	f the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or mana	ge the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,
		its supported organizatior	n(s) (see instructions)). You must complete	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	integrated. A supp	orting organization oper	rated in co	nnection v	vith its suppor	ted organiz	ation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	veness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	v .		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
		functionally integrated, or	Type III non-functior	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						2
g		vide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount or		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
EDU	CATIC	ONAL CREDIT							
MANA	GEME	ENT CORPORATION	41-1778617	10	X		46,	971,833.	0.
ECMO	EDU	JCATION, INC.	47-2237488	2	X			0.	0.
Tota	I						46,	971,833.	٥.

		CMC FOUNDATION				41-1990628	³ Page 2
Pa	IT II Support Schedule for	Organizations	Described in	Sections 170(b)(1)(A)(iv) and	d 170(b)(1)(A)(vi)	
	(Complete only if you checked			•	n failed to qualify	under Part III. If the org	ganization
	fails to qualify under the tests	listed below, plea	se complete Part	III.)			
Se	ction A. Public Support			•	1	· · ·	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
~	•••••••••••••••••••••••••••••••••••••••						
	Public support. Subtract line 5 from line 4. ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	(a) 2018	(b) 2019	(0) 2020	(u) 2021	(e) 2022	(1) 101ai
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section &	501(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I						%
15	Public support percentage from 2021						%
16 a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or n	nore, check this box a	nd
	stop here. The organization qualifies		•				
k	33 1/3% support test - 2021. If the c				l line 15 is 33 1/3%	6 or more, check this b	хох
	and stop here. The organization qual		• •				
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	t VI how the organizati	on 🖳
	meets the facts-and-circumstances te	-	-				
k	10% -facts-and-circumstances test	-					∕o Or
	more, and if the organization meets the					ination	
40	organization meets the facts-and-circu		-		• •		
18	Private foundation. If the organization	n dia not check a	box on line 13, 16	a, 100, 17a, 0r 17t	U, CHECK THIS DOX a	and see instructions .	<u></u>

ECMC FOUNDATION

Schedule A (Form 990) 2022

41-1990628

232022 12-09-22

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

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

Section A. H	Public Support						
Calendar year (o	r fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1 Gifts, gran	ts, contributions, and						
membersh	ip fees received. (Do not						
include an	y "unusual grants.")						
merchand formed, or any activit	eipts from admissions, ise sold or services per- facilities furnished in y that is related to the on's tax-exempt purpose						
3 Gross rece	eipts from activities that						
are not an	unrelated trade or bus-						
iness unde	er section 513						
4 Tax revenu	ues levied for the organ-						
ization's b	enefit and either paid to						
or expend	ed on its behalf						
5 The value	of services or facilities						
furnished	by a governmental unit to						
the organi	zation without charge						
6 Total. Add	l lines 1 through 5						
	ncluded on lines 1, 2, and						
3 received	from disqualified persons						
from other that exceed the gr	Ided on lines 2 and 3 received n disqualified persons that eater of \$5,000 or 1% of the e 13 for the year						
	7a and 7b						
	oport. (Subtract line 7c from line 6.)						
	Total Support						
Calendar year (o	r fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts f	rom line 6						
10a Gross inco dividends, securities	ome from interest, payments received on loans, rents, royalties, le from similar sources						
	usiness taxable income						
(less sectio	n 511 taxes) from businesses						
acquired aft	er June 30, 1975						
c Add lines	10a and 10b						
activities r	e from unrelated business not included on line 10b, r not the business is arried on						
or loss fro	me. Do not include gain m the sale of capital plain in Part VI.)						
	Int. (Add lines 9, 10c, 11, and 12.)						
14 First 5 yea	ars. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) orgai	nization,
check this	box and stop here						
Section C. C	Computation of Publi	c Support Per	centage				
15 Public sup	port percentage for 2022 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public sup	port percentage from 2021	Schedule A, Part	III, line 15			16	%
Section D. 0	Computation of Inves	stment Income	Percentage				
17 Investmen	t income percentage for 20)22 (line 10c, colur	mn (f), divided by l	ine 13, column (f))		17	%
18 Investmen	t income percentage from	2021 Schedule A,	Part III, line 17			18	%
	upport tests - 2022. If the					33 1/3%, and	line 17 is not
	33 1/3%, check this box ar						
	upport tests - 2021. If the						'3%, and
line 18 is r	not more than 33 1/3%, che	ck this box and st	op here. The orga	anization qualifies	as a publicly suppo	orted organiza	ation
	undation. If the organization						
232023 12-09-22						Schee	dule A (Form 990) 2022
			16	5			

Yes No

Х

Х

Х

x

Х

Х

Х

Х

Х

Х

Х

x

1

2

3a

3b

3c

4a

4b

4c

5a

5b

<u>5c</u>

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990) 2022

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

232024 12-09-22

Pal	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
_	11c below, the governing body of a supported organization?	11a		X
	A family member of a person described on line 11a above?	11b		X
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			v
Sec	<i>detail in</i> Part VI. tion B. Type I Supporting Organizations	11c		X
000			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		165	NU
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	Х	
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
а	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
с	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	is).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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.	3b		
232025	12-09-22 Schedul	e A (Forr	n 990)	2022

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 Schedule A (Form 990) 2022
 ECMC
 FOUNDATION

 Part IV
 Supporting Organizations
 (continued)

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41-1990628

Page 5

Nov. 20, 1970 (<i>explain in</i> Part VI). See instructio	g trust on Nov	Type III Non-Functionally Integrated 509(a)(3) Support Check here if the organization satisfied the Integral Part Test as a qualify All other Type III non-functionally integrated supporting organizations mu- tion A - Adjusted Net Income Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income	Sche Par 1 Secti 1 2 3 4 5 6 7 8
(A) Prior Year (B) Current Year (optional) (b) Current Year (B) Current Year	1 2 3 4 5 6 7	ion A - Adjusted Net Income Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	1 2 3
(A) Prior Year (optional)	2 3 4 5 6 7	Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	1 2 3
	2 3 4 5 6 7	Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	2
	3 4 5 6 7	Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	3
	4 5 6 7	Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	
	6 7	Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	4
	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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	
	7	collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	5
	7	maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	6
	7	Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	
		Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	
	8		7
		ion D. Minimum Accet Amount	8
		tion B - Minimum Asset Amount	ecti
		Aggregate fair market value of all non-exempt-use assets (see	1
		instructions for short tax year or assets held for part of year):	
	1a	Average monthly value of securities	а
	1b	Average monthly cash balances	b
	1c	Fair market value of other non-exempt-use assets	с
	1d	Total (add lines 1a, 1b, and 1c)	d
		Discount claimed for blockage or other factors	е
		(explain in detail in Part VI):	
	2	Acquisition indebtedness applicable to non-exempt-use assets	2
	3	Subtract line 2 from line 1d.	3
		Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	4
	4	see instructions).	
	5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5
	6	Multiply line 5 by 0.035.	6
	7	Recoveries of prior-year distributions	7
	8	Minimum Asset Amount (add line 7 to line 6)	8
Current Year		ion C - Distributable Amount	ecti
	1	Adjusted net income for prior year (from Section A, line 8, column A)	1
	2	Enter 0.85 of line 1.	2
	3	Minimum asset amount for prior year (from Section B, line 8, column A)	3
	4	Enter greater of line 2 or line 3.	4
	5	Income tax imposed in prior year	5
		Distributable Amount. Subtract line 5 from line 4, unless subject to	6
		emergency temporary reduction (see instructions).	
d Type III supporting organization	6	emergency temporary reduction (see instructions).	7

Schedule A (Form 990) 2022

232026 12-09-22

instructions).

Sche	dule A (Form 990) 2022 ECMC FOUNDATION				41-1990628	Page 7
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	Section D - Distributions Current Year					
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
_3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	าร	(iii) Distributa Amount for	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
a	From 2017					
b	From 2018					
c	From 2019					
d	From 2020					
e	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2022 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
<u>a</u>	Excess from 2018					
b	Excess from 2019					
C	Excess from 2020					
d	Excess from 2021					
e	Excess from 2022					

<u>Schedule A</u>	(Form 990) 2022		DUNDATION	41-1990628	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, lines 2 and	Provide the explanations required by Part II, li 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; F 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and t V, Section E, lines 2, 5, and 6. Also complete	?art IV, Section B, lines 1 and 2; Part IV, Sectio ∣ 3b; Part V, line 1; Part V, Section B, line 1e; P	n C,
	_				000) 0000
232028 12-09-2	2		21	Schedule A (Form	990) 2022

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

41-1990628

Internal Revenue Service	
Name of the organization	
ECMC	FOUNDATION
Organization type (check one)):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

Schedule B

Department of the Treasury

(Form 990)

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set.

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

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

Schedule B (Form 990) (2022)

	B (Form 990) (2022)		Page
Name of o	rganization		Employer identification number
ECMC FOU	INDATION		41-1990628
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
1		\$501,572,	000. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

	3 (Form 990) (2022) rganization		Page C Employer identification number
INAILIE OF OF	ganzation		
ECMC FOU	NDATION		41-1990628
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
1	PORTION OF POOLED INVESTMENTS HELD BY ECMC GROUP, INC		
		\$\$	000. 11/01/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
	PORTION OF POOLED INVESTMENTS HELD BY ECMC GROUP, INC		
		\$50,000,	000. 12/22/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	Liste received
		\$	

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ECMC FOU	NDATION			41-1990628	
Part III	Exclusively religious, charitable, etc., contributio from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cf Use duplicate copies of Part III if additional s	through (e) and the following line entry. I naritable, etc., contributions of \$1,000 or less	For organizations	at total more than \$1,000 for the year	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held	
	Transferee's name, address, an	(e) Transfer of gift d ZIP + 4	Relationship of trar	isferor to transferee	
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
-	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of trar	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gift			
-	Transferee's name, address, an	d ZIP + 4	Relationship of trar	isferor to transferee	

Schedule B (Form 990) (2022)

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25 2022.05000 ECMC FOUNDATION Page 4

Employer identification number

Schedule B (Form 990) (2022)
Name of organization

SCHEDULE I)
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Department of the Treasury

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 4 **Open to Public** Inspection

Internal Revenue Service	Go to www
Name of the organizati	on

ECMC FOUNDATION

Employer identification number

Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		or Ac	coun	its. Complete if th	ne
	organization answered Tes of Form 330, Fart IV, in	(a) Donor advised funds		h) Eun	ds and other accou	inte
	Tatal sumphies at and of uses		(b ji un		
1	Total number at end of year					
2 3	Aggregate value of contributions to (during year) Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	L writing that the assets held in donor advis	ed fund	le		
Ŭ	are the organization's property, subject to the organization's	-			Yes	No
6	Did the organization inform all grantees, donors, and donor a					
Ū	for charitable purposes and not for the benefit of the donor of					
		······································		•	Yes	No
Par						
1	Purpose(s) of conservation easements held by the organizati					
	Preservation of land for public use (for example, recrea		f a histo	rically	important land area	1
	Protection of natural habitat	Preservation o		-	-	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a cor	servat	tion easement on th	ne last
	day of the tax year.				Held at the End of th	e Tax Year
а	Total number of conservation easements			2a		
b				2b		
с	Number of conservation easements on a certified historic str	ucture included in (a)		2c		
d	Number of conservation easements included in (c) acquired a	after July 25,2006, and not on a				
	historic structure listed in the National Register			2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organiz	zation	during the tax	
	year					
4	Number of states where property subject to conservation east	sement is located				
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements in					No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servatio	n ease	ments during the ye	ear
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion eas	sement	ts during the year	
•				•		
8	Does each conservation easement reported on line 2(d) abov					
•						└── No
9	In Part XIII, describe how the organization reports conservati	•				
	balance sheet, and include, if applicable, the text of the footr	iote to the organization's infancial statem	ents tha	it desc	indes the	
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	f Art. Historical Treasures, or Ot	her Si	imila	r Assets.	
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95	, ,	nd bala	nce sh	neet works	
	of art, historical treasures, or other similar assets held for pul					
	service, provide in Part XIII the text of the footnote to its final					
b	If the organization elected, as permitted under FASB ASC 95			sheet	works of	
	art, historical treasures, or other similar assets held for public					
	provide the following amounts relating to these items:			•		
	(i) Revenue included on Form 990, Part VIII, line 1				\$	
					\$	
2	If the organization received or held works of art, historical tre					
	the following amounts required to be reported under FASB A					
а	Revenue included on Form 990, Part VIII, line 1				\$	
	Assets included in Form 990, Part X				\$	
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.			Schedule D (Form	990) 2022
232051	09-01-22					
		26				

<u>Sche</u>	dule D (Form 990) 2022 ECMC FOUNDA							41-199		P	_{age} 2
Pa	rt III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	easures, o	r Othe	r Simila	r Assets	contii	nued)	
3	Using the organization's acquisition, accession	on, and other record	ls, check a	any of the f	following that	make s	ignificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	c	1 🗌 L	oan or exc	hange progra	am					
b	Scholarly research	e	• 🗌 c	other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how the	y further th	ne organizatio	n's exer	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, hist	orical treas	sures, or othe	er similar	assets		_		_
_	to be sold to raise funds rather than to be ma								Yes		No
Pa	t IV Escrow and Custodial Arran		ete if the o	organizatio	on answered '	'Yes" or	Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
1 a	Is the organization an agent, trustee, custodi							_	-	_	-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing ta	ble:							
									Amoun	t	
С	Beginning balance										
d	Additions during the year										
e	Distributions during the year										
t	Ending balance								7.4		.
	Did the organization include an amount on Fe						• • • • • • • •	L	Yes		_ No
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i										<u></u>
1 4		(a) Current year		ior year	(c) Two year		(d) Three y	lears hack	(e) Fou	r vears	hack
4	Designing of year belongs	(a) Guirent year		ior year		5 Duck			(0) 1 00	yours	buok
1a ⊾	Beginning of year balance										
U Q	Contributions										
с А	Net investment earnings, gains, and losses Grants or scholarships										
u	Other expenditures for facilities										
e											
f	Administrative expenses										
י ת											
2	End of year balance Provide the estimated percentage of the curr		e (line 1a	column (a)) held as:						
- a	Board designated or quasi-endowment	,	%	oolanni (a	<i>,,,</i> 11010 00.						
b	Permanent endowment	%									
c		/°									
-	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse		ation that	are held ar	nd administer	ed for th	ne				
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
Pa	rt VI Land, Buildings, and Equipm	ient.									
	Complete if the organization answere	d "Yes" on Form 990	D, Part IV,	line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or c basis (investr		• •	t or other (other)	• •	ccumulate preciation		(d) Boo	k valu	е
1a	Land										
b	Buildings										
с	Leasehold improvements				143,661.		57,	275.		86,	386.
d	Equipment				92,879.		44,	811.		48,	068.
е	Other										
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part	X. columr	n (B), line 1	0c.)					134,	454.

Schedule D (Form 990) 2022

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Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A) INVESTMENT IN ECMC GROUP, INC			
(B) APPORTIONED INVESTMENT POOL	1,552,643,281.	END-OF-YEAR MARKET VALUE	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	4 550 640 004		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,552,643,281.		
Part VIII Investments - Program Related.	n Fauna 000 Bast IV line 1	1. Cas Farm 000 Dart V line 10	
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)			(
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	· -·, ·····		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
I. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE TO ECMC GROUP, INC			167,126
(3) DUE TO ECMC SHARED SERVICES COMPANY, L	LC		58,358
(4) LEASE LIABILITIES			893,483
(5)			
(6)			
(7)			
(8)			
(9)			
• •			

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

Schedule D (Form 990) 2022

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Sche	dule D (Form 990) 2022 ECMC FOUNDATION			41-19	90628 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	29,858,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	29,645,709.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	100,000.		
е	Add lines 2a through 2d			2e	29,745,709.
3	Subtract line 2e from line 1			3	112,291.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	501,572,000.		
с	Add lines 4a and 4b			4c	501,572,000.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	501,684,291.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	tements With	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total expenses and losses per audited financial statements			1	46,812,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	100,000.		
е	Add lines 2a through 2d			2e	100,000.
	Subtract line 2e from line 1			3	46,712,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	259,911.		
с	Add lines 4a and 4b			4c	259,911.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18,)		5	46,971,911.
Pa	rt XIII Supplemental Information.	-			
Prov	de 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 inforn	nation.		
PART	YX, LINE 2:				

THE FIN 48 (ASC 740) DISCLOSURE IN THE ECMC FOUNDATION FINANCIAL

STATEMENTS READS AS FOLLOWS:

THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT ECMC FOUNDATION IS

CLASSIFIED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE

INTERNAL REVENUE CODE (IRC) AND IS NOT A PRIVATE FOUNDATION UNDER IRC

SECTIONS 509(A)(1) AND 170(B)(1)(A)(IV). AS SUCH, ECMC FOUNDATION IS

EXEMPT FROM INCOME TAXES UNDER IRC SECTION 501(A) EXCEPT ON UNRELATED

BUSINESS INCOME; AS A PUBLIC CHARITY, CONTRIBUTIONS TO ECMC FOUNDATION ARE

DEDUCTIBLE. ECMC FOUNDATION IS ALSO EXEMPT FROM STATE INCOME TAX.

ECMC FOUNDATION FOLLOWS THE ACCOUNTING STANDARDS IN EVALUATING UNCERTAIN

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Schedule D (Form 990) 2022 ECMC FOUNDATION	41–1990628 Page 5
Part XIII Supplemental Information (continued)	
TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES	
FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED	
TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. NO	
LIABILITY HAS BEEN RECOGNIZED BY ECMC FOUNDATION FOR UNCERTAIN TAX	
POSITIONS AS OF DECEMBER 31, 2022 OR 2021. ECMC FOUNDATION'S TAX RETURNS	
ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
PROGRAM RELATED INVESTMENT LOSS WRITE OFF 100,000.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
CONTRIBUTIONS FROM ECMC GROUP, INC 501,572,000.	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
PROGRAM RELATED INVESTMENT LOSS WRITE OFF 100,000.	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
CANCELLED/REFUNDED GRANTS CORRECTLY AWARDED IN THE PRIOR YEARS	
ON ECMC FOUNDATION'S BOOKS 259,833.	
ROUNDING ADJUSTMENT DUE TO AFS REPORTING IN THOUSANDS 78.	
TOTAL TO SCHEDULE D, PART XII, LINE 4B 259,911.	
	Schedule D (Form 990) 2022

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SCHEDULE I (Form 990)	Go	Grants and Oth vernments, ar lete if the organizatio	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury	•	C C	Attach to Form				Open to Public
Internal Revenue Service		Go to www.irs	s.gov/Form990 for	the latest information	ation.		Inspection
Name of the organization ECMC FOUNDATION	ON						Employer identification number 41-1990628
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records to							
criteria used to award the grants or assis 2 Describe in Part IV the organization's pro-		oring the use of grant	funds in the United	l States			
Part II Grants and Other Assistance to recipient that received more than S	Domestic Organiz	zations and Domestic	c Governments. C	Complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
826 MSP							
1915 E 22ND ST							
MINNEAPOLIS, MN 55404	27-1372442	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ACADEMY OF HOLY ANGELS 6600 NICOLLET AVE S							
RICHFIELD, MN 55423	41-0696903	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ACHIEVING THE DREAM 8484 GEORGIA AVE STE 500 SILVER SPRING, MD 20910	27-1635830	501(C)(3)	45,768.	0.			GENERAL SUPPORT
SHVER STRING, MD 20910	27 1033030	501(0)(3)	45,700.				SEMERAL SOTIONI
ACTIVE MINDS 2001 S ST NW, STE 630							
WASHINGTON, DC 20009	20-0587172	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ADOPT-A-CLASSROOM INC 10 s fifth st ste 835							
MINNEAPOLIS, MN 55402	65-0828272	501(C)(3)	25,000.	0.			GENERAL SUPPORT
AFRICAN AMERICAN LEADERSHIP FORUM 1625 HENNEPIN AVE, STE 200							
MINNEAPOLIS, MN 55403	47-2200830	501(C)(3)	7,500.	0.			GENERAL SUPPORT
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in th	e line 1 table				
3 Enter total number of other organizations	s listed in the line ⁻	1 table					

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

Schedule I (Form 990) ECMC FOUNDATION
Part II Continuation of Grants and Other As:

41-1990628 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN AMERICAN MALE EDUCATION							
NETWORK DEVELOPMENT ORGANIZATION -							
PO BOX 151 - ELK GROVE, CA 95759	71-1037144	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ALBUQUERQUE ACADEMY							
6400 WYOMING BLVD NE							
ALBUQUERQUE, NM 87109	85-0129165	501(C)(3)	15,000.	0.			GENERAL SUPPORT
AMERICAN COUNCIL ON EDUCATION							
ONE DUPONT CIRCLE NW							
WASHINGTON, DC 20036	53-0196573	501(C)(3)	1,000,000.	0.			PROGRAM SUPPORT
AMI KIDS							
5915 BENJAMIN CENTER DR							
TAMPA, FL 33634	23-7440836	501(C)(3)	20,000.	0.			GENERAL SUPPORT
ANN BANCROFT FOUNDATION							
2356 UNIVERSITY AVE W STE 404							
ST. PAUL, MN 55114	41-1691868	501(0)(3)	17,500.	0.			GENERAL SUPPORT
51. FROI, MN 55114	41-1091000	501(0)(3)	17,500.	0.			GENERAL SUFFORT
APPETITE FOR CHANGE, INC.							
1200 W BROADWAY AVE #250							
MINNEAPOLIS, MN 55411	27-5112040	501(C)(3)	20,000.	0.			GENERAL SUPPORT
APPRENTICESHIPS FOR AMERICA							
7213 BYBROOK LN							
CHEVY CHASE, MD 20815	87-2326163	501(C)(3)	75,000.	0.			GENERAL SUPPORT
ARIZONA STATE UNIVERSITY	07-2320103	501(0)(3)	,5,000.	0.			SENERAL SUFFORI
FOUNDATION FOR A NEW AMERICAN							
UNIVERSITY – 300 E UNIVERSITY DR 6TH FI – TEMPE, AZ 85281	86-6051042	501(C)(3)	75,000.	0.			GENERAL SUPPORT
	00 0001042		, , , , , , , , , , , , , , , , , , , ,				DEREMAN DOLLOKI
ASIAN PACIFIC AMERICAN LEADERSHIP							
FOUNDATION - 2275 HUNTINGTON DR NO							
378 - SAN MARINO, CA 91108	13-4277572	501(C)(3)	25,000.	Ο.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATION

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION FOR CAREER AND TECHNICAL EDUCATION - 1410 KING ST - ALEXANDRIA, VA 22314	52-0632865	501(C)(3)	72,515.	0.			GENERAL SUPPORT
BAKER VALLEY UNIFIED SCHOOL DISTRICT - 72100 SCHOOL HOUSE LN - BAKER, CA 92309	95-3155696	SCHOOL	10,000.	0.			GENERAL SUPPORT
BELIEVE IN STUDENTS INC 1755 N 13TH ST #295 PHILADELPHIA, PA 19122	81-3612875	501(C)(3)	30,000.	0.			GENERAL SUPPORT
BESTPREP 7100 NORTHLAND CIR N #306 MINNEAPOLIS, MN 55428	41-1265355	501(C)(3)	15,000.	0.			GENERAL SUPPORT
BEYOND12 1625 CLAY ST STE 100 OAKLAND, CA 94612	27-1275246	501(C)(3)	800,000.	0.			COLLEGE SUCCESS
BIG BROTHERS BIG SISTERS OF AMERICA - NATIONAL OFFICE - 2502 N ROCKY POINT DR STE 550 - TAMPA, FL 33607	23-1365190	501(C)(3)	800,000.	0.			COLLEGE SUCCESS
BIG BROTHERS BIG SISTERS OF METRO ATLANTA - PO BOX 78215 - ATLANTA, GA 30357	58-0861895	501(C)(3)	20,000.	0.			GENERAL SUPPORT
BOY WITH A BALL PO BOX 748 BUFORD, GA 30515	74-2994124	501(C)(3)	20,000.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE TWIN CITIES - 690 JACKSON ST - ST. PAUL, MN 55130	41-0842657	501(C)(3)	20,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATION
Part II Continuation of Grants and Other As:

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Part II Continuation of Grants and Other	Assistance to Do	lestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt n.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREAKTHROUGH COLLABORATIVE							
PO BOX 71420							
OAKLAND, CA 94612	94-3140620	501(C)(3)	400,000.	0.			COLLEGE SUCCESS
B'S GIRLS FOUNDATION							
PO BOX 670167							
HOUSTON, TX 77267	82-5456072	501(C)(3)	20,000.	0.			GENERAL SUPPORT
CALIFORNIA STATE UNIVERSITY							
FOUNDATION - 401 GOLDEN SHORE -							COLLEGE SUCCESS & GENERAL
LONG BEACH, CA 90802	95-6123757	501(C)(3)	675,000.	0.			SUPPORT
CALIFORNIA STATE UNIVERSITY	55 6125757	501(0)(5)					
NORTHRIDGE FOUNDATION - 18111							
NORDHOFF ST VALERA HALL 100 -							
NORTHRIDGE, CA 91330	95-6196006	501(C)(3)	450,000.	0.			COLLEGE SUCCESS
CALIFORNIA STATE UNIVERSITY,							
CHANNEL ISLANDS FOUNDATION - 1							
UNIVERSITY DR - CAMARILLO, CA							
93012	77-0433230	501(C)(3)	86,820.	0.			GENERAL SUPPORT
CAMPAIGN FOR COLLEGE OPPORTUNITY							
1149 S HILL ST, STE 925 LOS ANGELES, CA 90015	20-0427622	501(0)(2)	15,000.	0.			GENERAL SUPPORT
	20-0427022	501(0)(5)	15,000.	0.			SENERAL SUFFORT
CAPITAL AREA FOOD BANK							
4900 PUERTO RICO AVE, NE							
WASHINGTON, DC 20017	52-1167581	501(0)(3)	10,000.	0.			GENERAL SUPPORT
	52 1107501	501(0)(3)	10,000.	0.			SENERAL SOLLORI
CAPITAL IDEA HOUSTON							
2101 CRAWFORD ST STE 211							
HOUSTON, TX 77002	47-2462360	501(C)(3)	500,000.	0.			CAREER READINESS
CARRIE STEEL-PITTS HOME							
667 FAIRBURN RD NW							
ATLANTA, GA 30331	58-0607078	501(C)(3)	20,000.	٥.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CCF COMMUNITY INITIATIVES FUND 221 S FIGUEROA ST STE 400							
LOS ANGELES, CA 90012	95-4774698	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CENTREVILLE LAYTON SCHOOL 6201 KENNETT PIKE CENTREVILLE, DE 19807	51-0232858	SCHOOL	10,000.	0.			GENERAL SUPPORT
CHILDREN'S CHOICE FOR HEARING AND TALKING SACRAMENTO - 11100 COLOMA RD - RANCHO CORDOVA, CA 95670	46-1362294	501(C)(3)	20,000.	0.			GENERAL SUPPORT
CHULA VISTA ELEMENTARY SCHOOL DISTRICT - 84 E J ST - CHULA							
VISTA, CA 91910	95-6000613	SCHOOL	10,000.	0.			GENERAL SUPPORT
CITY YEAR 2331 ALHAMBRA BLVD #300 SACRAMENTO, CA 95817	22-2882549	501(C)(3)	2,000,000.	0.			PANDEMIC RECOVERY & CAREER READINESS
CIVIC NATION 1156 15TH ST NW STE 1000	45.2556010	501 (2) (2)	50.000				
WASHINGTON, DC 20005 CLAREMONT GRADUATE UNIVERSITY 150 E 10TH ST	47-3576918	501(C)(3)	50,000.	0.			GENERAL SUPPORT
CLAREMONT, CA 91711	95-1664100	501(C)(3)	750,000.	0.			COLLEGE SUCCESS
COLABORATIVOPR PO BOX 16699							
SAN JUAN, PR 00908	66-0901994	501(C)(3)	75,000.	0.			GENERAL SUPPORT
COLLEGE HOUSING NORTHWEST 200 SW MARKET ST STE 575							
PORTLAND, CA 90650	95-0578172	501(C)(3)	5,250.	٥.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATION 41-1990628 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE NOW GREATER CLEVELAND							
1500 W 3RD ST, STE 125							
CLEVELAND, OH 44113	34-6580096	501(C)(3)	240,000.	0.			COLLEGE SUCCESS
COLLEGE TRACK							
112 LINDEN ST							
OAKLAND, CA 94607	94-3279613	501(C)(3)	500,000.	0.			COLLEGE SUCCESS
COMMUNITIES IN SCHOOLS OF NEVADA							
2080 E FLAMINGO RD STE 225							
LAS VEGAS, NV 89119	88-0292094	501(C)(3)	15,000.	0.			GENERAL SUPPORT
COMMUNITY COLLEGE BACCALAUREATE							
ASSOCIATION - 575 LAKE BINGHAM RD		501 (2) (2)	500.000	0			
- LAKE MARY, FL 32746	65-1026796	501(C)(3)	500,000.	0.			CAREER READINESS
CALIFORNIA COMPETES							
254 AMHERST AVE							CAREER READINESS &
KENSINGTON, CA 94708	88-2393598	501(C)(3)	515,000.	0.			COLLEGE SUCCESS
CORO SOUTHERN CALIFORNIA							
1000 N ALAMEDA STSTE 240							
LOS ANGELES, CA 90012	95-4274561	501(C)(3)	25,000.	0.			GENERAL SUPPORT
	23 12,1301		20,000.				
CORPORATION FOR A SKILLED							
WORKFORCE - 1100 VICTORS WYSTE 10							CAREER READINESS &
- ANN ARBOR, MI 48108	38-2991143	501(C)(3)	492,160.	0.			GENERAL SUPPORT
CREATIVE VISIONS FOUNDATION							
18820 CA-1STE 201							
MALIBU, CA 90265	39-1902814	501(C)(3)	700,000.	0.			CAREER READINESS
				.			
CREDIT ABUSE RESISTANCE EDUCATION							
66 CANAL CENTER PLAZASTE 600							
ALEXANDRIA, VA 22314	81-0788458	501(C)(3)	10,000.	Ο.			GENERAL SUPPORT

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Schedule I (Form 990) ECMC FOONDATTC							41-1990020 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELASALLE HIGH SCHOOL							
1 DELASALLE DR							
MINNEAPOLIS, MN 55401	41-0705834	SCHOOL	45,000.	0.			GENERAL SUPPORT
DOWNTOWN WOMEN'S CENTER							
442 S SAN PEDRO ST	21 1507000	F01 (q) (2)	10.000	0			
LOS ANGELES, CA 90013	31-1597223	501(C)(3)	10,000.	0.			GENERAL SUPPORT
EAST SIDE NEIGHBORHOOD SERVICES							
1700 2ND ST NE							
MINNEAPOLIS, MN 55413	41-0873798	501(C)(3)	20,000.	Ο.			GENERAL SUPPORT
ECMC GROUP							
111 WASHINGTON AVE SSTE 1400							
MINNEAPOLIS, MN 55401	41-1991995	501(C)(3)	500,000.	0.			CAREER READINESS
EDNORTH							
33 S 6TH ST #3600	47-3490710	$E_{01}(a)(2)$	10,000.	0.			GENERAL SUPPORT
MINNEAPOLIS, MN 55402	47-3490710	501(C)(3)	10,000.	0.			GENERAL SUPPORT
EDSOURCE INC.							
436 14TH STSTE 1005							
DAKLAND, CA 94612	94-2434900	501(C)(3)	75,000.	Ο.			GENERAL SUPPORT
EDUCATION COMMISSION OF THE STATES							
700 BROADWAY ST#810							
DENVER, CO 80203	31-0722194	501(C)(3)	209,000.	0.			COLLEGE SUCCESS
EDUCATIONAL CREDIT MANAGEMENT							
CORPORATION - 111 WASHINGTON AVE	44 4550645	F01 (q) (2)	0.150.000				
SSTE 1400 - MINNEAPOLIS, MN 55401	41-1778617	5UI(C)(3)	2,150,000.	0.			COLLEGE SUCCESS
EQUIPHER, INC.							
17401 COMMERCE PARK BLVDSTE 103							
_, COMMENCE THAT DEVEOTE 103			1			1	1

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Schedule I (Form 990) ECMC FOUNDATIO	DIN						41-1990028 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVERY MEAL							
2723 PATTON RD							
ROSEVILLE, MN 55113	80-0919680	501(C)(3)	20,000.	٥.			GENERAL SUPPORT
FAMILY SCHOLAR HOUSE, INC. 403 REG SMITH CIR LOUISVILLE, KY 40208	61-1285124	501(C)(3)	450,000.	0.			CAREER READINESS
FLANDERS FIELD LTD 745 ATLANTA HWYSTE 108 CUMMING, GA 30040	86-2812024	501(0)(3)	10,000.	0.			GENERAL SUPPORT
	00 2012024	501(0)(3)	10,000.				SENERAL SUITORI
FLORIDA A&M UNIVERSITY FOUNDATION							
625 E TENNESSEE ST							
TALLAHASSEE, FL 32308	59-6175096	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FOOD & FRIENDS, INC. 219 RIGGS RD NE							
WASHINGTON, DC 20011	52-1648941	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FOUNDATION FOR CALIFORNIA COMMUNITY COLLEGES - 1102 Q STSTE 4800 - SACRAMENTO, CA 95811	68-0412350	501(C)(3)	560,000.	0.			COLLEGE SUCCESS & GENERA SUPPORT
FOUNDATION FOR EDEN PRAIRIE SCHOOLS - 8100 SCHOOL RD - EDEN							
PRAIRIE, MN 55344	43-1999421	501(C)(3)	15,000.	0.			GENERAL SUPPORT
FOUNDATION FOR THE LOS ANGELES COMMUNITY COLLEGES - 770 WILSHIRE							
BLVD9TH FL - LOS ANGELES, CA 90017	95-4106993	501(C)(3)	25,000.	0.			GENERAL SUPPORT
FRIENDS OF JACLYN FOUNDATION 1557 RTE 82 STE 9							
HOPEWELL JUNCTION, NY 12533	20-8326822	501(C)(3)	10,000.	0.			GENERAL SUPPORT

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Schedule I (Form 990) ECMC FOUNDATIC							41-1990020 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF PARKS AND RECREATION							
273 WOODBURY AVE							
MARTINSBURG, WV 25404	86-2215340	501(C)(3)	10,000.	0.			GENERAL SUPPORT
,			, ,				
FRIENDS OF SOUTH HIGH FOUNDATION							
3131 19TH AVE S							
MINNEAPOLIS, MN 55407	41-1506266	501(C)(3)	40,000.	0.			GENERAL SUPPORT
FUNDERS TOGETHER TO END							
HOMELESSNESS, INC 89 SOUTH ST89							
S ST - BOSTON, MA 02111	27-3033048	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GRANTMAKERS FOR EDUCATION							
400 SE 103RD DR#33348							
PORTLAND, OR 97216	33-0919329	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GREAT RIVER SCHOOL							
1326 ENERGY PARK DR	24 1075207	F01(a)(2)	10.000				
ST. PAUL, MN 55108	34-1975307	501(C)(3)	10,000.	0.			GENERAL SUPPORT
GREEN DOT PUBLIC SCHOOLS							
1149 S HILL ST#600							
LOS ANGELES, CA 90015	95-4679811	501(C)(3)	35,000.	٥.			GENERAL SUPPORT
,							
GWINNETT CHATT OUTREACH (GCO)							
PO BOX 1293							
DACULA, GA 30019	84-1888539	501(C)(3)	20,000.	٥.			GENERAL SUPPORT
HEALING WOMEN OF ATLANTA, INC.							
943 SUNDEW DR SE							
CONYERS, GA 30013	46-2626164	501(C)(3)	20,000.	0.			GENERAL SUPPORT
HENRY E. HUNTINGTON LIBRARY AND							
ART GALLERY - 1151 OXFORD RD - SAN							
MARINO, CA 91108	95-1644589	501(C)(3)	17,500.	0.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATIO							41-1990628 Pa
Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Dor (b) EIN	(c) IRC section if applicable	and Domestic Go (d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHER LEARNING ADVOCATES 1201 CONNECTICUT AVE NWSTE 651							
WASHINGTON, DC 20036	81-4690411	501(C)(3)	150,000.	0.			CAREER READINESS
HILLSDALE COLLEGE 33 E COLLEGE ST							
HILLSDALE, MI 49242	38-1374230	501(C)(3)	10,000.	0.			GENERAL SUPPORT
HOMEBOY INDUSTRIES 130 W BRUNO ST							
LOS ANGELES, CA 90012	95-4800735	501(C)(3)	50,000.	0.			GENERAL SUPPORT
HOPE 4 YOUTH 2191 NORTHDALE BLVD NW							
COON RAPIDS, MN 55433	46-1626500	501(C)(3)	20,000.	0.			GENERAL SUPPORT
IMPACT TEEN DRIVERS FUND 2210 21ST ST							
SACRAMENTO, CA 95818	26-0595165	501(C)(3)	10,000.	0.			GENERAL SUPPORT
IND SCHOOL DISTRICT 717 315 SUNSET DR							
JORDAN, MN 55352	41-6003790	SCHOOL DISTRICT	15,000.	0.			GENERAL SUPPORT
INDIGENOUS ROOTS 788 E 7TH ST							
ST. PAUL, MN 55106	47-4492457	501(C)(3)	20,000.	0.			GENERAL SUPPORT
INSTITUTE FOR HIGHER EDUCATION POLICY - 1825 K ST NW, STE 720 -							
VASHINGTON, DC 20006	52-1818907	501(C)(3)	75,000.	0.			PROGRAM SUPPORT
INSTITUTE FOR LEADERSHIP EDUCATION, ADVANCEMENT, AND							
DEVELOPMENT, INC 1122 COUNTY LINE RD - BRYN MAWR, PA 19010	23-2821833	501(C)(3)	200,000.	0.			CAREER READINESS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTEGRATED REFUGEE & IMMIGRANT SERVICES - 235 NICOLL ST - NEW							
HAVEN, CT 06511	06-0653044	501(C)(3)	20,000.	0.			GENERAL SUPPORT
ISD 196 - ROSEMOUNT HIGH SCHOOL 3455 153RD ST W							
ROSEMOUNT, MN 55068	41-6007792	SCHOOL DISTRICT	10,000.	0.			GENERAL SUPPORT
ITHAKA HARBORS, INC. ONE LIBERTY PLAZA5TH FL							
NEW YORK, NY 10006	13-3857105	501(C)(3)	760,750.	0.			COLLEGE SUCCESS
JEREMIAH PROGRAM							
615 1ST AVE NESTE 210 MINNEAPOLIS, MN 55413	41-1801834	501(C)(3)	540,000.	0.			CAREER READINESS & GENERAL SUPPORT
JEWISH COMMUNITY CENTER OF GREATER ALBUQUERQUE - 5520 WYOMING BLVD NE							
- ALBUQUERQUE, NM 87109	85-0457178	501(C)(3)	10,000.	0.			GENERAL SUPPORT
JOBPATH, INC. 616 N COUNTRY CLUB RDSTE 110							
TUCSON, AZ 85716	65-1190309	501(C)(3)	422,000.	0.			CAREER READINESS
JOBS FOR THE FUTURE 50 MILK ST17TH FL							
BOSTON, MA 02109	06-1164568	501(C)(3)	415,000.	0.			CAREER READINESS
JOHN N. GARDNER INSTITUTE FOR EXCELLENCE IN UNDERGRADUATE EDUCATION - 11 PARK PL W -							
BREVARD, NC 28712	26-0166817	501(C)(3)	1,000,000.	0.			COLLEGE SUCCESS
JUNIOR ACHIEVEMENT NORTH 1745 UNIVERSITY AVE W							
ST. PAUL, MN 55104	41-1424988	501(C)(3)	10,000.	0.			GENERAL SUPPORT

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JUNIOR ACHIEVEMENT OF GEORGIA (JA)							
275 NORTHSIDE DR NWBUILDING C, 3RD							
ATLANTA, GA 30314	58-0598050	501(C)(3)	20,000.	0.			GENERAL SUPPORT
JUNIOR ACHIEVEMENT OF TAMPA BAY							
13707 N 22ND ST							
TAMPA, FL 33613	84-1267604	501(C)(3)	20,000.	0.			GENERAL SUPPORT
KIDS IN NEED FOUNDATION							
2719 PATTON RD							
ROSEVILLE, MN 55113	82-1078462	501(C)(3)	20,000.	0.			GENERAL SUPPORT
· ·			, ,				
LIBRARY FOUNDATION OF LOS ANGELES							
630 W 5TH ST							
LOS ANGELES, CA 90071	95-4368250	501(C)(3)	20,000.	0.			GENERAL SUPPORT
LOCKER PROJECT							
PO BOX 3134							
PORTLAND, ME 04104	47-1257754	501(C)(3)	40,000.	0.			GENERAL SUPPORT
,			,				
LOS ANGELES CITY COLLEGE							
FOUNDATION - 855 N VERMONT AVE -							
LOS ANGELES, CA 90029	95-6207819	501(C)(3)	15,000.	0.			GENERAL SUPPORT
LOS ANGELES LGBT CENTER							
1118 N MCCADDEN PL							
LOS ANGELES, CA 90038	95-3567895	501(C)(3)	20,000.	0.			GENERAL SUPPORT
			20,000.				
MACPHAIL CENTER FOR MUSIC							
501 S 2ND ST							
MINNEAPOLIS, MN 55401	41-1729340	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MARTHA'S TABLE							
2375 ELVANS RD SE							
WASHINGTON, DC 20090	52-1186071	F01(C)(2)	10,000.	0.			GENERAL SUPPORT

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MARY'S CENTER FOR MATERNAL AND							
CHILD CARE, INC 2333 ONTARIO RD							
NW - WASHINGTON, DC 20009	52-1594116	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MASSACHUSETTS DEPARTMENT OF HIGHER							
EDUCATION - ONE ASHBURTON PL -							
BOSTON, MA 02108	04-6002284	501(C)(3)	310,000.	0.			COLLEGE SUCCESS
MICHELSON 20MM FOUNDATION							
11755 WILSHIRE BLVD, STE 1400							
LOS ANGELES, CA 90025	27-2898736	501(C)(3)	20,000.	0.			GENERAL SUPPORT
MINDFUL LITTLES							
21C ORINDA WAY, #405							
ORINDA, CA 94563	82-1012917	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MINNEAPOLIS COLLEGE OF ART AND							
DESIGN - 2501 STEVENS AVE -							
MINNEAPOLIS, MN 55404	41-1607453	501(C)(3)	40,000.	0.			GENERAL SUPPORT
MINNESOTA ADULT & TEEN CHALLENGE							
740 E 24TH ST	41 1517251	F01(a)(2)		0			
MINNEAPOLIS, MN 55404	41-1517351	501(C)(3)	20,000.	0.			GENERAL SUPPORT
MINNESOTA PUBLIC RADIO / AMERICAN							
PUBLIC MEDIA - 480 CEDAR ST - ST.							
PAUL, MN 55101	41-0953924	501(C)(3)	75,000.	0.			GENERAL SUPPORT
MINNESOTA STATE COLLEGES AND							
UNIVERSITIES - 30 E 7TH ST - ST.							
PAUL, MN 55101	41-1687554	501(C)(3)	700,000.	0.			COLLEGE SUCCESS
MOMS ON A MISSION							
1109 LARKWOOD CT							
VIRGINIA BEACH, VA 23464	61-1949074	501(C)(3)	30,000.	Ο.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATIO		nostio Organizationa	and Domestic Co	wornmonte (Sch	dule I (Form 000) Do	rt II)	41-1990628 Pa
Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Dor (b) EIN	(c) IRC section (c) if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOONSHOT EDVENTURES							
3840 YORK STSTE 145							
DENVER, CO 80205	81-4177800	501(C)(3)	20,000.	0.			GENERAL SUPPORT
NATIONAL ASSOCIATION OF COUNTIES RESEARCH FOUNDATION - 660 N							
CAPITOL ST NWSTE 400 - WASHINGTON,	52 0041055	501 (2) (2)	200 500				
DC 20001	53-0241255	501(C)(3)	390,500.	0.			CAREER READINESS
NATIONAL ASSOCIATION OF SYSTEM HEADS (NASH) - 3300 METZEROTT RD -							
ADELPHI, MD 20783	20-8987993	501(C)(3)	75,000.	0.			GENERAL SUPPORT
NATIONAL CENTER FOR CIVIC INNOVATION - 121 AVE OF THE							
AMERICAS - NEW YORK, NY 10013	02-0590588	501(C)(3)	75,000.	0.			GENERAL SUPPORT
NATIONAL COLLEGE ATTAINMENT NETWORK – 800 17TH ST NW #630 – WASHINGTON, DC 20006	31-1793562	501(0)(3)	700,000.	0.			COLLEGE SUCCESS
AShingion, De 20000	51-1795502	501(0/(5)	700,000.	0.			COLLEGE SUCCESS
NATIONAL CONFERENCE OF STATE LEGISLATURES - 7700 E 1ST PL -							
DENVER, CO 80230	84-0772595	501(C)(3)	200,000.	0.			CAREER READINESS
NATIONAL PUBLIC RADIO 1111 N CAPITOL ST NE							
WASHINGTON, DC 20002	52-0907625	501(C)(3)	150,000.	0.			PROGRAM SUPPORT
NATIVITY OF OUR LORD SCHOOL 1900 STANFORD AVE							
ST. PAUL, MN 55105	41-0693956	501(C)(3)	10,000.	0.			GENERAL SUPPORT
NEW AMERICA 740 15TH ST NWSTE 900							
VASHINGTON, DC 20005	52-2096845	501(C)(3)	7,500.	Ο.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATIO Part II Continuation of Grants and Other A		nestic Organizations	and Domestic Co	vernmente (Sche	dule I (Form 990) Pa		41-1990628 Pa
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW VENTURE FUND							
1828 L ST NWSTE 300-A							
WASHINGTON, DC 20036	20-5806345	501(C)(3)	500,000.	0.			COLLEGE SUCCESS
NORTH BRANCH AREA EDUCATION							
FOUNDATION - 5842 OLD MAIN ST STE							
7-4 - NORTH BRANCH, MN 55056	27-2029579	501(C)(3)	10,000.	0.			GENERAL SUPPORT
NORTH CAROLINA STATE UNIVERSITY							
2701 SULLIVAN DRSTE 240, CAMPUS BOX							
RALEIGH, NC 27695	56-6000756	501(C)(3)	1,402,799.	0.			CAREER READINESS
NORTH STAR OF CHESTER COUNTY							
330 W MARKET ST							
WEST CHESTER, PA 19382	23-2713075	501(C)(3)	10,000.	0.			GENERAL SUPPORT
NORTHSIDE ACHIEVEMENT ZONE (NAZ)							
2123 W BROADWAY AVE #100							
MINNEAPOLIS, MN 55411	30-0238807	501(C)(3)	20,000.	0.			GENERAL SUPPORT
NOTRE DAME HIGH SCHOOL OF WEST							
HAVEN, INC ONE NOTRE DAME WY -							
WEST HAVEN, CT 06516	06-0646748	SCHOOL	25,000.	0.			GENERAL SUPPORT
,			, ,				
ONWARD WE LEARN							
134 THURBERS AVE#111							
PROVIDENCE, RI 02905	22-3031765	501(C)(3)	10,000.	0.			GENERAL SUPPORT
OPPORTUNITY AMERICA EDUCATIONAL							
FUND - 737 8TH ST SESTE 201 -	47-1858873	501(0)(3)	75 000	0.			CAREER READINESS
WASHINGTON, DC 20003	4/-10000/3	501(C)(S)	75,000.	0.			CARDER READINESS
PETOSKEY-HARBOR SPRINGS AREA							
COMMUNITY FOUNDATION - 1349							
US-131STE A - PETOSKEY, MI 49770	38-3032185	501(C)(3)	10,000.	Ο.			GENERAL SUPPORT

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Schedule I (Form 990) ECMC FOUNDATI							41-1990020 F
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROPEL AMERICA							
800 BOLYSTON STPO BOX 990443							
BOSTON, MA 02199	83-1867782	501(C)(3)	500,000.	0.			CAREER READINESS
PROPEL NONPROFITS							
724 BIELENBERG DR #6							
WOODBURY, MN 55125	83-1217023	501(C)(3)	20,000.	0.			GENERAL SUPPORT
				.			
PROYECTO PASTORAL							
135 N MISSION RD							
LOS ANGELES, CA 90033	95-3213958	501(C)(3)	10,000.	0.			GENERAL SUPPORT
RAISE THE BARR							
2851 W 120TH ST, STE E #339							
HAWTHORNE, CA 90250	81-1234771	501(C)(3)	100,000.	0.			CAREER READINESS
RAND CORPORATION 1776 MAIN ST							
SANTA MONICA, CA 90401	95-1958142	501(C)(3)	999,835.	0.			CAREER READINESS
SANIA MONICA, CA 90401	95-1958142	501(C)(3)	333,035.	0.			CAREER READINESS
RESEARCH FOUNDATION OF THE CITY							
UNIVERSITY OF NEW YORK - 230 W							
41ST ST - NEW YORK, NY 10036	13-1988190	501(C)(3)	625,000.	0.			COLLEGE SUCCESS
			, ,				
REVE ACADEMY							
807 BROADWAY ST NESTE 160							
MINNEAPOLIS, MN 55413	27-4148333	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SACRAMENTO LOAVES AND FISHES							
PO BOX 13495							
SACRAMENTO, CA 95813	68-0189897	501(C)(3)	20,000.	0.			GENERAL SUPPORT
CARE HARDON OF CURCHER CONNEY							
SAFE HARBOR OF CHESTER COUNTY 20 N MATLACK ST							
WEST CHESTER, PA 19380	23-2734615	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MEDI CHEDIER, FR 19300	23-2/34013		1 10,000.	۰ ⁰		1	PENERAL SUFFORI

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANFORD SCHOOL							
6900 LANCASTER PIKE							
HOCKESSIN, DE 19707	51-0064331	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SANTA CLARA COUNTY OFFICE OF							
EDUCATION - 1290 RIDDER PARK DR,							
MC 201 - SAN JOSE, CA 95131	77-0272168	SANTA CLARA CTY	10,000.	٥.			GENERAL SUPPORT
SCHOOL DISTRICT OF NEW RICHMOND							
701 E 11TH ST							
NEW RICHMOND, WI 54017	39-6003673	SCHOOL DISTRICT	10,000.	٥.			GENERAL SUPPORT
SHARE THE TABLE, INC.							
PO BOX 4170	25 2525446		10.000				
SURF CITY, NC 28445	35-2587416	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SKILLPOINTE FOUNDATION, INC							
5256 PEACHTREE RDSTE 130							
CHAMBLEE, GA 30341	85-1384690	501(C)(3)	40,000.	0.			GENERAL SUPPORT
ST. CHARLES BORROMEO SCHOOL							
2727 STINSON BLVD							
ST. ANTHONY, MN 55418	41-0706912	SCHOOL	10,000.	0.			GENERAL SUPPORT
ST. DAVID'S CENTER							
3395 PLYMOUTH RD	41 1400000	F01(0)(2)	10.000	_			
MINNETONKA, MN 55305	41-1429208	DUT(C)(3)	10,000.	0.			GENERAL SUPPORT
STORYARK							
640 MAIN ST NSTE 34							
STILLWATER, MN 55082	81-3780329	501(C)(3)	20,000.	٥.			GENERAL SUPPORT
STRADA COLLABORATIVE							
10 W MARKET STSTE 1100				_			
INDIANAPOLIS, IN 46204	86-1250084	501(C)(3)	660,000.	0.			COLLEGE SUCCESS

Schedule I (Form 990) ECMC FOUNDATION 41-1990628 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUPPORTING THE TAYLOR HOUSE, INC.							
PO BOX 853							
ROSEVILLE, CA 95678	46-0748514	501(C)(3)	30,000.	0.			GENERAL SUPPORT
TAKE STOCK IN CHILDREN							
3000 NE 30TH PLSTE 409							
FORT LAUDERDALE, FL 33306	59-3331584	501(C)(3)	20,000.	0.			GENERAL SUPPORT
TEACH FOR AMERICA MUTH CIMITS							
TEACH FOR AMERICA, TWIN CITIES							
401 N 2ND AVE, STE 200	10 0541010	$E_{01}(a)(a)$	1 - 000				
MINNEAPOLIS, MN 55401	13-3541913	201(C)(2)	15,000.	0.			GENERAL SUPPORT
TEACHER'S COLLEGE, COLUMBIA							
UNIVERSITY - 525 W 120TH STBOX 21,							
47C HORACE MANN - NEW YORK, NY							
10027	13-1624202	501(C)(3)	75,000.	0.			PROGRAM SUPPORT
THE ANDREW MCDONOUGH B+ FOUNDATION							
101 ROCKLAND CIR							
WILMINGTON, DE 19803	42-1741037	501(C)(3)	10,000.	0.			GENERAL SUPPORT
	42 1741037	301(0)(3)	10,000.				
THE ASPEN INSTITUTE							
2300 N ST NWSTE 700							CAREER READINESS &
WASHINGTON, DC 20037	84-0399006	501(C)(3)	1,960,000.	0.			COLLEGE SUCCESS
THE CENTER TO ADVANCE CTE							
8484 GEORGIA AVE, STE 620							
SILVER SPRING, MD 20910	73-1086246	501(C)(3)	17,325.	0.			CAREER READINESS
THE CENTURY FOUNDATION							
1 WHITEHALL ST, FL 15							
NEW YORK, NY 10004	13-1624235	501(C)(3)	200,000.	0.			CAREER READINESS
THE COMMUNITY FOUNDATION FOR							
NORTHERN VIRGINIA - 2940 HUNTER							
MILL RD, STE 201 - OAKTON, VA							
22124	51-0232459	501(0)(2)	30,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATIC							41-1990628 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	ırt II.)	Γ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FORGE FOR FAMILIES							
3435 DIXIE DR							
HOUSTON, TX 77021	76-0485959	501(C)(3)	20,000.	Ο.			GENERAL SUPPORT
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	501(0)(0)	20,000.				
THE INSTITUTE FOR CITIZENS &							
SCHOLARS - 104 CARNEGIE CENTERSTE							CAREER READINESS &
301 - PRINCETON, NJ 08540	21-0703075	501(C)(3)	290,806.	Ο.			GENERAL SUPPORT
,							
THE OHIO STATE UNIVERSITY							
29 W WOODRUFF AVE301-G RAMSEYER HA							
COLUMBUS, OH 43210	31-1145986	501(C)(3)	499,913.	Ο.			CAREER READINESS
THE PARTNERSHIP PLAN							
1875 GREELEY ST S							
STILLWATER, MN 55082	20-3012418	501(C)(3)	10,000.	Ο.			GENERAL SUPPORT
THE REGENTS OF THE UNIVERSITY OF							
CALIFORNIA - 1111 FRANKLIN ST -							
OAKLAND, CA 94607	94-3067788	501(C)(3)	75,000.	0.			GENERAL SUPPORT
THE REINVESTMENT FUND, INC.							
1700 MARKET ST19TH FL							
PHILADELPHIA, PA 19103	23-2331946	501(C)(3)	300,000.	0.			COLLEGE SUCCESS
THE SANNEH FOUNDATION							
2090 CONWAY ST							
ST. PAUL, MN 55119	56-2332269	501(C)(3)	15,000.	0.			GENERAL SUPPORT
THE TRUSTEES OF COLUMBIA							
JNIVERSITY IN THE CITY OF NEW YORK							
- 615 W 131ST ST3RD FL - NEW YORK,							EDUCATION INNOVATION
VY 10027	13-5598093	501(C)(3)	20,000.	0.			VENTURES
THE UCLA FOUNDATION							
JCLA EXTERNAL AFFAIRS, BOX							
951590WILSHIRE CENTER, STE 900 -							
LOS ANGELES, CA	95-2250801	501(C)(3)	120,000.	٥.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDAT							41-1990628 Pa
Part II Continuation of Grants and Other (a) Name and address of organization or government	(b) EIN	(c) IRC section (c) IRC section if applicable	a and Domestic Go (d) Amount of cash grant	vernments (Sche (e) Amount of noncash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	rt II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE URBAN INSTITUTE							
500 L'ENFANT PLAZA WASHINGTON, DC 20024	52-0880375	501(C)(3)	1,100,000.	0.			CAREER READINESS
THIRD SECTOR CAPITAL PARTNERS, INC 225 FRANKLIN STSTE 350 -			1,100,000.				
BOSTON, MA 02110	46-1301032	501(C)(3)	75,000.	0.			GENERAL SUPPORT
TREEHOUSE 5757 WAYZATA BLVD MINNEAPOLIS, MN 55416	91-1425676	501(C)(3)	10,000.	0.			GENERAL SUPPORT
TWIN CITIES RISE 1301 BRYANT AVE N							
MINNEAPOLIS, MN 55411	41-1761118	501(C)(3)	27,500.	0.			GENERAL SUPPORT
TWINSPIRE: TOGETHER WE INSPIRE 862 HILGARD AVE LOS ANGELES, CA 90024	84-1862747	501(C)(3)	20,000.	0.			GENERAL SUPPORT
UNDERSTOOD FOR ALL 96 MORTON ST, FL 5 NEW YORK NY 10014	83-2365235	501(0)(2)	10,000.	0.			GENERAL SUPPORT
NEW YORK, NY 10014 UNITED NEGRO COLLEGE FUND 1805 7TH ST NW	03 2303233	501(0)(3)	10,000.				SALARD SOFFORT
WASHINGTON, DC 20001	13-1624241	501(C)(3)	740,250.	0.			COLLEGE SUCCESS
UNIVERSITY OF CENTRAL MISSOURI 108 W S STADMIN BUILDING 102 WARRENSBURG, MO 64093	44-6000293	501(C)(3)	450,000.	0.			CAREER READINESS
UNIVERSITY OF HOUSTON DOWNTOWN ONE MAIN STSTE S990	44-0000293	501(0)(3)	*30,000.				CANEER READINESS
HOUSTON, TX 77002	74-6001399	501(C)(3)	10,000.	Ο.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATIO							41-1990628 Pa
Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Doi (b) EIN	mestic Organizations (c) IRC section if applicable	s and Domestic Go (d) Amount of cash grant	vernments (Sche (e) Amount of noncash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA							
SYSTEM - 910 RALEIGH RD - CHAPEL							
HILL, NC 27514	56-6172047	501(C)(3)	600,000.	Ο.			COLLEGE SUCCESS
UNIVERSITY OF SOUTHERN CALIFORNIA,							
PULLIAS CENTER FOR HIGHER							
EDUCATION - 3470 TROUSDALE							
PKWYWAITE PHILLIPS HALL, WPH 701 -	95-1642394	501(C)(3)	159,203.	Ο.			PROGRAM SUPPORT
UNIVERSITY OF SOUTHERN CALIFORNIA,			, <u>,</u>				
RACE AND EQUITY CENTER - 635							
DOWNEY WY, VPD 214 - LOS ANGELES,							
, , , , , , , , , , , , , , , , , , ,	95-1642394	501(C)(3)	1,839,180.	Ο.			PROGRAM SUPPORT
URBAN VENTURES LEADERSHIP							
FOUNDATION - 2924 4TH AVE S -							
MINNEAPOLIS, MN 55408	36-3558710	501(C)(3)	20,000.	Ο.			GENERAL SUPPORT
VASSAR COLLEGE							
124 RAYMOND AVE							
POUGHKEEPSIE, NY 12604	14-1338587	501(C)(3)	410,000.	٥.			PROGRAM SUPPORT
VIRGINIA FOUNDATION FOR COMMUNITY							
COLLEGE EDUCATION - 300 ARBORETUM							
PLSTE 390 - RICHMOND, VA 23236	23-7004354	501(C)(3)	583,000.	Ο.			CAREER READINESS
WILLIAMSON COLLEGE OF THE TRADES							
106 S NEW MIDDLETOWN RD							
MEDIA, PA 19063	23-1352691	501(C)(3)	20,000.	0.			GENERAL SUPPORT
WORKCRED							
1899 L ST NW11TH FL							
WASHINGTON, DC 20036	47-1467778	501(C)(3)	758,000.	0.			CAREER READINESS
YOUNG MEN'S CHRISTIAN ASSOCIATION							
OF THE NORTH - 651 NICOLLET AVESTE							
500 - MINNEAPOLIS, MN 55414	45-2563299	501(C)(3)	15,000.	Ο.			GENERAL SUPPORT

Schedule I (Form 990) ECMC FOUNDATION 41-1990628 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH FIRST COMMUNITY OF PROMISE							
RAMSEY, MN 55303	26-1914148	501(C)(3)	20,000.	0.			GENERAL SUPPORT
EDUCATION WRITERS ASSOCIATION 1825 k ST NW, STE 200 WASHINGTON, DC 20006	23-7439790	501(C)(3)	50,000.	0.			PROGRAM SPONSORSHIP
FOUNDATION FOR CA COMMUNITY COLLEGES – 1102 Q ST, STE 4800 – SACRAMENTO, CA 95811	68-0412350	501(C)(3)	20,000.	0.			PROGRAM SPONSORSHIP
GRANTMAKERS FOR EDUCATION 851 SW 6TH AVE, STE 350							
PORTLAND, OR 97204	33-0919329	501(C)(3)	7,500.	0.			PROGRAM SPONSORSHIP
INSIDE HIGHER ED 1150 CONNECTICUT AVE NW, STE 400 WASHINGTON, DC 20036	80-0093170		9,000.	0.			PROGRAM SPONSORSHIP
THE CAMPAIGN FOR COLLEGE			5,000.				
OPPORTUNITY - 1149 S HILL ST, STE 925 - LOS ANGELES, CA 90015	20-0427622	501(C)(3)	20,000.	0.			PROGRAM SPONSORSHIP

232102	10-31-22

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

Part III

HELPING LOW-INCOME STUDENTS PURSUE HIGHER EDUCATION IS CORE TO ECMC

FOUNDATION'S MISSION. ECMC GROUP. INC CLOSELY MONITORS THE USE OF THE CASH

GRANTS TO ECMC GROUP. INC. THROUGH REPORTS TO MANAGEMENT AND THE BOARD OF

DIRECTORS ON A REGULAR BASIS. THE REMAINING GRANTS AND ASSISTANCE TO THE

ORGANIZATIONS LISTED IN PART II FURTHER ECMC FOUNDATION'S MISSION AND

PROGRAM EVALUATIONS ARE PART OF ALL GRANT PROJECTS FUNDED.

(Form 990) 2022 ECMC FOU	NDATION				41-1990628	Page 2
Grants and Other Assistance to Do Part III can be duplicated if additiona		e organization answe	ered "Yes" on Form 9	90, Part IV, line 22.		
(a) Type of grant or assistance	e (b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash ass	istance

ECMC FOUNDATION Schedule I (Form 990) 2022

SCI	IEDULE J	Compensation Information	L	OMB No.	1545-00	47			
(Foi	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		20	22)			
		Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to	Duki	.			
	partment of the Treasury Attach to Form 990. ernal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
	e of the organization		Employer ic	Inspe Ientificatio		mber			
	C C	ECMC FOUNDATION		90628					
Pa	rt I Question	s Regarding Compensation							
	•				Yes	No			
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,						
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or c	harter travel Housing allowance or residence for perso	nal use						
	Travel for com	panions Payments for business use of personal re	sidence						
	X Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S						
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)						
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or							
		rovision of all of the expenses described above? If "No," complete Part III to explain		1 b	X				
	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	х				
•									
3		ny, of the following the organization used to establish the compensation of the organization's							
		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the OFO/F and the Director but any location Part III	on to						
	·	ation of the CEO/Executive Director, but explain in Part III.							
			ommittee						
		ther organizations	ommittee						
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
•	organization or a re								
а	•	e payment or change-of-control payment?		4a		x			
		eive payment from a supplemental nonqualified retirement plan?			х				
	-	eive payment from an equity-based compensation arrangement?				X			
	•	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5	For persons listed o	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on						
	contingent on the re	evenues of:							
	The organization?					X			
b	Any related organiz	ation?		. 5 b	х				
		r 5b, describe in Part III.							
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on						
	contingent on the n	et earnings of:							
						X			
b		ation?		. <u>6</u> b	X	-			
_		or 6b, describe in Part III.							
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		_		v			
~		nes 5 and 6? If "Yes," describe in Part III		7		X			
		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v			
				8		X			
9		id the organization also follow the rebuttable presumption procedure described in							
	Regulations section			9	n 000	1 2000			
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schedi	ile J (Forr	11 390	, 2022			

232111 10-18-22

41-1990628

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) GREGORY A. VAN GUILDER	(i)	0.	0.	0.	0.	0.	0.	0.
FORMER CFO, ECMC GROUP CIO	(ii)	681,535.	509,800.	152,195.	89,868.	9,636.	1,443,034.	41,000.
(2) JEREMY J. WHEATON	(i)	0.	0.	0.	0.	0.	0.	0.
PRES & CEO-PART YR, SR ADVISOR	(ii)	408,446.	800,000.	63,060.	18,300.	34,229.	1,324,035.	20,500.
(3) DANIEL S. FISHER	(i)	0.	0.	0.	0.	0.	0.	0.
GRP PRES & CEO (EFF 7-3-22)	(ii)	484,979.	504,688.	23,826.	78,235.	34,212.	1,125,940.	20,500.
(4) MARTIN A. SCANLON	(i)	0.	0.	0.	0.	0.	0.	0.
CFO & TREASURER	(ii)	415,034.	412,500.	24,432.	68,435.	28,561.	948,962.	20,500.
(5) PETER J. TAYLOR	(i)	495,758.	100,000.	124,109.	155,065.	22,896.	897,828.	117,934.
PRESIDENT & DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) BRIAN BOARDMAN	(i)	0.	0.	0.	0.	0.	0.	0.
GRP GENERAL COUNSEL & CORP SEC	(ii)	264,020.	110,925.	7,267.	39,552.	36,934.	458,698.	4,556.
(7) LYNN ALVAREZ	(i)	305,531.	0.	4,514.	36,877.	19,787.	366,709.	600.
VP FDN PROGRAMS & STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JENNIFER E. ZEISLER	(i)	187,668.	0.	1,500.	22,820.	11,672.	223,660.	0.
SR DIR, PROGRAM MANAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JESSICA E. HASELTON	(i)	167,255.	0.	1,459.	14,032.	35,669.	218,415.	0.
DIR, EDUCATION INNOV VENTURES	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SARAH BELNICK	(i)	168,427.	0.	846.	20,716.	22,902.	212,891.	0.
SR DIR, PROGRAM MANAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JAMES V. MCKEON	(i)	0.	0.	0.	0.	0.	0.	0.
BOARD CHAIR NOT PD BY FDN	(ii)	196,250.	0.	0.	0.	0.	196,250.	0.
(12) LORAINE PARK	(i)	127,574.	0.	1,201.	16,147.	26,162.	171,084.	0.
SR MGR, LEARNING & IMPACT	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MAURICE M. SALTER	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR NOT PD BY FDN	(ii)	157,500.	0.	0.	0.	0.	157,500.	0.
(14) DIANA J. INGRAM	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR NOT PD BY FDN	(ii)	156,250.	0.	0.	0.	0.	156,250.	0.
(15) JULIA S. GOUW	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR NOT PD BY FDN	(ii)	155,000.	0.	0.	0.	0.	155,000.	0.
(16) K. PAUL SINGH	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR NOT PD BY FDN	(ii)	152,500.	0.	0.	0.	0.	152,500.	0.

41-1990628

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) JOHN F. DEPODESTA	(i)	0.	0.	0.	0.	0.	0.	0.
FORMER BD CHAIR NOT PD BY FDN	(ii)	75,000.	0.	0.	0.	0.	75,000.	0.
(18) ROBERTA COOPER RAMO	(i)	0.	0.	0.	0.	0.	0.	0.
FORMER DIRECTOR NOT PD BY FDN	(ii)	60,000.	0.	0.	0.	0.	60,000.	0.
(19) I. KING JORDAN	(i)	0.	٥.	0.	٥.	0.	0.	0.
FORMER DIRECTOR NOT PD BY FDN	(ii)	30,000.	٥.	0.	٥.	0.	30,000.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

ECMC FOUNDATION Schedule J (Form 990) 2022

41-1990628

Page 3

Part III Supplemental Information

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

PART I, LINE 1A:

CERTAIN TAXABLE BENEFITS ARE GROSSED UP TO MAKE THE EMPLOYEE WHOLE: THIS

HAS BEEN APPROVED BY THE BOARD OF DIRECTORS.

PART I, LINE 3:

AS NOTED IN PART VII OF FORM 990 AND SCHEDULE J. PART II. THE ONLY

EXECUTIVE OFFICER COMPENSATED BY ECMC FOUNDATION WAS THE PRESIDENT. PETER

J. TAYLOR. ALL OTHER EXECUTIVE OFFICERS' COMPENSATION WAS PAID BY RELATED

ORGANIZATIONS.

PART I, LINE 4B:

ECMC GROUP. INC. MAINTAINS A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

DESCRIBED IN SECTION 457(F). AND A SUPPLEMENTAL EMPLOYEE RETIREMENT PLAN

(SERP). TO ATTRACT AND RETAIN EMPLOYEES. TYPICALLY IN MANAGEMENT POSITIONS.

IN 2022, GREGORY A. VAN GUILDER, DANIEL S. FISHER AND MARTIN A. SCANLON

PARTICIPATED IN THE 457(F) PLAN. AND RECEIVED EMPLOYER CONTRIBUTIONS OF

\$8,268, \$19,135, AND \$9,335, RESPECTIVELY, AND PETER J. TAYLOR PARTICIPATED

IN THE SERP PLAN AND RECEIVED AN EMPLOYER CONTRIBUTION OF \$100,765.

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Part III Supplemental Information

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

PART I, LINE 5:

AS NOTED IN PART VII OF FORM 990 AND SCHEDULE J, PART II, THE ONLY

EXECUTIVE OFFICER COMPENSATED BY ECMC FOUNDATION WAS THE PRESIDENT, PETER

J. TAYLOR. ALL OTHER EXECUTIVE OFFICERS' COMPENSATION WAS PAID BY RELATED

ORGANIZATIONS. ECMC GROUP, INC.'S ANNUAL OFFICER INCENTIVE PLAN REQUIRES

ACHIEVEMENT OF STATED PRIMARY FINANCIAL GOALS, WHICH INCLUDES REVENUES,

BEFORE ANY PAYMENT TO ANY OFFICER IS MADE.

PART I, LINE 6:

AS NOTED IN PART VII OF FORM 990 AND SCHEDULE J, PART II, THE ONLY

EXECUTIVE OFFICER COMPENSATED BY ECMC FOUNDATION WAS THE PRESIDENT, PETER

J. TAYLOR. ALL OTHER EXECUTIVE OFFICERS' COMPENSATION WAS PAID BY RELATED

ORGANIZATIONS. ECMC GROUP, INC.'S ANNUAL OFFICER INCENTIVE PLAN REQUIRES

ACHIEVEMENT OF STATED KEY PERFORMANCE METRICS, WHICH INCLUDES NET EARNINGS

BEFORE ANY PAYMENT TO ANY OFFICER IS MADE.

Pag<u>e 3</u>

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

22

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

20

Name of the organization

41-1990628

NDATION		

Pal	תון וא	pes of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VI	ted on	(d) Method of de noncash contribu		•	s
1	Art - Works	s of art								
2		rical treasures								
3		onal interests								
4		publications								
- 5		nd household goods								
6		other vehicles								
7		planes								
8		I property								
9		- Publicly traded								
10		- Closely held stock								
11		- Partnership, LLC, or								
		ests								
12	Securities	- Miscellaneous								
13	Qualified c	conservation contribution -								
	Historic st	ructures								
14	Qualified c	conservation contribution - Other \dots								
15	Real estate	e - Residential								
16	Real estate	e - Commercial								
17		e - Other								
18		s								
19		ntory								
20		medical supplies								
21		······································								
22		artifacts								
23		specimens								
24		ical artifacts								
25	Other	(INV - FRACT INT)	x	2	450 0	00 000	FAIR MARKET VALU	R		
25 26		()						_		
	Other	()								
27	Other	()								
28	Other			 						
29		Forms 8283 received by the organi	-			~			0	
	tor which t	he organization completed Form 82	283, Part V, L	onee Acknowledg	ement [29				
									Yes	No
30a		year, did the organization receive b								
	must hold	for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to	be used t	or			
	exempt pu	irposes for the entire holding period	?					30a		X
b	lf "Yes," d	escribe the arrangement in Part II.								
31	Does the o	organization have a gift acceptance	policy that re	quires the review o	of any nonstandard	l contribut	ions?	31		X
32a	Does the o	organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell	noncash				
	contributio	ons?						32a		x
b	lf "Yes," d	escribe in Part II.								
33	If the orga	nization didn't report an amount in o	column (c) fo	r a type of property	for which column	(a) is chec	ked,			
	describe ir									
ΙНА		erwork Reduction Act Notice, see	the Instruct	tions for Form 990).		Schedule N	l (Forn	n 990)	2022

Schedule M (Form 990) 2022 ECMC FOUNDATION

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

SCHEDULE M, PART I, COLUMN (B):

OTHER - INVESTMENT - FRACTIONAL INTEREST. THE NUMBER REPORTED IN PART

I, LINE 25, COLUMN B IS BASED ON THE NUMBER OF CONTRIBUTIONS RECEIVED.

SCHEDULE M, PART I, LINE 25 - INVESTMENT - FRACTIONAL INTEREST:

PARTICIPATION IN THE ECMC GROUP, INC. APPORTIONED INVESTMENT POOL

("APPORTIONED INVESTMENT POOL") IS AVAILABLE TO ECMC GROUP, INC. AND

ITS ELIGIBLE SUBSIDIARIES.

INVESTMENTS IN ECMC GROUP, INC. APPORTIONED INVESTMENT POOL REPRESENT

AN OWNERSHIP INTEREST IN THE APPORTIONED INVESTMENT POOL MANAGED BY

ECMC GROUP, INC., NOT THE UNDERLYING ASSETS THEMSELVES. THE OWNERSHIP

INTERESTS IN THE APPORTIONED INVESTMENT POOL ARE NOT THEMSELVES

PUBLICLY TRADED. NOR CAN THEY BE VALUED BASED ON DIRECT OR INDIRECT

INPUTS AS DEFINED BY FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING

STANDARDS CODIFICATION 820.

ECMC FOUNDATION'S INVESTMENTS CONSIST OF POOLED FUNDS INVESTED WITH

ECMC GROUP, INC. THAT ARE GENERALLY REDEEMABLE UPON REQUEST AS

DESIGNATED BY THE BOARD OF DIRECTORS. THE POOLED INVESTMENT IS UNDER

FAIR VALUE HIERARCHY, A LEVEL 2 INVESTMENT. INVESTMENTS ARE RECORDED AT

ESTIMATED FAIR VALUE, USING THE PRACTICAL EXPEDIENT. THE PRACTICAL

EXPEDIENT ALLOWS FOR THE USE OF A PROPORTIONATE SHARE OF THE

APPORTIONED INVESTMENT POOL TO BE UTILIZED TO ESTIMATE FAIR VALUE.

THE INVESTMENT STRATEGY OF THE POOLED FUNDS OF ECMC GROUP, INC.'S

APPORTIONED INVESTMENT POOL IS TO DIVERSIFY RISK AND PROVIDE A RETURN

232142 09-09-22

Schedule M	l (Form 990) 2022	ECMC FOUNDAT					41-1990628	Page 2
Part II	Supplementa is reporting in Par this part for any a	I Information. t I, column (b), the dditional informat	Provide the informa e number of contribution.	tion required by P tions, the number	Part I, lines 30b, 32b of items received, c	, and 33, and r a combinat	l whether the orga ion of both. Also c	nization complete
THAT SATI	SFIES LONG-TER	M OBJECTIVES	•					
232142 09-09-2	22						Schedule M (F	orm 990) 2022

15191115 153541 2841764

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 41-1990628

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ECMC FOUNDATION

ECMC FOUNDATION IS A GRANTMAKING FOUNDATION FOCUSED ON IMPROVING HIGHER

EDUCATION AND CAREER SUCCESS AMONG UNDERSERVED POPULATIONS THROUGH

EVIDENCE-BASED INNOVATION. ECMC FOUNDATION DOES THIS BY SUPPORTING

THREE FOCUS AREAS: COLLEGE SUCCESS, CAREER READINESS AND EDUCATION

INNOVATION VENTURES; AND USES A SPECTRUM OF FUNDING STRUCTURES,

INCLUDING STRATEGIC GRANTMAKING AND PROGRAM-RELATED INVESTMENTS. SINCE

INCEPTION, THE FOUNDATION HAS PROVIDED FUNDING IN 49 STATES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OUTCOMES. COLLEGE SUCCESS CURRENTLY FOCUSES ITS GRANTMAKING TOWARD

PROGRAMS, INSTITUTIONAL NETWORKS, RESEARCH AND POLICY THAT ADDRESS

BASIC NEEDS, IMPROVING CREDIT MOBILITY AND TRANSFER, ENHANCING

STUDENT-CENTERED SUPPORT AND REFORMING SYSTEMIC APPROACHES TO ENHANCE

COMPLETION. ADDITIONALLY, COLLEGE SUCCESS HAS MADE SIGNIFICANT

INVESTMENTS IN COALITION EFFORTS WORKING TO MOVE THE NEEDLE ON KEY

ISSUES: BASIC NEEDS INITIATIVE AND CATALYZING TRANSFER INITIATIVE.

DURING 2022, ECMC FOUNDATION EVALUATED ITS CURRENT STRATEGIC APPROACH

TO GRANT MAKING AND INVESTING TO INCORPORATE ITS LEARNINGS OVER THE

YEARS. AS A RESULT, ECMC FOUNDATION EXPANDED ITS COMMITMENT TO DRIVE

SYSTEMIC CHANGE IN THE POSTSECONDARY ECOSYSTEM. THE NEW STRATEGIC

FRAMEWORK FOCUSES ON REMOVING BARRIERS FROM STUDENTS, BUILDING CAPACITY

WITHIN THE EDUCATION SECTOR AND TRANSFORMING THE OVERALL HIGHER

EDUCATION ECOSYSTEM, WITH A FOCUS ON CONTINUOUS MEASUREMENT, LEARNING

AND EVALUATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22 6 2

Schedule O (Form 990) 2022

ECMC FOUNDATION

Page 2 Employer identification number 41-1990628

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

SUPPORT ORGANIZATIONS TO RESEARCH, EVALUATE AND SHARE EFFORTS TO

IMPROVE PRACTICE AND INFORM POLICY. THE PROGRAM IS ROOTED IN THE BELIEF

THAT LEARNERS WHO COMPLETE CREDIT-BEARING PROGRAMS AND EARN ACADEMIC

CREDENTIALS WILL EXPERIENCE IMPROVED ECONOMIC STABILITY AND INCREASED

SOCIAL MOBILITY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CHANGES IN ECONOMIC MOBILITY FOR LEARNERS AND JOBSEEKERS. AT YEAR END

2022, ECMC FOUNDATION HAS DEPLOYED NEARLY \$12 MILLION IN

PROGRAM-RELATED INVESTMENTS TO COMPLEMENT THE GRANTMAKING IN COLLEGE

SUCCESS AND CAREER READINESS PROGRAMS.

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

OTHER PROGRAMS.

MISCELLANEOUS PROGRAMS AND ACTIVITIES FOR THE FURTHERANCE OF

EDUCATIONAL OPPORTUNITIES THROUGH GRANTS, AWARDS AND RESEARCH ON THE

MANAGEMENT OF EDUCATIONAL DEBT.

GO! PROGRAM.

ECMC FOUNDATION AWARDS GRANTS TO THE GENERATING OUTCOMES (GO!) PROGRAM,

A CORPORATE INITIATIVE TO FUND EDUCATION INNOVATION BY FUNDING IDEAS

AND PARTNERSHIPS THAT CAN BE EXAMINED FOR EFFECTIVENESS IN THE LOCAL

COMMUNITIES OF THE ECMC GROUP, INC. EMPLOYEES. TO QUALIFY FOR PAYMENT

OF A GO! PROGRAM GRANT, THE AWARDED RECIPIENT MUST BE A THIRD-PARTY

NONPROFIT ENTITY OR A GOVERNMENTAL PARTNER, SUCH AS PUBLIC SCHOOLS, AND

EXPEND THE GRANT AWARD FOR THE PURPOSE DESIGNATED IN THE RECIPIENT'S

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Name of the organization ECMC FOUNDATION	Employer identification number 41–1990628
	41 1990020
GRANT PROPOSAL. IN 2022, ECMC FOUNDATION AWARDED GRANTS RANGING FROM	
\$5,000 TO \$20,000 EACH TO 111 ORGANIZATIONS FOR A TOTAL OF \$1.09	
AILLION.	
EXPENSES \$ 11,415,560. INCLUDING GRANTS OF \$ 9,620,453. REVENUE \$ 0.	
FORM 990, PART VI, SECTION A, LINE 2:	
MR. MCKEON AND MR. SALTER - BUSINESS RELATIONSHIP	
FORM 990, PART VI, SECTION A, LINE 6:	
ECMC FOUNDATION HAS ONE MEMBER. THE MEMBER IS ECMC GROUP, INC. A DELAWARE,	
NONSTOCK, NONPROFIT CORPORATION EXEMPT UNDER SECTION 501(C)(3). THERE ARE	
NO STOCKHOLDERS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
CCMC GROUP, INC. HAS THE RIGHT TO ELECT AND/OR APPROVE ALL THE DIRECTORS OF	
THE ECMC FOUNDATION BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION A, LINE 7B:	
SCMC GROUP, INC., THE SOLE MEMBER OF ECMC FOUNDATION, RETAINS THE FOLLOWING	
AUTHORITY OVER ECMC FOUNDATION:	
L. TO AUTHORIZE AMENDMENTS TO THE ARTICLES OF INCORPORATION AND BYLAWS.	
2. TO APPROVE THE STRATEGIC AND FINANCIAL PLANS.	
3. TO ELECT AND/OR APPROVE THE MEMBERS OF THE BOARD OF DIRECTORS.	
4. TO OVERSEE COORDINATION OF PROGRAMS AND SERVICES OFFERED.	
5. TO AUTHORIZE FORMATION, GOVERNANCE AND DISSOLUTION.	
TORM 990 PART VI SECTION B LINE 11B.	
FORM 990, PART VI, SECTION B, LINE 11B:	

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Name of the organization ECMC FOUNDATION	Employer identification number 41-1990628
A CODY OF FORM 000 TO DEVICE AND DEOVICE COMPANY DETOR TO BUILING ALL	
A COPY OF FORM 990 TO REVIEW AND PROVIDE COMMENTS PRIOR TO FILING. ALL	
MEMBERS OF THE BOARD OF DIRECTORS AND EXECUTIVE MANAGEMENT ARE PROVIDED	
WITH A COPY OF THE FINAL VERSION OF FORM 990 BEFORE IT HAS BEEN FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS, DIRECTORS AND ALL EMPLOYEES ARE REQUIRED TO REAFFIRM ON AN ANNUAL	
BASIS THEIR UNDERSTANDING OF THE COMPANY'S CONFLICT OF INTEREST POLICY. THE	_
AFFIRMATION SPECIFICALLY REFERENCES THAT THE INDIVIDUAL WILL COMPLY WITH	_
THE DIRECTIVES OF THE CONFLICT OF INTEREST POLICY. OFFICERS, DIRECTORS AND	
KEY EMPLOYEES ARE ALSO REQUIRED TO COMPLETE AN ANNUAL FORM 990 RELATIONSHIP	
DISCLOSURE DOCUMENT TO IDENTIFY ANY POTENTIAL CONFLICTS OF INTEREST.	
FINALLY, THE COMPANY'S VENDOR PROCUREMENT PROCESS INCLUDES QUESTIONS OF	
BUSINESS UNIT CONTRACT OWNERS TO DETERMINE IF ANY CONFLICTS OF INTEREST MAY	
EXIST. MONITORING AND ENFORCEMENT OF THE POLICY ARE ACCOMPLISHED THROUGH	
THE POLICY REAFFIRMATION PROCESS, AFFIRMATIVE DISCLOSURE REQUESTS AND THE	
POLICY REQUIREMENT THAT ALL CONFLICTS OF INTEREST BE REPORTED.	
IN CASES WHERE A POTENTIAL CONFLICT EXISTS AT THE OFFICER AND KEY EMPLOYEE	
LEVELS, THE ISSUE IS DISCLOSED TO THE INDIVIDUAL'S SUPERVISOR, GENERAL	
COUNSEL AND/OR VICE PRESIDENT, DEPUTY GENERAL COUNSEL. FOR POTENTIAL	
CONFLICTS INVOLVING DIRECTORS, THE DISCLOSURE IS MADE TO THE BOARD CHAIR.	
THE DIRECTOR WILL BE REQUIRED TO EXCUSE THEMSELVES FROM DELIBERATION AND	
VOTING ON MATTERS FOR WHICH THEY MAY HAVE A CONFLICT OF INTEREST.	
FORM 990, PART VI, SECTION B, LINE 15:	
LINES 15A & 15B:	
AS NOTED IN PART VII OF FORM 990 AND SCHEDULE J, PART II, THE ONLY	
EXECUTIVE OFFICER COMPENSATED BY ECMC FOUNDATION WAS THE PRESIDENT, PETER	

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ECMC FOUNDATION

Employer identification number 41-1990628

J. TAYLOR. ALL OTHER EXECUTIVE OFFICERS' COMPENSATION WAS PAID BY RELATED

ORGANIZATIONS.

THE GOVERNANCE & COMPENSATION COMMITTEE OF THE ECMC GROUP, INC. BOARD OF

DIRECTORS IS WHOLLY COMPRISED OF INDEPENDENT, OUTSIDE DIRECTORS. IN 2022,

THE COMMITTEE RETAINED EXECUTIVE COMPENSATION EXPERTS FROM GRANT THORNTON

AND AON, GLOBAL COMPENSATION CONSULTING ORGANIZATIONS, THROUGH ARNOLD &

PORTER KAYE SCHOLER LLP TO IDENTIFY APPROPRIATE CEO AND SENIOR EXECUTIVE

COMPENSATION PACKAGES. ARNOLD & PORTER KAYE SCHOLER LLP PROVIDED AN OPINION

ON THE REASONABLENESS OF THIS COMPENSATION. THE MARKET ANALYSIS PERFORMED

BY GRANT THORNTON AND AON FOR ARNOLD & PORTER KAYE SCHOLER LLP INCLUDES

SALARY AND INCENTIVE DATA FROM AN APPROPRIATE PEER GROUP UNDER IRS

REGULATIONS AND INCLUDES ONLY NONPROFIT ENTITIES FOR THE ECMC FOUNDATION

PRESIDENT.

FORM 990, PART VI, SECTION C, LINE 19:

THE FORM 990 IS MADE AVAILABLE TO THE PUBLIC ON ECMC FOUNDATION'S WEBSITE

DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC AS REQUIRED BY LAW.

FORM 990, PART VI, SECTION B, LINE 13:

THE ECMC GROUP, INC. WHISTLEBLOWER POLICY REQUIRES DIRECTORS, OFFICERS

AND EMPLOYEES TO OBSERVE HIGH STANDARDS OF BUSINESS AND PERSONAL ETHICS

IN THE CONDUCT OF THEIR DUTIES AND RESPONSIBILITIES. EMPLOYEES AND

REPRESENTATIVES OF THE CORPORATION ARE DIRECTED TO PRACTICE HONESTY AND

INTEGRITY IN FULFILLING THEIR RESPONSIBILITIES AND COMPLY WITH ALL

APPLICABLE LAWS AND REGULATIONS. THE POLICY REQUIRES REPORTING OF

POTENTIAL ILLEGAL PRACTICES OR VIOLATIONS OF CORPORATE POLICIES, AND

PROHIBITS RETALIATION FOR GOOD FAITH REPORTING OF SUSPECTED VIOLATIONS

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ECMC FOUNDATION

Employer identification number 41-1990628

UNDER THE POLICY.

IN ADDITION, ECMC GROUP, INC. HAS A CODE OF ETHICS AND BUSINESS CONDUCT

POLICY THAT IS AFFIRMED ANNUALLY BY ALL ECMC GROUP, INC. AND AFFILIATED

COMPANIES' OFFICERS AND EMPLOYEES. THERE IS A PROVISION INCORPORATED

INTO THE CODE OF ETHICS AND BUSINESS CONDUCT POLICY THAT STATES THERE

CAN BE NO RETALIATION AGAINST ANYONE ACTING IN GOOD FAITH WHEN ASKING A

QUESTION, REPORTING A CONCERN OR FOR PARTICIPATING IN AN INVESTIGATION.

ECMC GROUP, INC. HAS ESTABLISHED A TELEPHONE HOTLINE AND WEBSITE

ADMINISTERED BY AN OUTSIDE VENDOR TO REPORT CONCERNS, WITH AN OPTION TO

REPORT ANONYMOUSLY. THE HOTLINE AND WEBSITE ARE AVAILABLE AND

ACCESSIBLE TO ECMC GROUP, INC. AND AFFILIATED COMPANIES' DIRECTORS,

OFFICERS, EMPLOYEES AND VENDORS.

FORM 990, PART VII, SECTION A:

ECMC FOUNDATION DIRECTORS DO NOT RECEIVE COMPENSATION FOR THEIR SERVICE

ASSOCIATED WITH ECMC FOUNDATION, BUT DO RECEIVE COMPENSATION FOR THEIR

SERVICE PROVIDED TO RELATED ORGANIZATIONS -- ECMC AND ECMC GROUP, INC.

WITH THE EXCEPTION OF THE PRESIDENT, PETER J. TAYLOR, THE EXECUTIVE

OFFICERS OF ECMC FOUNDATION DO NOT RECEIVE COMPENSATION FOR THEIR

SERVICE ASSOCIATED WITH ECMC FOUNDATION, BUT DO RECEIVE COMPENSATION

FOR THEIR SERVICE PROVIDED TO RELATED ORGANIZATIONS--ECMC AND ECMC

GROUP, INC.

JOHN F. DEPODESTA, ROBERTA COOPER RAMO AND I. KING JORDAN, FORMER

DIRECTORS, HAD CONSULTING AGREEMENTS IN 2022.

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ECMC FOUNDATION

Employer identification number 41-1990628

FORM 990, PART X, LINE 12:

INVESTMENTS-OTHER SECURITIES OF \$1,552,264,845 ARE HELD IN THE ECMC

GROUP, INC. APPORTIONED INVESTMENT POOL AND \$878,436 ARE INVESTED IN A

FUND OUTSIDE OF THE APPORTIONED INVESTMENT POOL.

INVESTMENTS IN ECMC GROUP, INC. APPORTIONED INVESTMENT POOL REPRESENT

AN OWNERSHIP INTEREST IN THE INVESTMENT POOL MANAGED BY ECMC GROUP,

INC., NOT IN THE UNDERLYING ASSETS THEMSELVES. THE OWNERSHIP INTERESTS

IN THIS POOL ARE NOT THEMSELVES PUBLICLY TRADED, NOR CAN THEY BE VALUED

BASED ON DIRECT OR INDIRECT INPUTS AS DEFINED BY FINANCIAL ACCOUNTING

STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION TOPIC 820. ECMC

FOUNDATION'S INVESTMENTS CONSIST OF POOLED FUNDS INVESTED WITH ECMC

GROUP, INC. THAT ARE GENERALLY REDEEMABLE UPON REQUEST. THE POOLED

INVESTMENT IS, UNDER FAIR VALUE HIERARCHY, A LEVEL 2 INVESTMENT.

THE INVESTMENT STRATEGY OF ECMC FOUNDATION IS TO DIVERSIFY RISK AND

PROVIDE A RETURN THAT SATISFIES THE SHORT- AND LONG-TERM OBJECTIVES.

THE APPORTIONED INVESTMENT POOL HAS UNFUNDED COMMITMENTS OF

APPROXIMATELY \$483,873,000 IN ALTERNATIVE INVESTMENTS. ECMC FOUNDATION

HAS NO UNFUNDED COMMITMENTS TO THE APPORTIONED INVESTMENT POOL AT

DECEMBER 31, 2022.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GRANTS AWARDED IN A PRIOR YEAR AND RETURNED OR REFUNDED IN 2022. THE

AWARDS WERE CORRECTLY RECORDED IN PRIOR YEARS ON ECMC

FOUNDATION'S BOOKS.

TOTAL TO FORM 990, PART XI, LINE 9

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259,833.

259,833.

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R (Form 990)

ECMC FOUNDATION

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
	-				
	-				
	-				
	-				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b)(c)(d)(e)Primary activityLegal domicile (state or foreign country)Exempt Code sectionPublic charity status (if section		(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?		
				501(c)(3))		Yes	No
EDUCATIONAL CREDIT MANAGEMENT CORP -							
41-1778617, 111 WASHINGTON AVE SO, STE 1400,							
MINNEAPOLIS, MN 55401	GUARANTOR	MINNESOTA	501(C)(3)	LINE 10	ECMC GROUP, INC		х
ECMC GROUP, INC 41-1991995							
111 WASHINGTON AVE SO, STE 1400	1			LINE 12B			
MINNEAPOLIS, MN 55401	EDUCATION FINANCE	DELAWARE	501(C)(3)	TYPE II	N/A		х
ECMC EDUCATION, INC 47-2237488							
111 WASHINGTON AVE SO, STE 1400							
MINNEAPOLIS, MN 55401	CAREER COLLEGES	DELAWARE	501(C)(3)	LINE 2	ECMC GROUP, INC		х
ECMC REVENUE MANAGEMENT CORPORATION -					EDUCATIONAL		
83-1761663, 111 WASHINGTON AVE SO, STE 1400,	STUDENT LOAN DEFAULT				CREDIT MANAGEMENT		
MINNEAPOLIS, MN 55401	RESOLUTION	DELAWARE	501(C)(3)	LINE 10	CORPORATION		х

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

Schedule R (Form 990) 2022



Open to Public Inspection

Employer identification number

41-1990628

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	g) 512(b)(13) rolled zation? No
ECMC SERVICES, INC 83-1763915							
111 WASHINGTON AVE SO, STE 1400	STUDENT LOAN REPAYMENT						
MINNEAPOLIS, MN 55401	SERVICES	DELAWARE	501(C)(3)	LINE 10	ECMC GROUP, INC		х
							1

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)		h)	(i)	(i)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income Share of total Share (related, unrelated, income end-of excluded from tax under asse		ominant income Share of total Share of Dis ated, unrelated, income end-of-year		Share of total Share of Disproportionate Code V amount allocations?			Gene	ral or	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No		
1 NORTH CHINA A EQUITY FUND LLC - 84-4524632, 1 N WACKER DR, CHICAGO, IL 60606	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x		
ATX A-TEAM THE GUILD LP -		21		INCLUDID					14/21	\vdash			
84-3490066, 500 W SECOND ST, STE 1900 163, AUSTIN, TX	-												
78701	INVESTMENTS	тх	N/A	EXCLUDED				x	N/A		x		
AUBREY GEMS PARTNERS, LP - 36-5009933, 800 THIRD AVE, 28TH FL, NEW YORK, NY 10022	INVESTMENTS	NY	N/A	EXCLUDED				x	N/A		x		
BST 052, A SERIES OF SAX CAP FUND III LP - 85-3876811, PO BOX 3217, SEATTLE, WA 98114	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l contr	(i) ction b)(13) rolled tity?
		country)		or trusty		835013		Yes	No
OAKDALE INVESTMENT MANAGEMENT CORP -									
35-2085743, 111 WASHINGTON AVE SO, STE 1400,									
MINNEAPOLIS, MN 55401	HOLDING INVESTMENTS	DE	N/A	C CORP	N/A	N/A	N/A		х
ECMC HOLDINGS CORPORATION - 41-1991992									
111 WASHINGTON AVE SO, STE 1400									
MINNEAPOLIS, MN 55401	STRATEGIC OVERSIGHT	DE	N/A	C CORP	N/A	N/A	N/A		х
EDUCATIONAL CREDIT SERVICES COMPANY -									
41-1992001, 111 WASHINGTON AVE SO, STE 1400,									
MINNEAPOLIS, MN 55401	PRIVATE LOANS	DE	N/A	C CORP	N/A	N/A	N/A		х
ECMC RECORDS & REC MGMT CORPORATION -									
41-1989959, 111 WASHINGTON AVE SO, STE 1400,									
MINNEAPOLIS, MN 55401	DOCUMENT MANAGEMENT	DE	N/A	C CORP	N/A	N/A	N/A		х
ECMC MANAGEMENT SERVICES CORPORATION -									
41-1989960, 111 WASHINGTON AVE SO, STE 1400,]								
MINNEAPOLIS, MN 55401	MANAGEMENT SERVICES	DE	N/A	C CORP	N/A	N/A	N/A		x

Part III	Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of-year assets	() Disprop ate alloc		(i) Code V-UBI amount in box 20 of Schedule	(j) General or managing partner?	(k) Percentage ownership
		country)		sections 512-514)		400010	Yes	No		Yes No	
CHLOE CAPITAL FUND I, LP -											
84-4269068, 700 CASCADILLA											
ST, STE 201, ITHACA, NY											
14850	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
CONCONTINUE OF GEGONDADIES	-										
COMMONFUND CAP SECONDARIES	-										
OPP FUND - 84-2082338, 15 OLD			- /-					L	/-		
DANBURY RD, WILTON, CT 06897	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	X	
CRP VF IV GP, LP - 86-3644095	-										
7600 N CAP OF TX HWY, BLDG B,	1										
AUSTIN, TX 78731	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
ECMC-UV CO-INVESTMENT FUND,											
LP - 81-3873029, 104 W 40TH											
ST, STE 1600, NEW YORK, NY											
10018	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
ELEMENTS HEALTH VENTURES II											
LLC - 86-2638962, 623 5TH	1										
AVE, 14TH FL, NEW YORK, NY	1										
10022	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
FUND D-2, RIOT VENTURES											
OPPORTUNITY FUND -	1										
92-0652495, 1632 ABBOT KINNEY											
BLVD, VENICE, CA 90291	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
GEM MINING 4 LLC - 87-1562792	1										
550 S MAIN ST, STE 310	1										
GREENVILLE, SC 29601	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
ONRAMP EDUC & WORKFORCE INNOV											
FUND - 84-3999115, 821 E	1										
WASHINGTON AVE, STE 200-G,											
MADISON, WI 53703	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	x	
PC-1 DEVELOPERS LLC -											
83-1603672, 3600 MAYBERRY DR,											
RENO, NV 89509	INVESTMENTS	NV	N/A	EXCLUDED				х	N/A	x	

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	ו)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of	Disprop		Code V-UBI amount in box	Gene	ral or aging	Percentage ownership
or related organization		(state or foreign	entity	excluded from tax under	lincome	end-of-year assets	ate alloc		20 of Schedule	paru		ownersnip
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
R7 FAMILY FUND, LP -	-											
85-1019413, 100 S WACKER DR,	-											
STE 1675, CHICAGO, IL 60606	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x	
RI FUND I, A SERIES OF BOOST												
VC SPV, LP - 87-4641779, PO		CAYMAN										
BOX 3217, SEATTLE, WA 98114	INVESTMENTS	ISLANDS	N/A	EXCLUDED				x	N/A		x	
SUPERIOR SOLUTIONS I, LP -	_											
88-2485015, 111 WASHINGTON	_											
AVE S, STE 1400, MINNEAPOLIS,	4								/-			
MN 55401	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	<u> </u>	x	
TABOR MILLENNIAL FUND, LP -	-											
88-0598843, 11 E 44TH ST, STE	-											
705, NEW YORK, NY 10017	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x	
TABOR OFFSHORE OPPORTUNITIES,												
LTD, 11 E 44TH ST STE 705,		CAYMAN										
NEW YORK, NY 10017	INVESTMENTS	ISLANDS	N/A	EXCLUDED				х	N/A		x	
	4											
UNLESS VENTURES LP -	_											
87-4222103, 1023 WALNUT ST,			- / -									
STE 100, BOULDER, CO 80302	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A	<u> </u>	x	
UP FUND I, A SERIES OF BOOST	-											
VC SPV, LP - 85-1519551, PO	-											
BOX 3217, SEATTLE, WA 98114	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x	
,												
WY FUND I, A SERIES OF BOOST												
VC SPV, LP - 85-1519506, PO												
BOX 3217, SEATTLE, WA 98114	INVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x	
	4											
GENGLOBAL CRYSTAL LLC -	4											
88-2663560, 1302 PACIFC AVE,												
SAN FRANCISCO, CA 94109	INVESTMENTS	DE	N/A	EXCLUDED				Х	N/A		X	

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

UNLESS LGH SPV LLC -	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop ate alloc		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana	ral or aging	Percentage ownership
GENGLOBAL SUNSHINE LLC - 85-3885948, 1302 PACIFC AVE, SAN FRANCISCO, CA 94109 IN UNLESS LGH SPV LLC -		(state or foreign country)	entity	excluded from tax under sections 512-514)	lincome	assets	ate allo	cations?				ownership
85-3885948, 1302 PACIFC AVE, SAN FRANCISCO, CA 94109 IN UNLESS LGH SPV LLC -		country)		Sections 512-514)				-	20 of Schedule	part	ner?	ownersnip
85-3885948, 1302 PACIFC AVE, SAN FRANCISCO, CA 94109 IN UNLESS LGH SPV LLC -							Yes	No	K-1 (F0111 1005)	Yes	No	
85-3885948, 1302 PACIFC AVE, SAN FRANCISCO, CA 94109 IN UNLESS LGH SPV LLC -												
SAN FRANCISCO, CA 94109 II UNLESS LGH SPV LLC -												
UNLESS LGH SPV LLC -	NVESTMENTS	DE	N/A	EXCLUDED				x	N/A		x	
88-0557430, 1023 WALNUT ST,												
STE 100, BOULDER, CO 80302 II	INVESTMENTS	DE	N/A	EXCLUDED				х	N/A		x	
											\rightarrow	

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership	Sec 512(1 contr	(i) ction (b)(13) trolled tity?
		country)		or trust)		assets			No
ECMC TECHNOLOGY SERVICES COROPORATION -									<u> </u>
41-1989958, 111 WASHINGTON AVE SO, STE 1400,									
MINNEAPOLIS, MN 55401	TECHNOLOGY SERVICES	DE	N/A	C CORP	N/A	N/A	N/A		х
ECMC SERVICING CORPORATION - 47-1154366									
111 WASHINGTON AVE SO, STE 1400									
	LOAN SERVICING	DE	N/A	C CORP	N/A	N/A	N/A		x
ECMC PRIVATE MARKET OPPORTUNITIES, LP -									
84-2552668, 156 W 56TH ST, CITYSPIRE BLDG,	1								
	INVESTMENTS	DE	N/A	C CORP	N/A	N/A	N/A		x
									<u> </u>
	1								
	1								
									<u> </u>
	1								
	1								
									<u> </u>
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	-								
									<u> </u>
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	4								
							_		<u> </u>
	4								
	4								
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	4								
	1								
	1								

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		2
b Gift, grant, or capital contribution to related organization(s)		X	
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)			_
f Dividends from related organization(s)	<u>1f</u>		
g Sale of assets to related organization(s)			
h Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)	1j		+
Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)	1 m		
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<u>1n</u>	X	
Sharing of paid employees with related organization(s)		X	+
Reimbursement paid to related organization(s) for expenses	<u>1p</u>		
Reimbursement paid by related organization(s) for expenses		X	+
Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
<u>(3)</u>				
(4)				
<u>(5)</u>				
(6)				

Schedule R (Form 990) 2022 ECMC FOUNDATION

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(۲	1)	(i)	(j)		(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501(org	e all rs sec.	Share of	Share of	Dispr tior	opor-	Code V-UBI	Genera	or Perc	entage
of entity		(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	. 501(org	c)(3) s.?	total	end-of-year	tion allocat	iate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	manag partne	_{r?} own	nership
		country)	sections 512-514)	Yes		income	assets	Yes	No	(Form 1065)	Yes N	10	
											\square		
											\square		

Schedule	
Part VI	Supplemental Information
	Provide additional information for responses to questions on Schedule R. See instructions.
SCH R, F	ART I - DISREGARDED ENTITIES OF RELATED ORGANIZATIONS
1(A)-NAM	E: OAKDALE STUDENT LOAN FUNDING, LLC (27-1914648), 111
WASHINGI	ON AVE SO STE 1400 MINNEAPOLIS MN 55401.
WASHINGI	ON AVE SO, STE 1400, MINNEAPOLIS, MN 55401.
	ON AVE SO, STE 1400, MINNEAPOLIS, MN 55401. MARY ACTIVITY: HOLDING FFELP LOANS
1(B)-PRI	MARY ACTIVITY: HOLDING FFELP LOANS
1(B)-PRI	
1(B)-PRI 1(C)-LEG	MARY ACTIVITY: HOLDING FFELP LOANS AL DOMICILE: DE
1(B)-PRI 1(C)-LEG	MARY ACTIVITY: HOLDING FFELP LOANS
1(B)-PRI 1(C)-LEG	MARY ACTIVITY: HOLDING FFELP LOANS AL DOMICILE: DE

WASHINGTON AVE SO, STE 1400, MINNEAPOLIS, MN 55401.

2(B)-PRIMARY ACTIVITY: SUPPORT SERVICES FUNCTIONS

2(C)-LEGAL DOMICILE: DE

2(F)-DIRECT CONTROLLING ENTITY: ECMC GROUP, INC.

3(A)-NAME: PATRIOT STUDENT LOAN CAPITAL, LLC (81-3501777), 111

WASHINGTON AVE SO, STE 1400, MINNEAPOLIS, MN 55401.

3(B)-PRIMARY ACTIVITY: TRUST STUDENT LOANS

3(C)-LEGAL DOMICILE: DE

3(F)-DIRECT CONTROLLING ENTITY: ECMC GROUP, INC.

4(A)-NAME: SUPERIOR SOLUTIONS I GP, LLC (88-2460810), 111 WASHINGTON

AVE SO, STE 1400, MINNEAPOLIS, MN 55401.

4(B)-PRIMARY ACTIVITY. INVESTMENTS.

4(C)-LEGAL DOMICILE. DE.

4(F)-DIRECT CONTROLLING ENTITY. ECMC GROUP, INC.

SCHEDULE R, PART V - TRANSACTIONS WITH RELATED ORGANIZATIONS:

LINE 1B - GIFT, GRANT, OR CAPITAL CONTRIBUTION TO RELATED

ORGANIZATION(S):

\$2,150,000 GRANTS AWARDED BY ECMC FOUNDATION TO EDUCATIONAL CREDIT

MANAGEMENT CORPORATION FOR COLLEGE SUCCESS INITIATIVES.

232165 09-14-22

Schedule R (Form 990) 2022 ECMC FOUNDATION

ECMC FOUNDATION

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

LINE 1B - GIFT, GRANT, OR CAPITAL CONTRIBUTION TO RELATED

ORGANIZATION(S):

\$500,000 GRANTS AWARDED TO ECMC GROUP, INC. FOR CAREER READINESS

INITIATIVES.

LINE 1C - GIFT, GRANT, OR CAPITAL CONTRIBUTION FROM RELATED

ORGANIZATION(S):

\$450,000,000 NONCASH CONTRIBUTION FROM ECMC GROUP, INC. TO INCREASE

ECMC FOUNDATION'S FRACTIONAL OWNERSHIP INTEREST IN THE ECMC GROUP, INC.

APPORTIONED INVESTMENT POOL IN ORDER TO PROVIDE ADDITIONAL FUNDING FOR

PROGRAMS WHICH SUPPORT ECMC FOUNDATION'S MISSION TO IMPROVE HIGHER

EDUCATION AND CAREER SUCCESS AMONG UNDESERVED POPULATIONS THROUGH

EVIDENCE-BASED INNOVATION. \$51,572,000 CASH CONTRIBUTION FROM ECMC

GROUP, INC.

LINE 1N - SHARING OF FACILITIES, EQUIPMENT, MAILING LISTS, OR OTHER

ASSETS WITH RELATED ORGANIZATION(S):

\$528,399 ALLOCATED EXPENSES FOR FACILITIES, EQUIPMENT, MAILING LISTS,

OR OTHER ASSETS SHARED WITH ECMC GROUP, INC.

LINE 10 - SHARING OF PAID EMPLOYEES WITH RELATED ORGANIZATION(S):

\$1,851,777 ALLOCATED EXPENSES FOR PAID EMPLOYEES SHARED WITH ECMC

GROUP, INC.

LINE 10 - SHARING OF PAID EMPLOYEES WITH RELATED ORGANIZATION(S):

\$722,283 ALLOCATED EXPENSES FOR PAID EMPLOYEES SHARED WITH ECMC SHARED

SERVICES COMPANY, LLC. A WHOLLY OWNED SUBSIDIARY OF ECMC GROUP, INC., A

RELATED ORGANIZATION.

232165 09-14-22

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

LINE 1Q - REIMBURSEMENT PAID BY RELATED ORGANIZATION(S) FOR EXPENSES:

\$124,601 PAID BY ECMC GROUP, INC. FOR EXPENSES.

Schedule R (Form 990) 2022

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